

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

Rachel Suzanne Dodge BA (Hons) Ed QTS, MA (Ed)

Thesis submitted to the Department of Applied Psychology of
Cardiff School of Health Sciences in partial fulfilment
of the requirements for the degree of Doctor of Philosophy

Director of Studies: Dr Lalage Sanders

Second Supervisor: Dr Jan Huyton

Third Supervisor: Dr Annette Daly

Date of Submission: February 2016

This research was undertaken under the auspices of Cardiff Metropolitan University

DECLARATION

This work has not previously been accepted in substance for any degree and is not being concurrently submitted in candidature for any degree.

Signed (candidate)

Date

STATEMENT 1

This thesis is the result of my own investigations, except where otherwise stated.

Where correction services have been used, the extent and nature of the correction is clearly marked in a footnote(s).

Other sources are acknowledged by footnotes giving explicit references. A bibliography is appended.

Signed (candidate)

Date

STATEMENT 2

I hereby give consent for my thesis, if accepted, to be available for photocopying and for inter-library loan, and for the title and summary to be made available to outside organisations.

Signed (candidate)

Date

DEDICATION

This thesis is dedicated to Andy, Josh and Carys.

Thank you for your patience, support and encouragement.

ACKNOWLEDGEMENTS

Firstly I would like to extend sincere thanks to my supervisory team, Drs Lalage Sanders, Jan Huyton and Annette Daly, for their encouragement, support and advice, and more importantly their optimism and enthusiasm throughout the course of my research. You have never doubted my ability; even at times when I doubted myself.

I would like to thank all my wonderful friends, family and work colleagues for the support and understanding they have shown me throughout my PhD. Thank you to Josh and Carys for allowing me to hide away and study. You have never made me feel guilty about the time away from you and for that I will be forever grateful.

Special thanks to my husband Andy who has been with me throughout the whole process. You have always been patient, kind, supportive and encouraging. Without your support I would never had got this far.

I would also like to extend my thanks and gratitude to the academic, technical and administrative staff of the Schools of Health Sciences who have provided a range of assistance and support. In particular I would like to thank Dr Andy Watts who, along with Dr Lalage Sanders, supported me with statistics; an area that I thought I would never conquer!

Abstract

Wellbeing is an emerging science. However, there are a number of differing views regarding how to define it as a concept, whether it is able to be measured and the potential for enhancing it at an individual level. The aim of this research is to investigate the effectiveness of a pastoral intervention programme designed to enhance the wellbeing of Further Education (FE) students.

The mixed methods evaluation study reported here selected a sample of (N = 244) FE students who undertook a ten-week pastoral intervention programme delivered by their tutors that aimed to highlight the strategies they could employ to increase their personal resource bank. The Wellbeing in Further Education Students Survey (WFESS) was used to measure the students' perception of how resourced and challenged they felt in ten life areas, alongside the impact of challenges they faced and the level of strategies they used to deal with the challenges. This measure was taken before and after the intervention.

The results highlight a significant increase in the perception of feeling resourced following the intervention. Feedback from the delivery team of tutors highlighted a number of aspects of the intervention programme that received positive feedback from the students. The tutors also noted that the intervention had some positive effects in terms of enhancing their own wellbeing.

A number of limitations occurred during the research. Access both to the students and the tutors involved in the programme was restricted. However, this research offers a significant step towards the use of intervention programmes with FE to enhance the wellbeing of students and staff, through the increase of awareness of

personal resource strategies that can be employed to counteract the challenges they face in life.

DEFINITION OF TERMS AND ABBREVIATIONS

BERA	British Educational Research Association
EMA	Educational Maintenance Allowance
ESTYN	The education and training inspectorate for Wales.
FE	Further Education
GDP	Gross domestic product
L6	Lower Sixth (students generally aged between 16 and 17)
OFSTED	The Office for Standards in Education, Children's Services and Skills in England.
ONS	Office of National Statistics
PCI	Personal Concerns Inventory (Cox and Klinger, 2002)
PSHE	Personal, Social, Health and Economic Education
SDQ	The Strengths and Difficulties Questionnaire (Goodman, 1997)
U6	Upper Sixth (students generally aged between 17 and 18)
WAG	Welsh Assembly Government
WFESS	Wellbeing in Further Education Students Survey
WG	Welsh Government

Published papers and conference presentations

Co-authored publications:

- Dodge, R., Daly, A., Huyton, J., Sanders, L. (2012). The challenge of defining wellbeing. *International Journal of Wellbeing*, 2(3), 222-235.
- Wassell. E. and Dodge. R. (2015) A Multidisciplinary Framework for Measuring and Improving Wellbeing. *International Journal of Sciences: Basic and Applied Research Volume 21, No 2, pp 97-107*

Publications:

- Dodge, R (2015) All secondary schools could do with a head of well-being
The Conversation 7th January <https://theconversation.com/all-secondary-schools-could-do-with-a-head-of-well-being-35874>

Conference presentations:

- Poster presented at the British Psychological Society Welsh Branch Conference on Sustainable Well-Being in September 2011 (Defining Wellbeing).
- Oral presentation on ‘Developing a measure of wellbeing for college students’ at the Second International Wellbeing and Public Policy Conference, Hamilton College, New York in June, 2014.

Contents

Chapter One.....	1
<u>Introduction – Research Rationale.....</u>	<u>1</u>
<u>1.2 Why wellbeing?.....</u>	<u>4</u>
1.2.1 Philosophy.....	5
1.2.2 Psychology.....	5
1.2.3 Policy.....	6
1.2.4 Wellbeing of young people	8
1.2.5 Adolescence	12
<u>1.3 Wellbeing in Further Education.....</u>	<u>13</u>
<u>1.4 Theoretical approach to enhancing wellbeing</u>	<u>15</u>
<u>1.5 Aims and Objectives of this Research.....</u>	<u>17</u>
1.5.1 Research aim	17
1.5.2 Objectives.....	17
<u>1.6 Thesis statement.....</u>	<u>18</u>
<u>1.7 Conclusion.....</u>	<u>20</u>
<u>1.8 Summary</u>	<u>20</u>
Chapter Two – Defining wellbeing	22
<u>2.1 Introduction</u>	<u>22</u>
<u>2.2 The historical background to wellbeing research.....</u>	<u>23</u>
<u>2.3 What constitutes wellbeing?.....</u>	<u>24</u>
<u>2.4 Equilibrium.....</u>	<u>30</u>
<u>2.5 Challenges</u>	<u>32</u>
<u>2.6 Resources</u>	<u>34</u>
<u>2.7 A new definition of wellbeing</u>	<u>36</u>
<u>2.8 The considered strengths of the new definition</u>	<u>40</u>
2.8.1 Simplicity.....	40
2.8.2 Universal application.....	41
2.8.3 Optimism.....	41
2.8.4 Basis for measurement	42
2.8.5 Current use of the definition	42
<u>2.9 Conclusion.....</u>	<u>44</u>
<u>2.10 Summary</u>	<u>44</u>
Chapter Three – Wellbeing Interventions	46
<u>3.1 Can wellbeing be enhanced?.....</u>	<u>46</u>

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

<u>3.2 Are interventions an effective way to enhance wellbeing?</u>	<u>49</u>
<u>3.3 What makes an Intervention Successful?</u>	<u>51</u>
<u>3.4 Can wellbeing interventions be used in Education?</u>	<u>57</u>
<u>3.5 Is there a need for an Intervention for FE Students in Wales?</u>	<u>61</u>
<u>3.6 Four key influences on the content of the intervention</u>	<u>66</u>
3.6.1 Human Givens Theory – Griffin and Tyrell (2003)	66
3.6.2 Positive Educational Practices (PEPs) Framework – Noble and McGrath (2008)	68
3.6.3 Protective personal factors that contribute to resilience and wellbeing - Noble and McGrath, 2012	70
3.6.4 Abraham and Michie’s Taxonomy of Behaviour Change techniques (2008)	72
<u>3.7 Conclusions</u>	<u>74</u>
<u>3.8 Summary</u>	<u>74</u>
<i>Is it possible to enhance wellbeing?</i>	74
<i>What makes an intervention successful?</i>	75
<i>Do interventions work in educational settings?</i>	75
<i>Is there a need for a wellbeing intervention for FE students in Wales?</i>	76
<i>What needs to be included in a successful wellbeing intervention?</i>	76
Chapter Four – Focus Group Research	78
<u>4.1 Introduction</u>	<u>78</u>
<u>4.1.1 Subjective Wellbeing</u>	<u>78</u>
<u>4.1.2 Developing a wellbeing measure</u>	<u>79</u>
<u>4.1.3 Why use focus groups?</u>	<u>80</u>
<u>4.2 Materials and Sample</u>	<u>81</u>
4.3 Ethics	81
4.4 Procedure	82
<u>4.5 Results</u>	<u>85</u>
4.5.1 Future employment/higher education	86
4.5.2 Exams/college assignments	88
4.5.3 Friends/social relationships	89
4.5.4 Other issues relating to college	90
4.5.5 Confidence	91
4.5.6 Family and Relatives	92
4.5.7 Healthy lifestyle	93
4.5.8 Finance	94
4.5.9 Personal safety	96

4.5.10 Evaluation of the model	97
4.6 Reflective considerations	98
4.7 Conclusion.....	101
4.8 Summary	103
Chapter Five – Questionnaire Development	105
5.1 Introduction	105
5.2 Ethical Issues	108
5.3 Measuring wellbeing.....	110
5.4 Published Measures of Wellbeing	111
5.5 Why use a questionnaire?	115
5.6 Questionnaire development	116
5.7 The structure of the questionnaire	117
5.8 Pilot	125
5.8.1 Validity	127
5.9 Survey 1 – September 2012	131
5.9.1 Method	131
5.9.2 Results.....	131
5.9.3 Discussion.....	136
5.10 January data collection.....	137
5.10.1 Method	137
5.10.2 Results.....	138
5.10.3 Discussion.....	141
5.11 Conclusion.....	142
5.12 Summary	142
Chapter Six - Methodology and Descriptive Data for the pilot Pastoral Intervention Programme	145
6.1 Introduction	145
6.2 Ethics.....	145
6.3 Design.....	148
6.4 Sample and Recruitment.....	149
6.5 Materials	151
6.6 Intervention	151
6.6.1 Session 1 - Your amazing brain.....	153
6.6.2 - Building the resource bank.....	155
6.6.3 Session 3 - Individual Thought Patterns	157

6.6.4 Session 4 - Confidence.....	158
6.6.5 Session 5 - Relationships	160
6.6.6 Session 6 - Positive communication	163
6.6.7 Session 7 - Healthy living.....	164
6.6.8 Session 8 - Stress Management.....	167
6.6.9 Session 9 - Live for the moment	169
6.6.10 Session 10 - Reflection	171
<u>6.7 Effectiveness of intervention content</u>	<u>174</u>
<u>6.8 Procedure.....</u>	<u>178</u>
<u>6.9 Conclusion.....</u>	<u>180</u>
<u>6.10 Summary</u>	<u>180</u>
Chapter Seven – Learner Coach Focus Group	182
<u>7.1 Introduction</u>	<u>182</u>
<u>7.2 Materials and Sample.....</u>	<u>183</u>
<u>7.3 Procedure.....</u>	<u>184</u>
<u>7.4 Results.....</u>	<u>185</u>
<u>7.4.1 Feedback on the intervention sessions</u>	<u>188</u>
7.4.1.1 Session One - Knowledge of the teenage brain	188
7.4.1.2 Session Two - Building the Resource Bank	190
7.4.1.3 Session Three - Individual Thought Patterns	191
7.4.1.4 Session Four - Confidence	193
7.4.1.5 Session Five - Relationships	193
7.4.1.6 Session Six - Positive Communication.....	195
7.4.1.7 Session Seven - Healthy Lifestyle.....	196
7.4.1.8 Session Eight - Stress Management.....	197
7.4.1.9 Session Nine - Live for the moment.....	197
7.4.1.10 Session Ten – Reflection	200
7.4.2 Emerging Themes.....	201
7.4.2.1 Variety	201
7.4.2.2 Opportunity for discussion.....	202
7.4.2.3 Timescale	203
7.4.2.4 Lack of understanding	204
7.4.2.5 Immaturity	206
<u>7.5 Conclusion.....</u>	<u>209</u>
<u>7.6 Summary</u>	<u>210</u>

Chapter Eight - Results of the ‘Resource-Full’ Pastoral Intervention	213
<u>8.1 Introduction</u>	<u>213</u>
<u>8.2 Quantitative analysis.....</u>	<u>213</u>
8.2.1 Parametric Vs Non-parametric testing	213
8.2.2 Normality	214
8.2.3 Data type.....	216
8.2.4 Outliers.....	217
8.2.5 Internal Reliability	218
8.2.5.1 Impact	218
8.2.5.2 Strategy	219
8.2.6 Nonparametric testing of the WFESS	219
8.2.6.1 ‘How resourceful I feel’	220
8.2.6.2 ‘How challenged I feel’	222
8.2.6.3 Impact of challenges	224
8.2.6.4 Strategy	226
<u>8.3 Conclusion.....</u>	<u>227</u>
<u>8.4 Summary</u>	<u>227</u>
Chapter nine – Discussion	229
<u>9.1 Introduction</u>	<u>229</u>
<u>9.2 Review of findings</u>	<u>230</u>
9.2.1 WFESS Findings	231
9.2.2 Learner Coach Focus Group	231
9.2.3 The Development of the WFESS.....	234
<u>9.3 Developing a pastoral intervention for enhancing wellbeing.....</u>	<u>235</u>
9.3.1 Focus on resources.....	236
9.3.2 Theoretical frameworks	238
<u>9.4 Limitations.....</u>	<u>238</u>
9.4.1 Access.....	238
9.4.2 Fidelity of implementation	239
9.4.3 Duration of study	241
<u>9.5 Overall Strengths of the research.....</u>	<u>242</u>
<u>9.6 Developing a measure of wellbeing</u>	<u>243</u>
9.6.1 Can wellbeing be measured?	244
9.6.2 The stages of survey development.....	245
<u>9.7 The theoretical definition of wellbeing</u>	<u>252</u>

9.7.1 Simplicity.....	253
9.7.2 Universal Application	254
9.7.4 Basis for Measurement	256
9.7.5 The definition as a whole	259
9.7.6 Resources Vs Challenges	260
9.7.7 Cognitive-relational theory (Lazarus and Folkman, 1984)	261
9.7.8 Conservation of resources theory (Hobfoll, 1989)	261
9.7.9 Broaden and Build theory (Fredrickson, 1998).....	261
<u>9.8 Applications and future directions</u>	<u>263</u>
9.8.1 Impact on policy	263
9.8.2 Building bridges between researchers and practitioners	265
9.8.3 Methodological Approach.....	268
<u>9.9 Practical implications of the research</u>	<u>269</u>
<u>9.10 Directions for future research</u>	<u>271</u>
9.10.1 Involvement of parents	271
9.10.2 Self-selection.....	273
9.10.3 Adolescent valence and engagement.....	273
9.10.4 Developing the pilot beyond the thesis.....	274
<u>9.11 Conclusions.....</u>	<u>274</u>
References	277
Appendix A – UK Policy Documents at the start of the research.....	363
Appendix B – Welsh policy documents at the start of the research.....	365
Appendix C - Summary of data from WHO (2008) Pp.51-152 (Data drawn from 4396 students in Wales)	366
Appendix D - Summary of where wellbeing features in the new ESTYN framework (2010)	367
Appendix E – Human Givens Theory (Griffin and Tyrell, 2003)	368
Appendix F - The Positive Educational Practices (PEPs) Framework: A positive psychology approach to pupil wellbeing (Noble and McGrath, 2008).	369
Appendix G - Definitions of 26 Behaviour Change Techniques and Illustrative Theoretical Frameworks (Abraham and Michie 2008, p.382)	370
Appendix H - Measuring and Improving Wellbeing in Further Education Students.	371
Appendix I – Information and Consent form.....	374
Appendix J – Raw Data from Student Focus Groups	378
Appendix K – The original SDQ S11-7	380
Appendix L – January WFESS 2012 Measure (sample pages)	382

Appendix M - Comparison of Life Area means between Time 1 and Time 2.....	384
Appendix N – Short version of the WFESS.....	385
<u>Appendix O – College Agreement</u>	<u>386</u>
Appendix P – Learner Coach Job Description	388
Appendix Q – ‘Resource-Full’ Student Survey	390
Appendix R – Learner Coach Anonymous Survey.....	393
Appendix S – Learner Coach Nodes.....	395
Appendix T – Histograms and p-plots	396
Appendix U – Median Scores for Strategies over time.....	400
Appendix V – Citations of Dodge <i>et al.</i> (2012)	401

List of Tables

<u>Table 3.1 Focus of Wellbeing Interventions</u>	<u>57</u>
<u>Table 3.2 Skills identified by Noble and McGrath (2012) and the research evidence supporting them</u>	<u>70</u>
<u>Table 4.1 Phases of Thematic Analysis</u>	<u>84</u>
<u>Table 4.2 Introduction to the critique of the definition</u>	<u>99</u>
<u>Table 5.1 Transforming the wording of the SDQ questions</u>	<u>120</u>
<u>Table 5.2 Comparison of life areas</u>	<u>121</u>
<u>Table 5.3 Original PCI Rating Sheet</u>	<u>122</u>
<u>Table 5.4 Table demonstrating revised life areas</u>	<u>127</u>
<u>Table 5.5 Table demonstrating life areas chosen by participants</u>	<u>132</u>
<u>Table 5.6 Spearman’s rank correlations for impact of challenges and strategies for challenges</u>	<u>134</u>
<u>Table 5.7 Pearson Correlations for overall Impact and Strategy Scores</u>	<u>136</u>
<u>Table 5.8 Revised order for life areas</u>	<u>137</u>
<u>Table 6.1 Mapping of the ‘Resource-Full’ sessions across the four key influencing concepts/frameworks</u>	<u>175</u>
<u>Table 8.1 Skewness and Kurtosis compared to twice the value of standard error</u>	<u>215</u>
<u>Table 8.2 Z Scores for Skewness and Kurtosis</u>	<u>215</u>
<u>Table 8.3 Shapiro-Wilk Test</u>	<u>215</u>
<u>Table 8.4 : Items on the Impact of challenges scale over time</u>	<u>225</u>
<u>Table 8.5: Strategies over time</u>	<u>227</u>

List of Figures

<u>Figure 1.1: Data on the term ‘wellbeing’</u>	<u>2</u>
<u>Figure 1.2 The School Effectiveness Framework</u>	<u>10</u>
<u>Figure 1.3 The Pedagogy Model.....</u>	<u>11</u>
<u>Figure 1.4 The Self-determination Continuum</u>	<u>16</u>
<u>Figure 1.5 Process of the research</u>	<u>20</u>
<u>Figure 2.1: Headey and Wearing’s (1991) stocks and flows framework (p. 56)</u>	<u>31</u>
<u>Figure 2.2: Cummins’ Changing Levels of SWB (2010, p. 5).....</u>	<u>33</u>
<u>Figure 2.3: Demonstration of the relationship between challenges and skills.....</u>	<u>34</u>
<u>Figure 2.4: Definition of Wellbeing</u>	<u>37</u>
<u>Figure 3.1 Sustainable Happiness Model</u>	<u>48</u>
<u>Figure 3.2 Model of Psychological Mediators and Moderators Underlying the Efficacy of Positive Activity Interventions.....</u>	<u>52</u>
<u>Figure 5.1 Design stages of the WFESS.....</u>	<u>117</u>
<u>Figure 5.2 Word cloud demonstrating words used by focus group participants to describe wellbeing.....</u>	<u>129</u>
<u>Figure 5.3 Box plot demonstrating difference in impact and strategy scores for Future employment.....</u>	<u>133</u>
<u>Figure 5.4 Box plot demonstrating difference in impact and strategy scores for personal safety</u>	<u>133</u>
<u>Figure 5.5 Comparison of Life Area means for Impact between Time 1 and Time 2</u>	<u>139</u>
<u>Figure 5.6 Comparison of Life Area means for Strategy between Time 1 and Time2.....</u>	<u>140</u>
<u>Figure 6.1 Experimental Learning stages.....</u>	<u>172</u>
<u>Figure 6.2 Model for self-determination.....</u>	<u>173</u>
<u>Figure 7.1: Graph to demonstrate the positive and negative perception of the Learner Coaches to each ‘Resource-Full’ Session.....</u>	<u>186</u>
<u>Figure 7.2: Pie chart to demonstrate percentage of contributions from individual participants</u>	<u>187</u>
<u>Figure 7.3: Graph to demonstrate the balance of positive and negative comments from the Learner Coaches during the focus group discussion</u>	<u>188</u>
<u>Figure 7.4 Session one iconography for synaptic pruning</u>	<u>208</u>
<u>Figure 7.5 Session one iconography for personal resource bank</u>	<u>208</u>
<u>Figure 8.1 ‘How resourceful I feel’ over time</u>	<u>220</u>

<u>Figure 8.2 Resources score over time</u>	221
<u>Figure 8.3 ‘How challenged I feel’ over time</u>	222
<u>Figure 8.4 Mean scores for challenges</u>	223
<u>Figure 8.5 Impact of challenges over time</u>	224
<u>Figure 8.6 Boxplot for Strategy Scores</u>	226
<u>Figure 9.1 Diagram to demonstrate newly proposed definition of wellbeing</u>	260
<u>Figure 9.2 The dynamic model of wellbeing (adapted from Thomson and Marks (2008) and the Centre for Wellbeing (2011))</u>	262

Chapter One

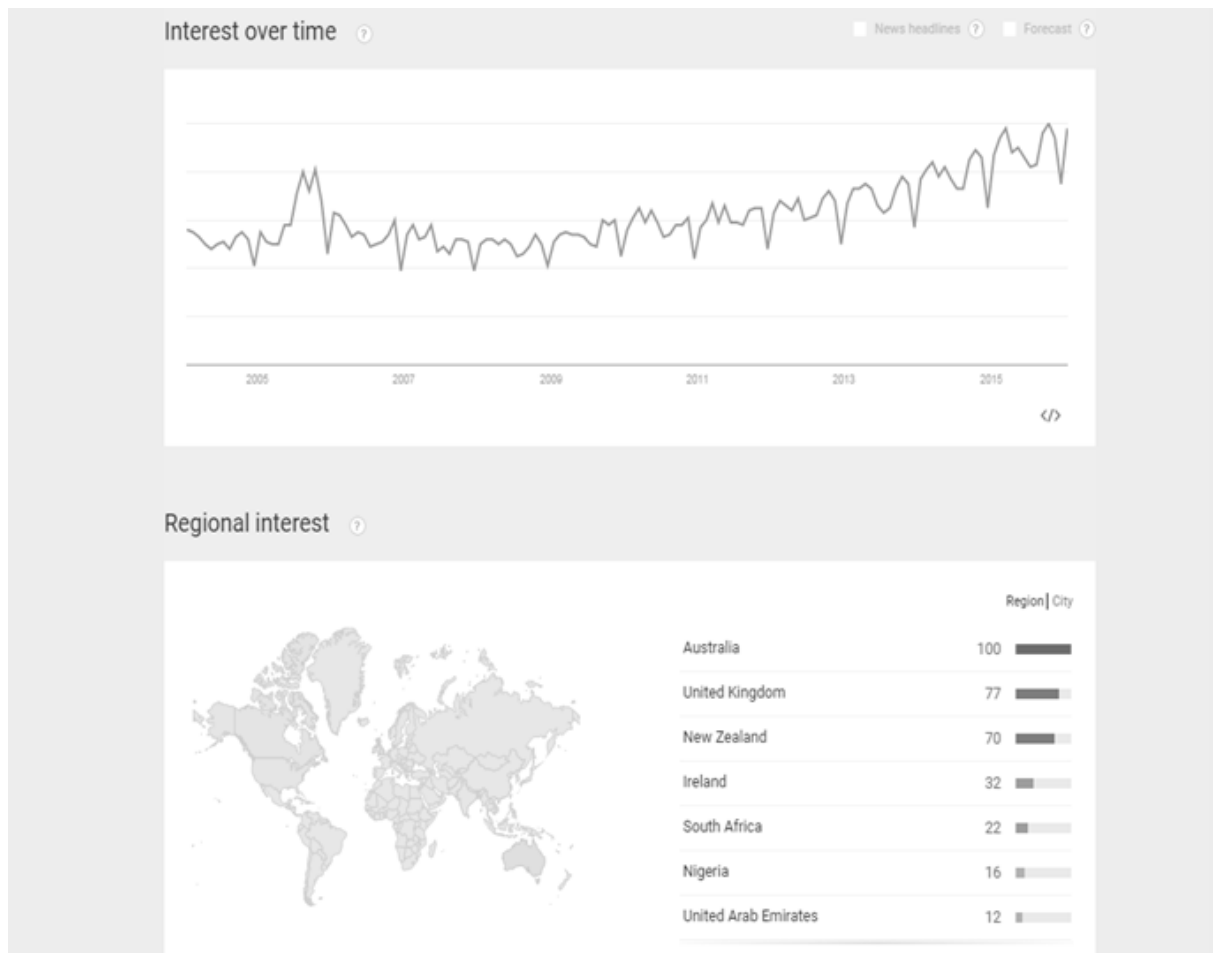
Introduction – Research Rationale

I used to think that the topic of positive psychology was happiness... I now think that the topic of positive psychology is well-being, that the gold standard for measuring well-being is flourishing, and that the goal of positive psychology is to increase flourishing (Seligman, 2011, p. 13).

The pursuit of wellbeing is not new; it can be traced all the way back to the writings of Aristotle. It is perhaps only recently that the concept of wellbeing has become the focus of research, social discourse and political debate. Wellbeing is at the heart of the movement towards positive psychology with its focus on positive individual traits and resources that support wellbeing (Seligman & Csikszentmihalyi, 2000). In the UK the term was first introduced in government in the Local Government Act 2000. Since that time research and policy suggests that the focus has changed from a reactive approach to individual's health and welfare to the idea that individuals could have a role in harnessing their own levels of life satisfaction.

From a wider societal perspective, the word and concept of wellbeing has become prevalent. Professor Vicki Bruce (2015) believes that one reason for this increase in attention is that 'wellbeing, however defined, can be applied to individuals, to groups or indeed to societies'. What started as an emerging idea; has now gathered a growing interest, which has gained particular attention in Australia and the UK:

Figure 1.1: Data on the term ‘wellbeing’



Data retrieved from Google Trends (2016)

This increasing interest in wellbeing happened for a number of reasons. As far back as 1974 Easterlin maintained that despite economic growth, human satisfaction had not increased. This became known as the Easterlin paradox. This feeling was echoed by Layard (2005) who stated that:

There is a paradox at the heart of our lives... as Western societies have got richer, their people have become no happier (p3.).

Gray, Lobao, and Martin (2012) proposed that this increase in attention regarding wellbeing came at a particularly crucial time. They state that the global financial crisis of 2008– 2009, and the deep recession it triggered in Western economies,

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

illustrated that focussing on ever increasing Gross Domestic Product, (GDP), was not resulting in increased wellbeing for the vast majority of people. Consequently, in response to the financial crisis, the Stiglitz *et al.* report (2009) specifically recommended that measures of wellbeing were incorporated into national surveys. Miller, Marks, and Michaelson (2008) explain that this all corresponded with a substantial body of scientific evidence which started to explain the nature and causes of individual and societal wellbeing. Therefore, this 'new evidence-based vision of how we can live better' (Layard, 2005, p.ix.) saw a number of disciplines (neuroscience, sociology, economics, philosophy and psychology) working together towards a common goal.

Correspondingly, this growth in focus was parallel to the word wellbeing appearing in educational official discourse over the last twenty years (Wyn, 2009). This may not be unexpected when research has demonstrated that higher levels of education and academic achievement lead to better health (Bradley and Greene, 2013; Suhrcke and de Paz Nieves, 2011) and that higher levels of wellbeing result in improved academic achievement (Durlak et al., 2011; Noble and McGrath, 2008). Consequently, Waters (2011) proposed that wellbeing was the key for 21st century education. However, Wells (2000) highlighted that educational institutions were under growing pressure to demonstrate academic success and it was 'more important than ever not to lose sight of their influence on the ... wellbeing of their children' (p.161). Bonell *et al.* (2014) echoed this feeling by arguing that:

education policy in England increasingly encourages schools to maximise students' academic attainment and ignore their broader wellbeing (p.1).

They highlighted that other countries, such as Finland, Sweden, Australia, and Singapore, placed more attention on the importance of student wellbeing in comparison to the UK. This resonates with the proposal from Layard (2005) that schools in the UK needed a subject taught to years one (age 5-6) through to twelve (age 16-17) that focused on wellbeing. His proposal was in response to his feeling that Personal, Social and Health Education (PSHE) was:

regrettably ... often taught by non-specialist teachers ... and its purpose is not radical enough – it should aim to produce a happier generation of adults than the current generation (p.201).

Consequently, it could be argued that there was a gap in knowledge between the need to develop wellbeing in education and how this could be achieved in practice. Educators therefore required implicit guidance around understanding what wellbeing actually meant as a concept and the mechanisms behind how to enhance it in students.

At present there is no universally agreed way of measuring or enhancing wellbeing. Therefore, there exists a need to develop reliable and valid means of assessing, measuring and enhancing wellbeing in an educational setting. This will further our understanding of the wellbeing of students and inform on how best wellbeing can be enhanced in order for students to develop lasting strategies to maintain their own wellbeing. Hence, this thesis explores the effectiveness of a pastoral intervention programme designed to enhance the wellbeing of students.

1.2 Why wellbeing?

Wellbeing is a commodity that is perceived as desirable and much sought after according to Sointu (2005) who described it as a 'virtue'. The word 'wellbeing' itself has a positive tone which could well lead to individuals desiring the knowledge of

how to achieve it (White 2008; Weijers and Jarden, 2011). However, this quandary seems to have endured throughout history despite philosophers and psychologists providing abundant suggestions on how to attain it.

1.2.1 Philosophy

Wellbeing has been the concern of philosophers since Aristotle. From a philosophical perspective wellbeing is seen as what is ultimately good for an individual. However, the philosophical view of wellbeing also encompasses the negative aspects of a person's life. Consequently, due to this bi-polar view, some philosophers believe that it is better to use the term wellbeing rather than happiness (Crisp, 2008). Philosophy has long battled with the intellectual debate between hedonistic views, which focus on the presence of positive affect and the absence of negative affect, and Aristotle's idea of Eudaimonia - the focus on living a full and satisfying life. However, despite the debate, there has been criticism of philosophy for not providing us with practical answers to the quest for wellbeing (Irvine, 2012).

1.2.2 Psychology

In more recent years, the study of wellbeing has moved from the domain of philosophy to that of psychology. This started with William James, the noted 19th century philosopher/ psychologist, who stated that aiming for happiness helped people live more flourishing lives (James, 1998). A less uplifting view was voiced by Freud whose stated goal was to turn 'hysterical misery into ordinary human unhappiness' (Bruer and Freud, 1957).

From this point on two approaches emerged in psychology: the hedonic tradition, which accentuated constructs such as happiness, positive affect, low negative affect, and satisfaction with life (e.g., Bradburn, 1969; Diener, 1984; Kahneman,

Diener, and Schwarz, 1999; Lyubomirsky and Lepper, 1999); and the eudaimonic tradition, which highlighted positive psychological functioning and human development (e.g., Rogers, 1961; Ryff, 1989a, 1989b; Waterman, 1993). The twentieth century then saw the start of the positive psychology movement. Although it is Seligman who is often hailed as the leader of this movement, the term was first coined by Maslow in the last chapter of his book 'Motivation and Personality' (1954), entitled "Toward a Positive Psychology." In this chapter, Maslow clearly states the need for psychology to take a more balanced account of human nature. He believed that psychology had an over emphasis on negative aspects of behaviour rather than considering an individual's potential, virtues and aspirations. Over 40 years later Seligman echoed this feeling on the first day of his presidency of the American Psychological Society (APA). After years of studying the pessimistic theory of learned helplessness he clearly stated that it was time for psychology to focus on researching how to enable individuals to 'flourish' (Seligman, 1998, cited in Wallis, 2005, online). Since then psychological interest in wellbeing has grown, indeed the science of wellbeing is often seen as a young and rapidly evolving discipline (Marcs and Thompson, 2008). Because of this wellbeing has caught the attention of policy makers across the world. Indeed, Diener and Seligman (2004) argue that wellbeing should become a central focus for all policy makers.

1.2.3 Policy

Wellbeing has clearly become a current priority for many countries around the world in this millennium. This may not come as a surprise as few people would argue with the fact that governments should be looking at ways to increase the

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

wellbeing of their people (Stiglitz *et al.*, 2010; Bacon *et al.*, 2010). This priority has been reflected worldwide and Diener and Seligman (2004) interestingly state that conferences on wellbeing were being attended as much by economists as by psychologists.

The picture is no different when we view it from a UK perspective. Indeed, the recession of 2008-2009 has seemed to focus the attention more on wellbeing, especially with regards to how to make individuals more resilient and able to avoid factors that could damage their wellbeing (Bacon *et al.*, 2010; Layard, 2011). The 2010 Conservative manifesto (Conservative Party, 2010) and the Coalition Government's Budget 2010 Report (HM Treasury, 2010) placed an emphasis on wellbeing in the UK. On 25th November 2010 David Cameron justified this prominence on wellbeing from his government as he felt that this message had not yet been fully taken notice of by previous governments. To make his point even stronger Cameron went on to quote part of Robert Kennedy's 1968 address to the University of Kansas:

... the gross national product does not allow for the health of our children, the quality of their education, or the joy of their play. It does not include the beauty of our poetry or the strength of our marriages; the intelligence of our public debate or the integrity of our public officials. It measures neither our wit nor our courage; neither our wisdom nor our learning; neither our compassion nor our devotion to our country; it measures everything, in short, except that which makes life worthwhile.

At a political level Cameron does not stand alone. Wellbeing has become a non-party political issue with all three major political parties supporting its importance. It would seem that this emphasis is also supported by the UK public where 81% of participants voted for the government's prime objective to be 'greatest happiness'

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

opposed to 'greatest wealth' (GfK NOP opinion poll undertaken for 'The Happiness Formula' series on BBC 2, Easton, 2005).

Consequently, since 2000, there was a steady flow of national policy documents related to wellbeing (see appendix A). From 2000 until 2006, the policy emphasis seemed to be around promoting and researching wellbeing. In 2008, there was a slight change in direction with the Foresight Mental Capital and Wellbeing Project placing more emphasis on the consideration of mental health. This echoed the European Commission's Green paper on mental health (2005) which was a consultation on how to tackle mental illness and promote wellbeing in the EU. The final change in policy direction started in 2010 with the Big Society policy programme which started to discuss ways to improve wellbeing. This led to David Cameron asking the Office for National Statistics to start working towards a national measure of wellbeing.

As this thesis has been undertaken in Wales it is imperative also to consider the policy documents specific to Wales. Unsurprisingly, wellbeing has also been a central theme of the Welsh Government agenda (see Appendix B). The documents highlight the need to see wellbeing as central to all policy areas in order for the people of Wales to achieve their full potential.

1.2.4 Wellbeing of young people

An initial purpose of this thesis is to highlight the role that education can have in developing and potentially enhancing wellbeing. The *2006 Education and Inspections Act* placed a duty on the governing bodies of all maintained schools, primary, secondary, special and Pupil Referral Units, to promote the wellbeing of pupils within their care. The reason for this was later highlighted by the

government's Foresight (2008) review on mental capital and wellbeing which concluded:

childhood and adolescence are particularly crucial stages when important skills are learned which set the trajectory for mental capital and well-being through later years (p.99).

Regrettably, the 2007 UNICEF report 'An overview of child well-being in rich countries' identified the UK as the lowest ranking country on six components of wellbeing out of 21 other countries. This was backed up by the National Economics Foundation (Nef, 2009) who found that the UK had some of the lowest levels of child well-being in comparison to other countries of similar economic wealth. Nef proposed that promoting child wellbeing is in everyone's best interests because of the prospect of improved social outcomes. Disappointingly, substantial improvement in wellbeing had not been made by 2010 when UNICEF ranked the UK 19th out of 25 countries on material wellbeing, 13th on educational wellbeing and 11th on health wellbeing (Unicef, 2010). Unfortunately, the picture seems to be bleaker for our Welsh children. Research undertaken by the World Health Organisation (2008) showed that Welsh 15-year-olds were demonstrating lower levels of health behaviour compared to their counterparts in England (see appendix C). Welsh teenagers rated their health as poorer than English students with more Welsh students reporting to be overweight, smoking at the age of 13 or younger, drinking alcohol at least once a week, and using cannabis. The urgent need to address this issue provides a clear rationale for the current research, especially within a Welsh context.

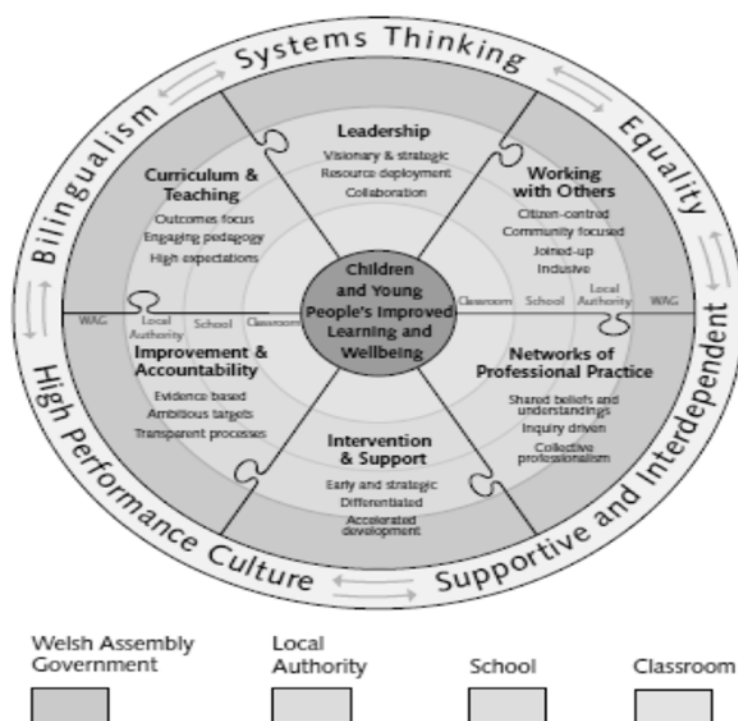
In 2008 the Welsh Assembly Government (WAG) compiled the first 'Children and Young People's Well-Being Monitor for Wales' (WAG, 2008a). This monitor

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

reviewed the current situation within Wales, drawing on various indicators and other statistical and research sources and reflected the belief that education can have a direct positive influence on a child's level of wellbeing in terms of intellectual development, developing resilience and resources to allow them to thrive (Morrison, Gutman and Feinstein, 2007; Cassen and Kingdom, 2007 and Field, 2009).

In response to the Wellbeing Monitor the 'School Effectiveness Framework' (WAG, 2008b) placed wellbeing at the heart of their work:

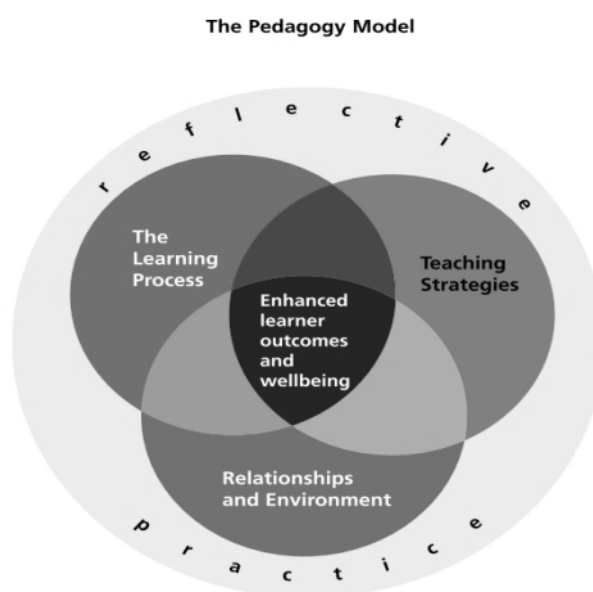
Figure 1.2 The School Effectiveness Framework



(WAG, 2008b p.11)

This was quickly followed by more pictorial guidance for professionals which emphasised the need to co-ordinate all elements of education in order to enhance learner outcomes and wellbeing:

Figure 1.3 The Pedagogy Model



(WAG 2009a p.2)

In 2011 Welsh Government (WG) published the second 'Children and Young People's Wellbeing Monitor for Wales'. In doing so they aimed to demonstrate their commitment 'to measuring and understanding the issues which affect the wellbeing of all our children and young people' (p.4). This edition also highlighted the need to develop a way of gathering data on wellbeing indicators just as the UK government had decided in 2010.

However, an important issue to consider at this point is that the emphasis on young people could be seen as slightly misleading given the age group on which these policy documents focus. A large number of the documents focus on children up to the age of 15 or 16. Indeed publications by the Office of National Statistics, whose National Wellbeing programme aims to produce measures of the wellbeing of the

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

nation, up until 2014, only measured the wellbeing of 10-15 year olds (Hicks *et al.*, 2001; Beaumont, 2013). Consequently, this thesis planned to focus on the under-researched and significant area of adolescence.

1.2.5 Adolescence

Perkins (2001) believes that there is no other developmental phase which is characterised by as many complex changes as adolescence. Major physical changes have usually occurred by this age but the body is still changing. In particular, the late adolescence stage (generally agreed to be between 16 and 19) has become an area for concern for researchers as it is vital for the continued development of an individual as they may be making choices that could influence the rest of their lives (Zarrett and Eccles, 2006).

Cobb (2010) urged researchers not to see adolescence just as a transitional bridge to adulthood but encouraged a more focused attention on the unique developmental stages that students of this age experience. She suggests that late adolescents encounter a number of age-specific tasks: achieving more mature relations with peers; achieving a masculine or feminine role model; coming to terms with one's body; achieving emotional independence from parents and other adults; preparing for marriage and family life; preparing to support oneself economically; developing a set of values and an ethical system to guide behaviour and achieving socially responsible behaviour.

Interest in adolescence is not new and there are a number of different psychological perspectives on adolescence as a developmental stage. Freud (1856-1939) believed that adolescence was a period of great change physically, socially, emotionally and intellectually. He claimed that the behaviour of adolescents could be explained by the fact that the three components of personality (Id, Ego and

Superego) were in conflict. Part of this conflict resulted in egocentrism where adolescents failed to distinguish between their own concerns and those of others. This has been linked to the theory of personal fable (Elkind, 1967) where adolescents believe that they are unique and therefore nobody else can fully understand them.

Piaget (1896-1980) focused his developmental theory more on the cognitive development of adolescents. At this age Piaget proposed that individuals are able to think in more abstract terms as well as being more systematic and logical. This is backed up by a number of more modern researchers (e.g. Keating 1990, Wigfield *et al.*, 1996) as well as biological knowledge of the brain which indicates that, at this age, the capacity for analysis and reflective thought is enhanced.

Erikson (1902-1994) focused his theory of adolescent development on the challenge to achieve a sense of oneself. He believed that this developmental stage was vital for a sense of mastery, identity and intimacy. Modern research has indicated the effect of family (Langston, 1994; Seligman, 1995 and Roberts and Bergton, 1996), romantic relationships (Levesque, 1993) and peer groups (Eccles and Barber, 1999) on this formation of identity, however, as adolescents get older this impact declines (Eccles and Gootman, 2002).

1.3 Wellbeing in Further Education

With so much evidence pointing towards adolescence being such an unique and significant developmental stage it would seem right to undertake wellbeing research with this age group. Indeed, Sherrod *et al.* (1993) highlighted the fact that the FE environment allows students the opportunity to extend the exploration of themselves. However, the move to FE can also cause setbacks with development; one study showed that 26% of students had experienced emotional and

psychological problems in their current term of college and 46% in the past term (Schools Health Education Unit, 2002). This has resulted in many researchers seeing education as a tool for providing support and resources for adolescents in order to make development smoother (Kirby and Coyle, 1997; Warwick *et al.* 2009, Zarret and Eccles 2006). This has led to a call for programmes to be designed specifically for adolescents that stress future plans and goals, positive views of themselves and facilitate qualities that ensure positive youth development; competence, confidence, connection, character and caring (Lerner *et al.*, 2005; Cobb, 2010). Consequently, this fully supports the rationale behind this research of designing a unique pastoral programme for this age group.

In Wales there are currently 14 further education (FE) colleges. Most can be described as general FE colleges. Many are part-tertiary; one is a Catholic sixth form college and one is an FE institution. In addition, three are merged with universities. Figures from 2013/14 show that these educational establishments cater for nearly 170,000 learners, of which nearly 40,000 are full-time 16-19 year olds (StatsWales 2015).

In 2009 WAG developed the 'Quality and Effectiveness Framework for post-16 learning in Wales' (QEF, WAG, 2009c). WAG believed that it would complement the School Effectiveness Framework and that it would assist in helping institutions achieve excellence (WAG 2009b). This document listed a number of ways that performance would be measured in FE and one of these areas was learner wellbeing. One main aim of QEF in this area was to incorporate a way that wellbeing could be measured. This led to ESTYN (the education and training inspectorate for Wales) issuing "Guidance for the inspection of Further Education

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

institutions from September 2010” (ESTYN, 2010). This new framework for inspection included, for the first time, an explicit consideration of students’ wellbeing. Consequently, wellbeing was monitored as part of all three key questions (see Appendix D).

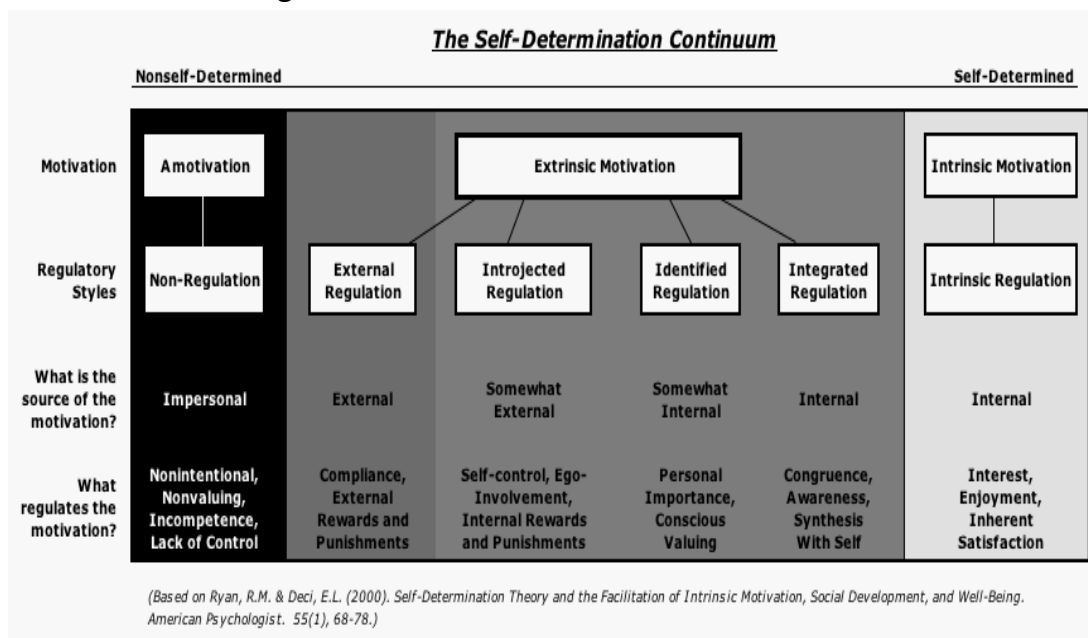
According to the guidelines inspectors were required to gather evidence from four distinct areas: attitudes to keeping healthy and safe; participation and enjoyment in learning; community involvement and decision-making and social and life skills (p.19). Although this has further cemented wellbeing in the heart of the agenda for developing FE in Wales, what the Inspection Framework does not do is to inform FE colleges clearly of how to develop this as part of their curricula, or how to measure the progress they are making. Therefore, a further purpose of this thesis was to go some way to fill this void as well as to answer the call from Escolme *et al.* (2002) that:

more research is required on the link between effective approaches to improving health and well-being of learners and its impact upon recruitment, retention and achievement (p.24).

1.4 Theoretical approach to enhancing wellbeing

Having considered the need for the enhancement of wellbeing for adolescents it is important to consider whether wellbeing can actually be enhanced. A theory that starts to investigate the link between levels of wellbeing and internal motivation is self-determination theory (Deci and Ryan, 2000):

Figure 1.4 The Self-determination Continuum



The diagram illustrates the link between the two variables as this is:

a theory of basic psychological needs that are the foundation of personal growth ..., integrity..., and well-being (Ryan, Huta and Deci 2008).

Deci and Ryan (2002) propose that there are three universal psychological needs: competence, autonomy and relatedness, and that healthy development depends on the fulfilment of these needs. The theory is relevant to this research as Ryan, Huta and Deci (2008) advocate that self-determination theory links specifically with Eudaimonic approaches to wellness. Deci and Ryan (2000) believe that individuals have ‘inherent growth tendencies’ (p.68) that they can utilise for a more positive life. The theory is based on three components:

1. Autonomy – the feeling that actions taken are under the individual’s control;
2. Competence – the feeling of being skilled;
3. Relatedness – the feeling of being connected to others.

Therefore, this theory points towards the possibility of an intervention taking advantage of the intrinsic desire to improve by ensuring that individuals feel in control, skilled and connected to others. Consequently, this theory suggests that

wellbeing could be enhanced if an intervention results in affecting the intrinsic motivation of individuals which in turn would equip them to cope with the challenges they face in life.

1.5 Aims and Objectives of this Research

The purpose of this body of research was to further the understanding of whether wellbeing could be enhanced in FE students by means of a pastoral intervention. As established in this chapter, there is growing evidence that supports the role of education in developing and enhancing wellbeing. However, research into the enhancement of wellbeing in adolescents appears to be in its early stages and there are considerable gaps in knowledge. Further research is required to understand how wellbeing can be enhanced in this age group.

In order to address some of the gaps in current knowledge, this research attempted to establish whether a pastoral intervention programme was an appropriate method for enhancing wellbeing in FE students as well as increasing the understanding of possible mechanisms that may be involved in this possible behaviour change. This was achieved by employing the use of a wellbeing measure that aimed to establish an individual's perception of how challenged they felt alongside how resourced they perceived they were.

1.5.1 Research aim

The aim of this research was to develop and evaluate the effectiveness of a pastoral intervention programme to enhance the wellbeing of FE students.

1.5.2 Objectives

1. To determine an appropriate theoretical definition of wellbeing on which to base the research.

2. To explore teenagers' understanding of factors affecting wellbeing.
3. To develop an appropriate and robust method of measuring the wellbeing of FE students.
4. To develop a suitable and substantial pastoral intervention programme that aims to enhance the wellbeing of FE students.
5. To test whether any change in levels of wellbeing occur via the pilot pastoral intervention.
6. To utilise qualitative analyses to explore individual beliefs about the effectiveness of the intervention and its impact on students.

1.6 Thesis statement

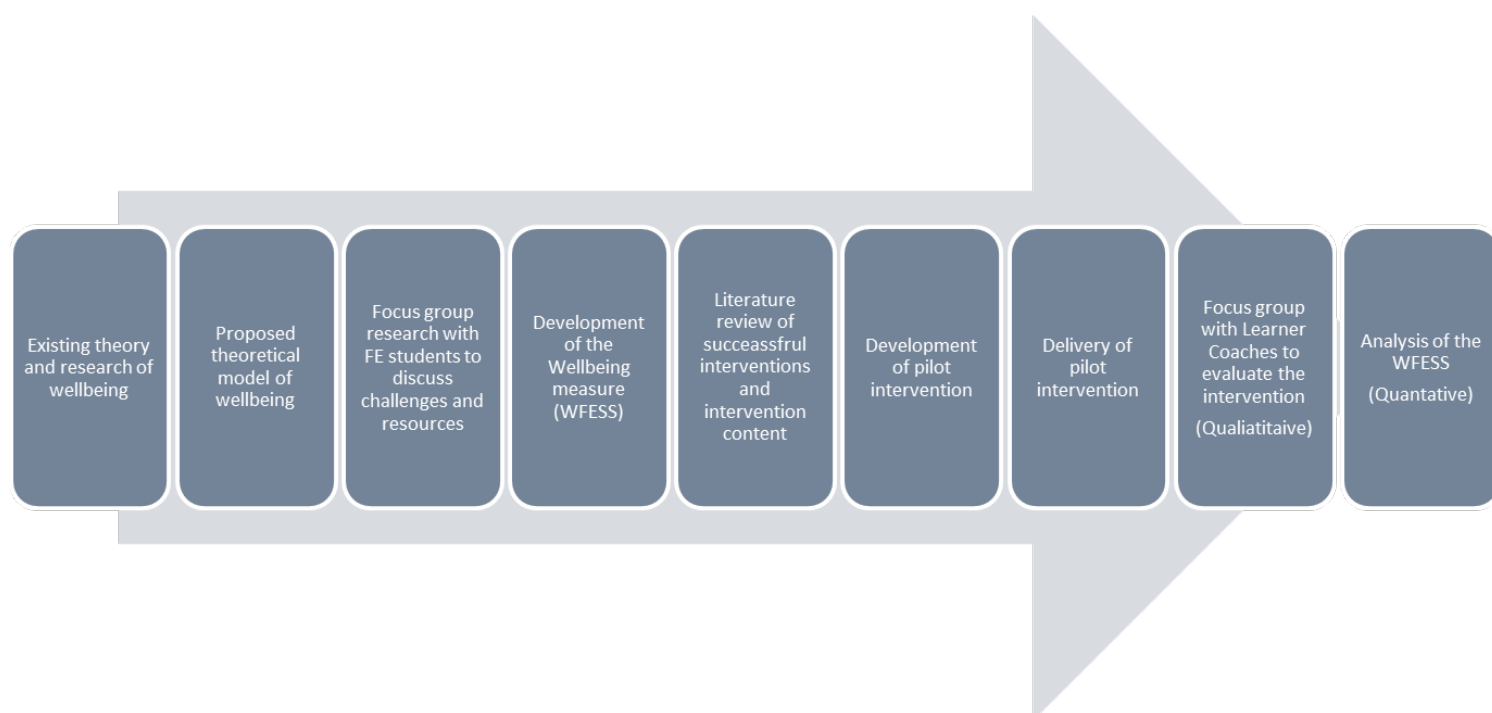
The aim of this thesis is to describe the evaluation of a pilot intervention for enhancing wellbeing for FE students. In order to achieve this it was necessary to devise a clear definition of wellbeing. A literature review (Chapter Two) identified the lack of definition in both academic and policy fields. Therefore a new model was developed to define wellbeing which considered the balance of challenges and resources alongside the dynamic nature of wellbeing. This model determined the course of the evaluation.

Before designing the pastoral intervention it was necessary to find a measure of wellbeing. Without an existing measure that considered both the challenge and resource variables it was necessary to devise a new measure of wellbeing based on the notion of resources and challenges. Established psychological measures influenced the structure of the questionnaire. Once the measure was devised the pastoral intervention was developed. The content of the intervention itself was influenced by a number of different factors; a literature review of what successful

interventions should contain (Chapter Three) evidence gathered via student focus groups; (Chapter Four) as well as a consideration of what was being delivered within the pastoral programme of the institution where the research was undertaken. Before the intervention was piloted within the institution the measure was trialled with FE students at four stages (see Chapter Five).

The pilot intervention was delivered over a ten week period to all the Lower Sixth (L6) students within the institution. The measure was undertaken by participants during the first and last sessions of the pilot (Chapter Six). In order to provide a fuller evaluative picture the voice of the pastoral staff that delivered the pilot intervention was gathered (Chapter Seven). This provided useful information on their perceptions of what aspects of the intervention were successful along with evidence of what would need to be changed to improve the intervention. Statistical analysis was undertaken on the repeated measures data (Chapter Eight). These data provided evidence of an improvement in feeling resourced following the intervention. The thesis ends with a discussion about the challenges of undertaking real life research alongside a reflection of how to move forward following the pilot (Chapter Nine).

Figure 1.5 Process of the research



1.7 Conclusion

By contributing to the knowledge of how a pastoral intervention might enhance wellbeing, it will be possible to inform the development of future interventions aimed at adolescents in order to ensure positive outcomes.

1.8 Summary

In summary this chapter has outlined a number of issues underpinning the rationale behind this research.

- The possible problems with defining wellbeing have been discussed alongside the current political and educational trend towards the need to measure and improve wellbeing.
- A particular focus has been placed on the development stage of adolescence as a period of great change for young people. With adolescents making up a

sixth of the world's population (Honkala, 2014) there is a strong justification for focusing on this age group.

- The rationale behind choosing FE as a setting for the research has been justified by the idea that FE institutions allow students the opportunity to extend the exploration of themselves. This in turn would seem to be an appropriate setting for a pastoral intervention to enhance wellbeing.

Chapter Two – Defining wellbeing

2.1 Introduction

Research in wellbeing has been gaining attention in recent decades (e.g., Diener, Suh, Lucas, and Smith, 1999; Kahneman, Diener, and Schwarz, 1999; Keyes, Schmotkin, and Ryff, 2002; Stratham, and Chase, 2010; Seligman, 2011). However, very early on in the research Ryff and Keyes (1995) identified that ‘the absence of theory-based formulations of well-being is puzzling’ (p. 719-20). The question of how wellbeing should be defined (or spelt¹) still remains largely unresolved, which ‘has given rise to blurred and overly broad definitions of wellbeing’ (Forgeard, Jayawickreme, Kern, and Seligman 2011, p. 81). This deficit can be traced back as far as Ryff (1989a), who believed that ‘there has been particular neglect ... [in] the task of defining the essential features of psychological wellbeing’ (p. 1069). Indeed, Thomas (2009) argued that wellbeing is ‘intangible, difficult to define and even harder to measure’ (p. 11).

A theme that will run through this chapter is the difference between the ‘description’ of a construct and its ‘definition’. As interest in the measurement of wellbeing grows, there is a greater necessity to be clear about what is being measured and how the resulting data should be interpreted, in order to undertake a fair and valid assessment. Therefore, any new definition must go beyond an account or description of wellbeing itself, and be able to make a clear and definite statement of the exact meaning of the term. Consequently, the aim of this chapter is to propose a definition of what constitutes wellbeing: ‘a complex, multi-faceted

¹ This thesis uses ‘wellbeing’ without the hyphen except when quoting another source.

construct that has continued to elude researchers' attempts to define and measure' (Pollard and Lee, 2003, p. 60).

2.2 The historical background to wellbeing research

Knowing the historical background to the study of wellbeing is necessary to set the definition of wellbeing. The two early approaches reflected contrasting attitudes: the hedonic tradition, which accentuated constructs such as happiness, positive affect, low negative affect, and satisfaction with life (e.g., Bradburn, 1969; Diener, 1984; Kahneman, Diener, and Schwarz, 1999; Lyubomirsky and Lepper, 1999); and the eudaimonic tradition, which highlighted positive psychological functioning and human development (e.g., Rogers, 1961; Ryff, 1989a, 1989b; Waterman, 1993). However, despite the differences in approach, most researchers now believe that wellbeing is a multi-dimensional construct (e.g., Diener, 2009; Michaelson, Abdallah, Steuer, Thompson, and Marks, 2009; Stiglitz, Sen, and Fitoussi 2010). Consequently, the diversity of dimensions has created a 'confusing and contradictory research base' (Pollard and Lee, 2003, p. 2).

An early attempt to define wellbeing was Bradburn's (1969) classic research on psychological wellbeing. His work marked a move away from the diagnosis of psychiatric cases to the study of psychological reactions of ordinary people in their daily lives. His discussion stemmed from his interest in how individuals coped with the daily difficulties that they faced. Bradburn highlighted how psychological wellbeing (which he also referred to as happiness) was the variable that 'stands out as being of primary importance' (p. 6). He linked this to Aristotle's idea of Eudaimonia, which is now more commonly translated as wellbeing. Aristotle believed this to be the overarching goal of all human actions. The majority of

Bradburn's research focused on the distinction between positive and negative affect. His model specified that:

an individual will be high in psychological well-being in the degree to which he has an excess of positive over negative affect and will be low in well-being in the degree to which negative affect predominates over positive (Bradburn, 1969, p. 9).

2.3 What constitutes wellbeing?

Although Ryff (1989a) criticised Bradburn's work for not defining the basic structure of psychological wellbeing, an emphasis on positive and negative affect has been central to the work of Diener and Suh (1997). They believed that:

subjective well-being consists of three interrelated components: life satisfaction, pleasant affect, and unpleasant affect. Affect refers to pleasant and unpleasant moods and emotions, whereas life satisfaction refers to a cognitive sense of satisfaction with life (Diener and Suh, 1997, p. 200).

Headey and colleagues (Headey, Holmstrom and Wearing, 1984a, 1984b; Headey, 2006) picked up on the need for positive and negative affects to be seen as distinct dimensions, rather than opposite ends of the same continuum (Bradburn, 1969) as they are 'only moderately negatively correlated' (Headey, 2006, p. 2). This was more recently supported by Lee and Ogozoglu (2007) and Singh and Duggal Jha (2008).

Ryff's early work (Ryff, 1989a) identified aspects that constitute wellbeing: autonomy; environmental mastery; positive relationships with others; purpose in life; realisation of potential and self-acceptance. More recent research has placed different emphases on what wellbeing is: ability to fulfil goals (Foresight Mental Capital and Wellbeing Project, 2008); happiness (Pollard and Lee, 2003) and life satisfaction (Diener and Suh, 1997; Seligman, 2002a). However, again, this

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

highlights the problem that researchers have focused on dimensions or descriptions of wellbeing rather than on definitions (Christopher, 1999).

Over 30 years ago, Shin and Johnson (1978) seemed to move closer to defining wellbeing by stating that it is ‘a global assessment of a person’s quality of life according to his own chosen criteria’ (p. 478) and this judgement is still reflected in today’s literature (Zikmund, 2003; Rees, Goswami, and Bradshaw 2010; Stratham and Chase, 2010). But what, exactly, is ‘quality of life’?

The World Health Organization defined quality of life as:

an individual’s perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns. It is a broad ranging concept affected in a complex way by the person’s physical health, psychological state, personal beliefs, social relationships and their relationship to salient features of their environment (World Health Organization, 1997).

This emphasis on achieving goals reflects the work of Emerson (1985) and Felce and Perry (1995), who believed that wellbeing stems from individuals’ perception of their current situation and their aspirations.

However, a problem with the term ‘quality of life’ is that it is used interchangeably with ‘wellbeing’ in a variety of disciplines. Many believe that this has made the task of defining wellbeing ‘conceptually muddy’ (Morrow and Mayall, 2009, p. 221).

However, Stratham and Chase (2010) argue that the term wellbeing has enabled psychologists to ‘de-medicalise’ (p. 5) the concept of health. Consequently, it is now possible to consider quality of life separately from ideas of illness. This neatly reflects the seminal work of Herzlich (1973), who placed great emphasis on the attitude of the individual towards health, very like the current emphasis of wellbeing research using subjective wellbeing measures. Herzlich explained how

health can be viewed in both a positive and negative light. Firstly, it can be seen as an 'absence of illness' (p. 53). Indeed, she discussed how individuals might not notice health until something affects it. On the other hand, Herzlich proposed that health can be seen in a positive light 'as a presence of which one is fully aware because of one's feelings of freedom and of bodily and functional well-being' (p. 53).

Another useful point made by Herzlich is how essential it is to define 'what constitutes normality' (p. 55). However, she admitted that normality was very difficult to evaluate. This difficulty of reaching a definition of normality also reflects the current problem of attempting to define wellbeing. Herzlich believed just identifying an 'absence of illness' was inadequate in terms of defining normality. Furthermore, she suggested that 'some writers have insisted that it may be futile to try to treat health as a single concept' (p. 55). This view is reflected in a more recent article by Forgeard *et al.* (2011), who propose that:

some researchers have preferred to ignore the multifaceted nature of wellbeing and equate it with one construct (often life satisfaction), leading to the unfortunate omission of other important aspects of wellbeing (p. 81).

Consequently, it seems that a narrow emphasis on quality of life cannot adequately help us to define wellbeing. Indeed, it would seem that quality of life appears to be a dimension of wellbeing rather than an all-embracing definition.

The focus on positive functioning that has attracted increased attention in the past few years (Duckworth, Steen, and Seligman, 2005; Linley and Joseph, 2004; Linley, Joseph, Harrington, and Wood, 2006) dates back to William James' writings on healthy mindedness (James, 1902), and spans nearly 60 years to the work of Rogers

(1961), who discussed wellbeing in terms of ‘the good life’ (p. 186). He believed that each individual strived towards becoming a ‘fully functioning person’ who is open to experience, is trusting in his/her own organism, and leads an increasingly existential life (Rogers, 1961, p. 187–189). His work has partly influenced the work of Ryff and Singer (2008) in their development of core dimensions of psychological wellbeing (PWB): self-acceptance; purpose in life; environmental mastery; positive relationships; personal growth; and autonomy.

An interesting development is the way in which this area of wellbeing has impacted on clinical psychology. Joseph and Wood (2010) have called for clinical psychology to adopt measures of positive functioning. This is because they believe that psychiatry has adopted a restricted view of wellbeing, seeing it as ‘an absence of distress and dysfunction’ (p. 831). Therefore, the adoption of positive function would naturally broaden the field. They also believe that there is a possibility that this new slant on measurement will allow for prediction and treatment of distress and dysfunction. Research in this area has been undertaken by Keyes (2002, 2005), who views mental health as a syndrome of wellbeing symptoms. He believes that mental health is created ‘when an individual exhibits a high level on at least one symptom of hedonia and just over half the symptoms of Eudaimonia, i.e., positive functioning in life’ (Keyes, 2009, p. 15). In his 2002 research, Keyes asked youths to report the frequency of three symptoms of emotional wellbeing, four symptoms of psychological wellbeing and five symptoms of social wellbeing. Keyes made a ‘diagnosis of flourishing’ if the individual displayed a third of the emotional symptoms, four of the psychological symptoms and five of the nine symptoms of positive flourishing ‘almost every day’ or ‘every day’ in the past thirty days.

The work of Keyes has led to the use of the terms ‘flourishing’ and ‘languishing’ as scientific concepts, rather than as philosophical ideals, as they had been previously presented (e.g., Griffin, 1986; Sumner, 1996; Hurthhouse, 1999; Nussbaum, 2000).

Keyes’ work had a direct influence on the formulation of ‘a well-being manifesto for a flourishing society’ by Shah and Marks (2004). This rather uplifting and encouraging document highlights that one of the key aims of any democratic government should be ‘to promote the good life: a flourishing society, where citizens are happy, healthy, capable and engaged – in other words with high levels of well-being’ (p. 2). The manifesto goes on to clarify what Shah and Marks consider wellbeing to be:

Well-being is more than just happiness. As well as feeling satisfied and happy, well-being means developing as a person, being fulfilled, and making a contribution to the community (2004, p. 2).

Unfortunately, again, this appears to be more of a description of wellbeing rather than a definition.

The term ‘flourishing’ has now become synonymous with the positive psychology movement. Indeed, Gable and Haidt (2005) explain that ‘positive psychology is the study of the conditions and processes that contribute to the flourishing or optimal functioning of people, groups, and institutions’ (p.104). In a systematic examination of literature, Alkire (2002) noted 39 varying endeavours between 1938 and 2000 to define a ‘flourishing’ life.

The undeniable leader of the positive psychology movement is Martin Seligman. On the first day of his presidency of the American Psychological Society (APA) in 1998 he stated that:

I realized that my profession was half-baked. It wasn't enough for us to nullify disabling conditions and get to zero. We needed to ask, what are the enabling conditions that make human beings flourish? How do we get from zero to plus five? (Seligman, 1998, cited in Wallis, 2005, online).

More than ten years on, Seligman published his book entitled *Flourish* (Seligman, 2011), in which he outlined his new 'dynamic' concept of wellbeing, which moved away from theories based purely on happiness. The rationale behind this welcome departure from a now rather over-used term is because, according to Seligman (2011), the notion of 'happiness' is an awkward construct that hides the true, complex, nature of human flourishing. *Flourish* discusses his theory with great clarity, but in terms of resolving the debate on defining wellbeing, it is disappointing. His 24-page chapter entitled 'What is Well-being?' fails to achieve its implied aim. In fact, Seligman states:

Well-being theory denies that the topic of positive psychology is a real thing; rather the topic is a construct – well-being – which in turn has several measurable elements, each a real thing, each contributing to well-being, but none defining well-being (2011, p. 15).

Instead, his new theory of wellbeing concentrates, yet again, on elements of wellbeing which he believes are a set of building blocks for a flourishing life: Positive Emotion, Engagement, Relationships, Meaning, and Accomplishment (PERMA).

At this stage, the pursuit of a definition of wellbeing may appear bleak. However, this thesis disagrees with Seligman's idea that wellbeing is a construct. This would imply that wellbeing is 'not presently observable or objectively measurable but is assumed to exist because it ... gives rise to measurable phenomena' (Reber, 1995, p. 157). From the discussion so far, this obviously is not true. Instead, it is proposed

that wellbeing should be considered to be a state – ‘a condition of a system in which the essential qualities are relatively stable’ (Reber, 1995, p. 750).

2.4 Equilibrium

A theory that supports Reber’s proposal is the dynamic equilibrium theory of wellbeing (now more often referred to as set point theory). This was originally proposed 27 years ago by Headey and Wearing (1989) and suggested links between personality, life events, wellbeing and illbeing. The theory built on the work of Brickman and Campbell (1971), who had previously demonstrated that individuals tend to return to a baseline of happiness even after major life events.

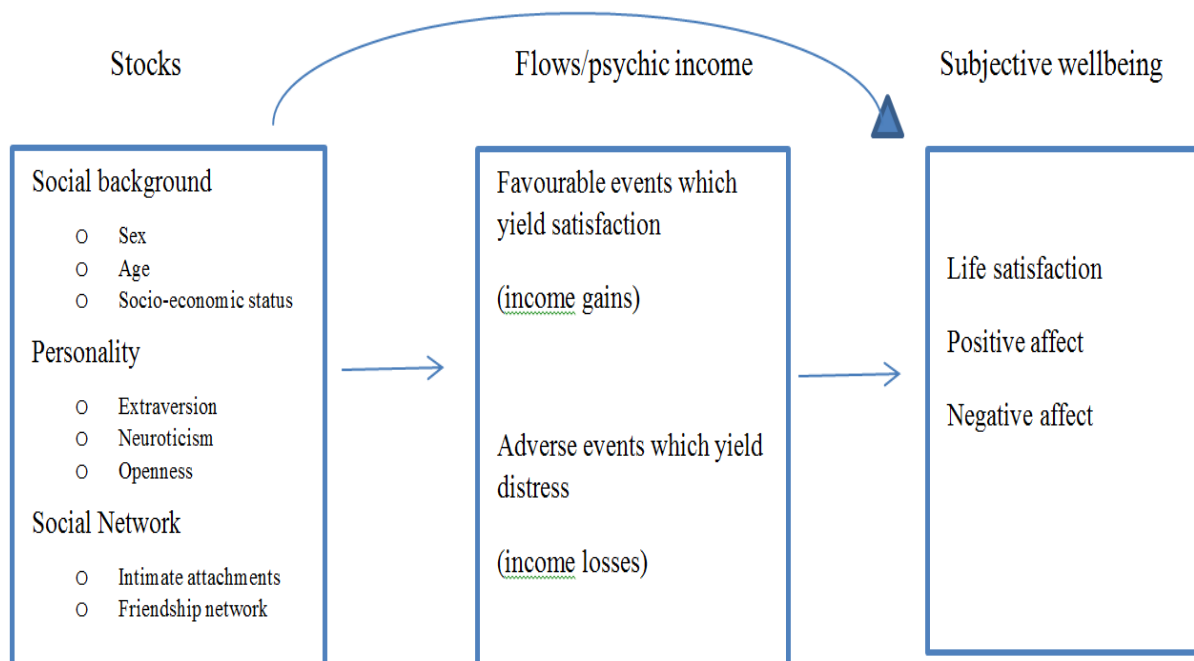
Headey and Wearing continued to research their model (1991; 1992) and believed that ‘for most people, most of the time, subjective well-being is fairly stable. This is because stock levels, psychic income flows and subjective well-being are in dynamic equilibrium’ (1991, p. 49). This emphasis on equilibrium is not new and reflects, yet again, the work of Herzlich (1973). Her research emphasised that individuals saw equilibrium not only as a norm but also as a state that they would like to ‘attain or keep’ (p. 59). Interestingly, in contrast to Headey and Wearing’s idea that most individuals have stable wellbeing, Herzlich’s interviewees saw it as a rare occurrence. However, Herzlich noted how often equilibrium was referred to by her participants and that it had a wide variety of applications. She found that the word ‘expresses a whole area of individual experience. It serves, in a way as a distillation of the language of health’ (p. 59). She went further to fully explain what equilibrium is, in terms of health:

Concretely, equilibrium comprises the following themes: physical well-being, plenty of physical resources; absence of fatigue; psychological well-being and evenness of temper; freedom of

movement and effectiveness in action; good relations with other people (Herzlich, 1973, p. 60).

The continued aim of Headey and Wearing's research has been to 'understand how people cope with change and how their levels of well-being are affected' (1992, p. 6). They propose that a change in wellbeing occurs only when, due to external forces, 'a person deviates from his or her equilibrium pattern of events' (1992, p. 93). Consequently, Headey and Wearing propose a definition of wellbeing in which wellbeing is shown 'as depending on prior equilibrium levels of wellbeing and of life events, and also on recent events' (1992, p. 95). This reflects their framework for analysing subjective wellbeing (SWB), which considers the relationship between stocks and flows:

Figure 2.1: Headey and Wearing's (1991) stocks and flows framework (p. 56)



In this model, Headey and Wearing proposed that differences between individuals in terms of SWB are due to 'stable stocks' (otherwise known as stable personal

characteristics). 'As a result of stable stocks each person has a level of subjective wellbeing which represents his/her own 'normal' equilibrium level' (1991, p. 57).

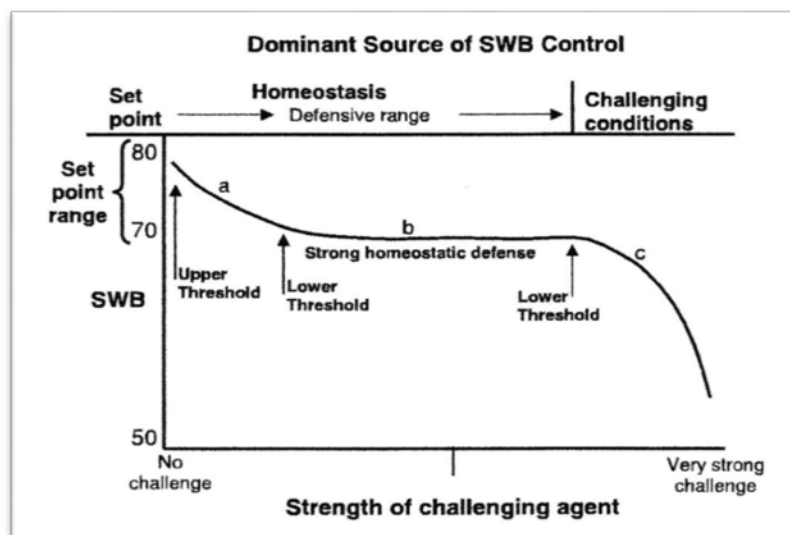
Stocks are drawn upon to deal with specific life experiences ('flows') so that satisfaction is enhanced and distress is diminished. Consequently, 'it is more appropriate to regard subjective well-being as a fluctuating state rather than a stable trait' (p. 56).

The theory has received much empirical investigation (Ormel and Schaufeli, 1991; Ormel and Wohlfarth, 1991; Suh, Diener and Fujita, 1996). Suh *et al.* (1996) tested the dynamic equilibrium theory by tracking 222 psychology students (aged 20-21) during a transitional period of their life (which was their college graduation) and examined the effect of this life event on their SWB and the time it took these participants to adjust (to return to their state of equilibrium). Their findings supported the dynamic equilibrium model by demonstrating that 'only recent life events influence SWB and that the impact of magnitude drops quickly afterward' (p. 1095). Consequently, in trying to define wellbeing, it is justified to consider the state of equilibrium as central.

2.5 Challenges

A more recent extension of this theory has been explored by Cummins (2010). Now the term 'equilibrium' has been replaced by 'homeostasis'; and the term 'life events' with the term 'challenge':

Figure 2.2: Cummins' Changing Levels of SWB (2010, p. 5)



Cummins' theory focuses on the strength of a challenge and how this affects the level of SWB. This includes a derived set point range (70 to 80 points) that was determined by previous research undertaken by Cummins (1995, 1998). The emphasis of the model is the role of homeostasis in defending the set point of SWB. The model may be a little confusing and complex at first glance. However, it tries to demonstrate different phases denoted by the letters 'a' to 'c'.

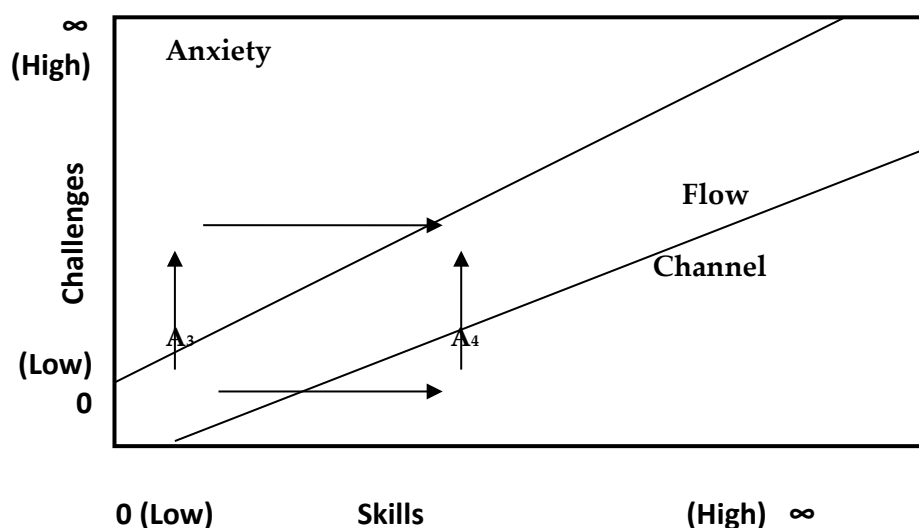
- When an individual experiences no challenge, SWB stays at the set point.
- When an individual experiences mild challenge, the level of SWB will vary slightly within the set point range (Phase a)
- Phase b signifies where SWB is prevented from decreasing below the set point, due to the strong homeostatic defence.
- Phase c signifies a situation where the challenge is too strong for homeostasis to manage. SWB would now fall sharply.

Consequently, it would seem appropriate that any definition of wellbeing centres on a state of equilibrium or balance that can be affected by life events or challenges.

2.6 Resources

Linked to challenges is the idea that each individual develops relevant skills or resources to cope with the trials they face. This balanced rationale between skills and challenges has been central to Mihaly Csikszentmihalyi's (1975) concept of 'flow' – 'the state in which people are so involved in an activity that nothing else seems to matter' (2002, p. 4), which in turn leads to happiness. The original model assumed that enjoyment would happen when the strength of challenge and skills were both very low as well as when they were both high, as demonstrated in the following diagram:

Figure 2.3: Demonstration of the relationship between challenges and skills



(Csikszentmihalyi, 2002, p. 74)

However, the new model predicts flow only when challenges and skills are relatively in balance (Csikszentmihalyi, 2002, p. 252).

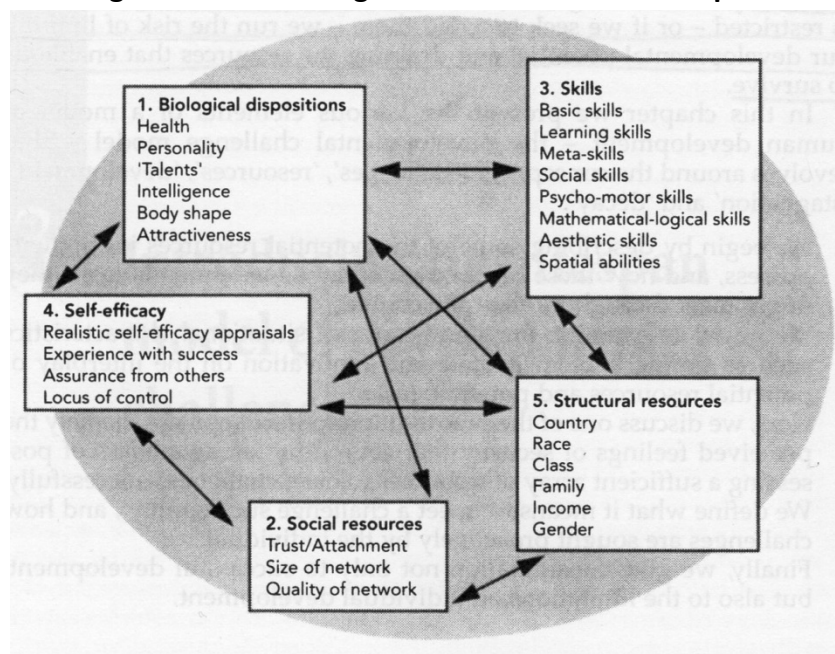
Hendry and Kloep's (2002) lifespan model of development also explores the interaction between life challenges and personal resources. Their theory is based on five key principles:

- 1) To stimulate development, individuals need challenge;
- 2) Successful solving of the challenge leads to development;
- 3) If a challenge is not solved, this will lead to problems in meeting future challenges;
- 4) The process of solving challenges is 'an interactional, dialectical process' (p. 16) that leads to changes in the individual and/or the environment and accordingly stimulates development;
- 5) Individuals will have differing levels of resources to meet the challenges.

Although this theory is not directly linked to wellbeing, it reflects dynamic equilibrium theory in terms of challenges that an individual faces and in terms of how wellbeing is a fluctuating state. It also links to Cummins' idea of a homeostasis defensive range in terms of the resource pool that Hendry and Kloep discuss.

Hendry and Kloep argue that many of the resources available to individuals are innate which reflects Deci and Ryan's (2000) proposal that individuals have inherent growth tendencies. However, Hendry and Kloep also propose that there are also potential resources in us all within our resource pool:

Figure 2.4 Interacting elements in the resource pool



Hendry and Kloep (2000) p.20

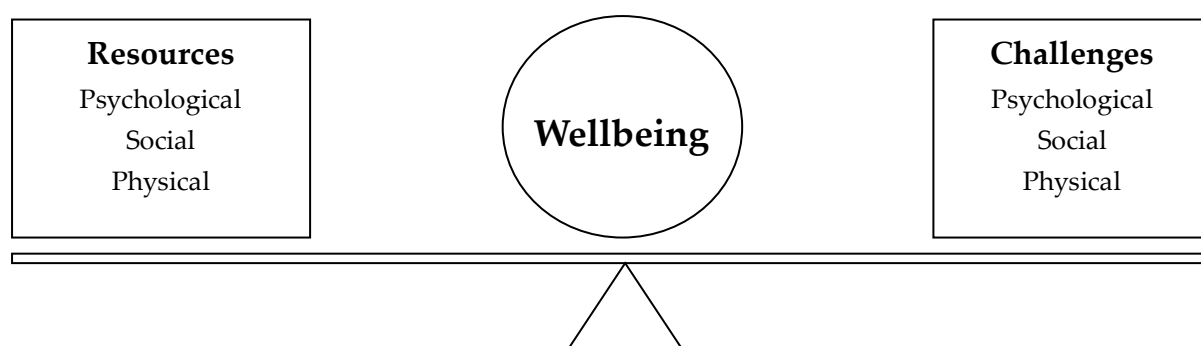
The above diagram illustrates five areas of potential resources that Hendry and Kloep propose have implications for the individual. In order to meet daily challenges, it would therefore be beneficial for individuals to learn strategies to access each of these areas of resources as this could lead to improved wellbeing.

2.7 A new definition of wellbeing

The concept of wellbeing is undeniably complex, considering the aspects previously discussed. This chapter has highlighted the difficulty that researchers have had with defining wellbeing but it has also recognised that previous research has been driven by dimensions and descriptions rather than definitions. In order to move closer to a new definition of wellbeing, therefore, this chapter has focused on three key areas: the idea of a set point for wellbeing; the inevitability of equilibrium/homeostasis; and the fluctuating state between challenges and resources. Consequently, this

thesis would like to propose a new definition of wellbeing as the balance point between an individual's resource pool and the challenges faced:

Figure 2.4: Definition of Wellbeing



The see-saw represents the drive of an individual to return to a set point for wellbeing (Brickman and Campbell, 1971; Headey and Wearing 1989, 1991, 1992) as well as the individual's need for equilibrium or homeostasis (Herzlich, 1973; Cummins, 2010). Now, however, the stocks and flows of Headey and Wearing (1992) have been replaced by the resources and challenges of Hendry and Kloep (2002) and are the elements that can affect the individual's equilibrium; tipping the see-saw from side to side, supporting Csikszentmihalyi's (2002) updated concept of 'flow'. This works just as Kloep, Hendry and Saunders (2009) described:

Each time an individual meets a challenge, the system of challenges and resources comes into a state of imbalance, as the individual is forced to adapt his or her resources to meet this particular challenge (p. 337).

In essence, stable wellbeing is when individuals have the psychological, social and physical resources they need to meet a particular psychological, social and/or

physical challenge. When individuals have more challenges than resources, the see-saw dips, along with their wellbeing, and vice-versa.

The definition supports Headey and Wearing's (1992) aim to 'understand how people cope with change and how their levels of well-being are affected' (p. 6).

However, the proposed definition contradicts Cummins' idea of SWB being static when the individual is not challenged. Instead, this thesis would argue, in line with Hendry and Kloep's theory, that a lack of challenge will lead to 'stagnation' (Hendry and Kloep, 2002), which will also affect the balance of the see-saw. The dynamic nature of the definition also reflects the viewpoint of Nic Marcs, of the New Economics Foundation. He recently spoke of his interpretation of wellbeing on BBC Radio 4's *Reasons to be cheerful*:

Wellbeing is not a beach you go and lie on. It's a sort of dynamic dance and there's movement in that all the time and actually it's the funtuality of that movement which actually is true levels of wellbeing (Nic Marcs, Radio 4, 7 January 2012).

This idea of the need for challenge could also be linked to Selye's (1956) concept of eustress, the construct of good stress, which Le Fevre, Matheny and Kolt (2003) believe to be 'largely ignored in the literature' (p.726). This theory underlines the fact that sometimes we can benefit from being in challenging situations. Selye saw this type of stress to be the opposite of distress.

The dynamic interaction between these two variables also reflects other key theories within psychology; Cognitive-relational theory (Lazarus and Folkman, 1984); Broaden and Build theory (Fredrickson, 1998) and the Conservation of Resources theory (Hobfoll, 1998).

In 1985 Lazarus *et al.* stated that 'no issue in the psychology of health is of greater interest and importance than whether and how stress influences adaptational outcomes such as well-being ...' (p.770). In this paper Lazarus *et al.* highlight their contrasting view that stress is to do with the relationship between an individual's appraisal of life's challenges and their capability to meet or alter these demands in order to protect their wellbeing. This view originated from Lazarus and Folkman's (1984) cognitive-relational theory which aimed to explain the mental processes that influence an individual when they are dealing with the impact of stressors.

According to the theory stress is defined as the relationship between the individual and their environment which is assessed by the individual as exhausting or exceeding their resources and in turn threatening their wellbeing. This assessment by the individual was labelled by Lazarus and Folkman (1984) as cognitive appraisal. This process allows the individual to evaluate 'whether a particular encounter with the environment is relevant to his or her well-being, and if so, in what ways' (Folkman *et al.* 1986, p.992). According to the theory primary appraisal allows the individual to assess whether there is any potential harm from the challenge which leads to a secondary appraisal of evaluating the resources that are required to cope with the challenge.

Another theory that has evolved out of research into stress is the Conservation of Resources Theory proposed by Hobfoll (1989). The theory suggests that individuals 'strive to retain, protect, and build resources and that what is threatening to them is the potential or actual loss of these valued resources' (Hobfoll, 1989, p.516). In terms of the proposed definition for this thesis the threat to the resources could be seen as the challenge variable.

However, the question remains whether the two variables of resources and challenges link specifically to wellbeing. In his 1989 paper Hobfoll argues that individuals seek to develop resources even when they are not experiencing stress. This resource surplus provides a long-term coping facility that can counterbalance the likelihood of a future deficit. He goes on to state that when 'people develop resource surpluses, they are likely to experience positive well-being (eustress)' (p.517). The idea that an individual can increase their resource pool directly links to the lifespan model of development (Hendry and Kloep, 2002).

Away from the psychological area of stress Fredrickson's Broaden and Build theory (1998) was born from the positive approach in psychology. The theory claims that daily experiences of positive emotions combine over time to build a variety of significant personal resources. This is quite different to the two previous theories as the variables of challenge or stress do not feature. Instead Fredrickson believes that resources are built not in reaction to stress but through frequent experiences of positive emotions which he suggests become 'keys to later increases in well-being' (2008, p.1045).

2.8 The considered strengths of the new definition

It could be argued that this new proposed definition embraces a number of strengths: simplicity, universal application, optimism and basis for measurement.

2.8.1 Simplicity

Firstly, the simple, yet precise nature of the definition answers Forgeard's (2011) plea to move away from 'broad definitions' (p. 81). As much as the definition is indebted to the work of Headey and Wearing (1992) and Cummins (2010), each of their models was complex and difficult to follow at first glance. Wellbeing is a term

used by the lay person, and is not just for the consideration of academics.

Consequently, researchers have a duty to communicate what wellbeing is, in a clear and effective manner. Indeed, Lilienfield (2011) talks in a forthright manner about the public's scepticism in regard to psychology and explains that we should be ready to communicate effectively when we 'dare to venture out-side of the hallowed halls of academia or our therapy offices to that foreign land called the 'real world'...' (p.1). Consequently, the definition will be more accessible in this forum.

2.8.2 Universal application

Secondly, a true asset of the definition is its universal nature. The definition can be applied to all individuals regardless of age, culture and gender. However, this universal nature does not reflect 'a pronounced increase in the popularity of reductionist explanations of human behaviour' (Lilienfield, 2011, p. 11) that has existed during the past several decades. Instead, it allows for the notion that each individual has a unique resource pool which 'determines whether or not a task an individual meets turns out to be a routine chore, a challenge ... or a risk' (Hendry and Kloep, 2002, p. 24).

2.8.3 Optimism

The definition also reflects the current emphasis on positive psychology. It views individuals 'as decision makers, with choices, preferences, and the possibility of becoming masterful, efficacious' (Seligman, 2002b, p. 3). In a similar vein, Csikszentmihalyi (2002) makes it clear that 'happiness is not something that just happens ... [it] is a condition that must be prepared for, cultivated, and defended privately by each person' (p. 2). This puts the pursuit of wellbeing in the hands of individuals by teaching them that they can increase their resources or challenges to

maintain a sense of equilibrium. As well as reflecting this new direction in psychology, it also echoes current trends within the National Health Service in the UK with the Expert Patient Programme (EPP) that was launched in 2002. This programme supports the idea of self-management: ‘whatever we do to make the most of our lives by coping with our difficulties and making the most of what we have’ (Martyn, 2002, p. 4).

2.8.4 Basis for measurement

Finally, the proposed definition answers a number of the concerns expressed at the start of this chapter. With wellbeing becoming tangible (Thomas, 2009, p. 11) and operationalised, measurement becomes easier. This would extend the qualitative work undertaken by Hendry and Kloep (2002) on resources and challenges with the potential for developing a quantitative measure of wellbeing based on these two aspects and adds to the theoretical ideas already reviewed in this chapter. This definition, therefore, became the basis for a survey to measure the challenges and resources of FE students. This was then used to measure the impact of the newly designed pastoral programme which aimed to enhance wellbeing. Although the current research was undertaken in an educational location, if the proposed definition is accepted as a valid definition of wellbeing the questionnaire could easily be adapted and applied across a wide range of settings.

2.8.5 Current use of the definition

Following the publication of the definition in 2012 a number of other researchers have utilised the definition as part of their own research. The application of the definition has been used in a number of different ways. Firstly, some studies have used the definition to consider how the level of resources relates to levels of

challenge. Wosinski *et al.*, (2015) utilised the definition with patients suffering from Parkinson's disease. Their research demonstrated that:

well-being is possible when individuals have the psychological, social and physical resources, to deal with a specific psychological, social or physical challenge and may be experienced despite the worsening of symptoms (p.14).

Two studies consider level of resources with young people. Lyman and Luthar (2014) used the model in order to gather students' subjective feelings of wellbeing as they believed that personal feelings of competence were 'rarely considered in operationalizing "doing well" among youth at risk'. In their research they consequently examined two positive indicators: 'feelings of personal mastery or competence and of interpersonal relatedness'. Duran *et al.* (2015) used the model to help young people manage their emotional responses in order to achieve a better level of wellbeing. Away from resources, one piece of research (Yarmentchuk, 2014) investigated the wellbeing of individuals in an emergency situation as it 'embodies conditions when individuals have more challenges than resources' (p.175).

The definition has also been utilised to measure the effectiveness of interventions. Townshend (2014) used the definition to evaluate the effectiveness of a mindful parent programme; Wosinski *et al.*'s (2015) research with Parkinson's patients involved a nursing intervention; and Castel *et al.* (2015) applied it when investigating the wellbeing of long-term hospitalised patients following a cognitive stimulation programme.

Finally, researchers have employed the definition to help individuals understand what wellbeing actually is and how they as individuals can use the definition in order to take control of their own level of wellbeing (Director of Public Health,

Enhancing wellbeing – Evaluating an Intervention for Further Education Students
2015; Gibson, 2015; Ray-Sannerud, Leyshon and Vallevik, 2015; Wilckens and Hall, 2015; Spiers, 2015; Lemma *et al.* 2014).

2.9 Conclusion

To conclude, the publishing of this definition in 2012 was timely given the intention of the UK government to implement measures of wellbeing for the UK as a whole. Indeed, the Office of National Statistics opened a discussion chapter on domains and measures of national wellbeing just before the publication of the definition (Beaumont, 2011). The chapter states that the question of individual wellbeing ‘is an area which the national debate showed was important to people’ (Beaumont, 2011, p. 4) and which has consequently been placed at the heart of the national wellbeing framework. It is hoped that the proposed definition of wellbeing could aid the measurement of national wellbeing and further the understanding of wellbeing as a whole.

2.10 Summary

This chapter has considered a number of important considerations around the definition of wellbeing:

- Firstly, it has been demonstrated that wellbeing is a growing area of research. However, there has been an ongoing discussion around whether it is a concept that can be defined.
- A number of different aspects have been discussed with regards to what constitutes wellbeing. The chapter has proposed that wellbeing goes beyond quality of life or life satisfaction, due to its multifaceted nature.
- The chapter has presented a literature review that gives support for a new definition to consider the inclusion of equilibrium, challenges and resources.

This has led to a newly proposed definition of wellbeing as the balance point between an individual's resource pool and the challenges faced.

- A justification for the inclusion of the variables (resources and challenges) has been presented through the discussion of how three key theories from psychology support their inclusion; Cognitive-relational theory (Lazarus and Folkman, 1984); Broaden and Build theory (Fredrickson, 1998) and the Conservation of Resources theory (Hobfoll, 1998).
- The chapter ends by presenting four considered strengths of the proposed definition; simplicity; universal application; optimism and basis for measurement.

Chapter Three – Wellbeing Interventions

The overall aim of this research is to establish whether wellbeing can be enhanced in FE students by means of a pastoral intervention. In order to achieve this aim this chapter will firstly consider whether it is actually possible to enhance wellbeing. If the evidence points towards this being possible it will be essential to consider what makes an intervention successful and whether wellbeing interventions work in educational settings. It is also important to consider whether there is a need for an intervention for FE students before deciding what should be included in a successful wellbeing intervention.

3.1 Can wellbeing be enhanced?

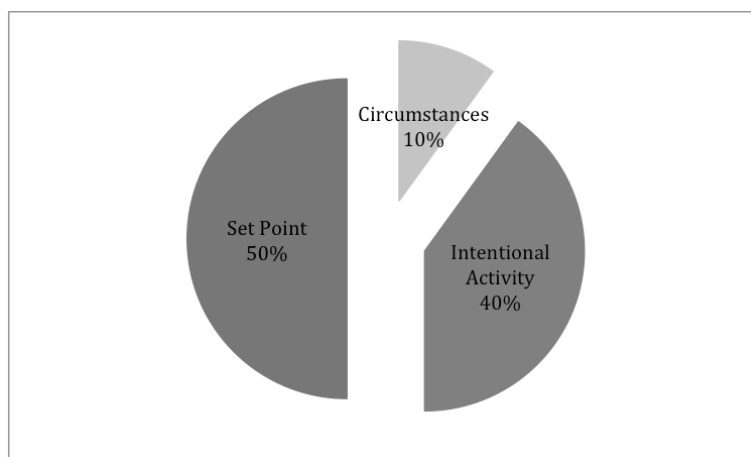
Before considering developing a programme to enhance wellbeing it is imperative to ask whether this is actually possible (Jacobs Bao and Lyubomirsky 2014, Layous and Lyubomirsky, 2014). Mitchell *et al.* (2009) make the point that although there is plenty of literature that discusses the pursuit of increased wellbeing as being worthy, there is a certain lack of research that debates whether wellbeing can be enhanced and sustained. Indeed, Lyubomirsky and Della Porta (2010) state that much research has served ‘to underscore the difficulty – if not impossibility – of lastingly enhancing well-being’ (p.452).

As discussed in Chapter Two, some researchers argue that individuals have a happiness set point (Brickman and Campbell 1971; Hedy and Wearing 1989, 1991, 1992; Lykken and Tellegen 1996; Cummins, 2010). This would imply that any pursuit of an enhancement in wellbeing would be ineffective as an individual would return to the level of wellbeing they had before any intervention. This links to the idea of the hedonic treadmill (Brickman and Campbell, 1971) which suggests that individuals quickly adapt to any improvement in wellbeing and, therefore, cease to

notice the benefit. Indeed, Kahneman (1999) suggested that individuals could experience a satisfaction treadmill, where an upsurge in wellbeing could lead to raised expectations, which may result in dissatisfaction with future positive life events. This is a similar view shared by Mauss *et al.* (2011) whose research suggested that putting too high a value on the pursuit for happiness (which they argue is 'a key ingredient of wellbeing' p.807) can lead to detrimental levels of wellbeing. This is because the pursuit of happiness itself could be self-defeating because the more individuals value happiness, the more likely they will feel disappointed if they do not achieve it. However, in opposition to this view Fredrickson *et al.* (2008) point to more recent research that indicates that hedonic adaption is not necessarily inevitable (Diener *et al.* 2006). He talks of individuals being able to 'outpace' (p.1060) the treadmill by undertaking deliberate activities to enhance wellbeing.

A theory that brings together both sides of this argument is the Sustainable Happiness Model proposed by Lyubomirsky *et al.* (2005). The authors suggest that an individual's level of happiness/wellbeing is 'governed by 3 major factors: a genetically determined set point for happiness, happiness-relevant circumstantial factors, and happiness-relevant activities and practices' (p.111):

Figure 3.1 Sustainable Happiness Model



Lyubomirsky *et al.* (2005) p. 116

This model accepts the idea of a set point for wellbeing as well as the fact that circumstances are beyond an individual's control. But what is fundamental to the current debate is the idea that intentional activity has the power to enhance an individual's wellbeing. This would suggest that individuals would benefit from undertaking intentionally positive activities rather than aiming to adjust their personal circumstances (Sheldon and Lyubomirsky 2006, 2009). This in turn would aid individuals in believing they can move in an 'upward spiral' (Sheldon and Houser-Marko, 2001, Fredrickson and Joiner, 2002) towards improved wellbeing. Lyubomirsky and Della Porter (2010) state that involvement in intentional activity allows:

people to act on their circumstances – through their thoughts, plans and behaviours – rather than simply reacting to circumstances that are often uncontrollable (p.453).

The focus on control reflects the view of Nakamura and Csikszentmihalyi (2002) who believe that 'flow' is achieved when individuals engage in an activity that has a 'just-manageable' level of challenge. This level of challenge allows the individual to

still feel in control but also allows them to be absorbed in the activity – therefore experiencing flow.

In answer to the debate about whether wellbeing can be enhanced, Layous and Lyubomirsky (2014) clearly state that there is a growing body of research that demonstrates that intentional ‘happiness-increasing strategies do stimulate increases in well-being’ (p.6). This links to the idea suggested in Chapter Two that individuals would benefit from learning strategies to access inbuilt areas of resources in order to improve wellbeing. Indeed, they make their views clear on the debate around whether wellbeing can be enriched:

Current and future research would do well to move beyond simply focusing on whether PAIs [Positive Activity Interventions] can increase well-being. They can. Today’s pressing questions involve understanding the mechanisms underlying the success of happiness-increasing interventions (P.7).

3.2 Are interventions an effective way to enhance wellbeing?

An interesting point is made by Schueller, Kashdan and Parks (2014) who state that the abundance of wellbeing interventions increases the need to question the effectiveness of such techniques. From a research perspective it could be argued that it is not the number of interventions that should lead to questions of effectiveness, but the evidence base on which they are developed and assessed. Nevertheless, there are a number of studies that attempt to answer this questioning of effectiveness yet, this does not mean that they tell us the full picture. For example, Bolier *et al.*’s (2013) meta-analysis aimed to address some of the limitations they saw of Sin and Lyubomirsky (2009) meta-analytical study which found that Positive Psychology Interventions (PPIs) were effective in enhancing wellbeing and helped to reduce depressive symptom levels in clinical populations. One of the limitations that Bolier *et al.* (2013) aimed to address was the lack of

clarity they felt Sin and Lyubomirsky (2009) had used in the inclusion criteria.

Therefore, Bolier *et al.* (2013) undertook analysis of 39 studies which were aimed at mental health promotion and treatment. The research reached the same conclusion as Sin and Lyubomirsky (2009) that many interventions are effective in enhancing wellbeing and reducing depressive symptoms. Although this indicates that the use of interventions can be effective, a limitation of the work was its narrow focus on what determines wellbeing. As previously discussed, one aim of this thesis was to use a broader definition of wellbeing which would go beyond a focus on mental health. For the sake of this thesis there would need to be compelling evidence that wellbeing interventions are effective for the general population, rather than just those who are suffering from mental health problems.

Given the established difficulty still surrounding the definition of the term 'wellbeing', McLellan and Stewart (2014) highlight this continued problem and go on to state that it is compounded by the term being used interchangeably with other terms such as 'happiness'. A clear example of this can be seen at the start of Lyubormirsky and Della Porta's chapter on cognitive and behavioural interventions (2010), where they boldly state:

Frequent positive affect, high life satisfaction, and infrequent negative affect all comprise subjective wellbeing (Diener, Suh, Lucas and Smith, 1999), the more formal label for the term happiness (Sheldon and Lyubomirsky, 2004). Thus the terms well-being and happiness are used interchangeably throughout this chapter (p.450).

Chapter One discussed how wellbeing has been explored through psychology and philosophy but McLellan and Stewart (2014) suggest that psychology, as a discipline, is best placed to provide the answers to whether wellbeing can be enhanced via interventions. This is due to its distinct view that wellbeing should be

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

defined subjectively (Fegter, Machold and Ritcher, 2010). This reflects the view of Seligman and Csikszentmihalyi (2000) that psychology also allows for the study of wellbeing in everyday life. Therefore, this chapter will purely focus on psychological Intervention studies in determining the effectiveness of developing an intervention for this research.

3.3 What makes an Intervention Successful?

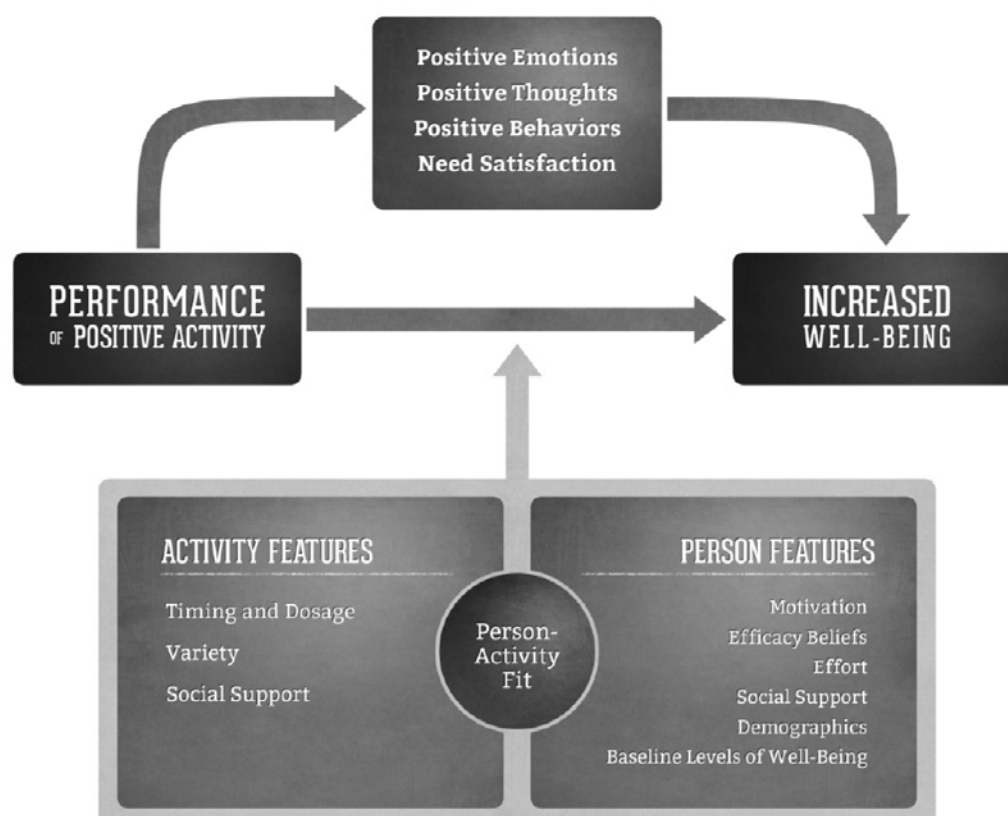
In 2011 Boehm, Lyubomirsky and Sheldon stated that there was evidence to suggest that wellbeing interventions can be successful, even if it is only in the short-term. But what is an intervention? As already mentioned, Sin and Lyubomirsky (2009) put forward the case for PPIs, although they were mindful that solid empirical evidence was needed in order to fully view their effectiveness. PPIs focus on intentional activities that promote positive behaviours, feelings and cognitions. Parks and Biswas-Diener (2013) argue that that this positive focus results in a growth of wellbeing for a group or individual. Building on this Schueller, Kashdan and Parks (2014) go on to explain that there are two essential factors of PPIs that researchers need to consider in order for the intervention to be successful:

1. The goal of the intervention
2. The pathways, or methods by which the intervention operates.

In keeping with the current model of wellbeing being presented in this thesis, Schueller, Kashdan and Parks (2014) emphasise the need for the goal to target broad wellbeing, rather than a single dimension, such as happiness. They go on to state how important it is to include methods that promote positive thoughts and behaviours rather than merely ‘fixing deficits or addressing maladaptive patterns’ (p.92).

In addition to these two factors for success, Layous and Lyubomirsky (2014) put forward a model of psychological mediators and moderators that they believe underlie the efficacy of Positive Activity Interventions:

Figure 3.2 Model of Psychological Mediators and Moderators Underlying the Efficacy of Positive Activity Interventions



(Layous and Lyubomirsky, 2014, p.45)

This simplified version of their positive activity model (Lyubomirsky and Layous, 2013) contains a number of areas that need to be considered to aim for a successful intervention. The top three boxes of the model encompass the definition of PPIs discussed above. Consequently, they propose that it is the features that influence the level of effectiveness of any intervention.

I. Activity Features

The model states that there are two key features of activities including in interventions: duration and variety. Lyubomirsky, Sheldon, *et al.* (2005) found that the regularity of a positive activity affected the efficiency of the overall intervention. In one study, they compared the difference between participants undertaking five acts of kindness in one day to participants that undertook the same number of activities across a week. The greater increases in wellbeing were experienced by the participants who undertook the activities all in the one day. In a second study they found that participants who counted their blessings only once per week for 6 weeks experienced greater wellbeing compared to participants who counted their blessings three times per week over the same time period. Lyubomirsky, Sheldon, *et al.* (2005) concluded that performing an activity too much over an extended time, reduced the benefits of the activity. However, other research suggests that people who voluntarily engage in positive activity increase their wellbeing the more they undertake the activity (Parks *et al.*, 2012). Therefore, it is vital to consider the frequency of activity based on how participants arrive at the intervention.

In terms of length of intervention, it is not surprising that Layous and Lyubomirsky (2014) state that the longer the intervention the better. This reflects the findings of the Sin and Lyubomirsky meta-analysis (2009), whose selected studies varied from four to ten weeks. They concluded that longer interventions produced more significant findings in terms of improved wellbeing.

Another key activity feature to consider when designing interventions is variety.

This seems to work on two levels. Firstly, research suggests that variety lead to greater enhancement of wellbeing (Fordyce, 1977, 1983; Seligman *et al.*, 2005; Jacobs Bao and Lyubomirsky, 2014; Parks *et al.*, 2012; Sin and Lyubomirsky, 2009; Sheldon, Boem and Lyubomirsky, 2012). This may be because it takes longer for an individual to get bored by the programme resulting in sustained participation (Jacobs Bao and Lyubomirsky, 2014). Parks *et al.* (2012) have also suggested that this reflects how people seek to be happier in the real world, with participants, on average, undertaking seven simultaneously activities to increase their level of happiness.

The above model also suggests that interventions with variety can slow the hedonic treadmill. There could be two reasons for this slowing of adaption:

- a) the individual's level of wellbeing is boosted by the variety of activities.

Consequently, it takes longer for the individual to return to a baseline

or

- b) the individual remains engaged in the activity for longer (Leventhal *et al.*, 2007; Jacobs Bao and Lyubomirsky, 2014).

II. Person Features

The next part of the model outlines a number of person features that can lead to an enhancement of wellbeing. The most relevant to this thesis discussion are: motivation, social support and baseline levels of wellbeing.

It does not seem surprising that the model highlights the need for individuals to be motivated to engage with the intervention in order to have belief in its efficacy.

This in turn links to the need for an individual to be actively engaged with an intervention (Layous, Lee, *et al.*, 2012; Lyubomirsky *et al.*, 2011) Based on the meta-analysis of Sin and Lyubomirsky (2009) and the research of others (Seligman *et al.*, 2005; Lyubomirsky *et al.*, 2011) Layous and Lyubomirsky (2014) conjecture that participant self-selection into an intervention would lead to higher gains in wellbeing. However, not all interventions can rely on self-selection, especially if undertaken with institutional settings to a larger sample. Therefore, when an intervention cannot rely on self-selection Deci and Ryan's self-determination theory (2000), could give a valuable insight into how to make an intervention effective. As already discussed the theory is based on three components:

1. Autonomy – the feeling that actions taken are under the individual's control;
2. Competence – the feeling of being skilled;
3. Relatedness – the feeling of being connected to others.

It is possible that a non-selected sample could be motivated to engage with the intervention if these three areas are taken into account in its design.

Social support is an interesting aspect to the model and one that has already been highlighted by Hendry and Kloep (2000) as one of the five interacting elements of every individual's resource pool (see Chapter Two). Research has often demonstrated the strong link between social support and higher levels of wellbeing (e.g. Broadhead *et al.*, 1983; Ogden, 2000; Diener, Helliwell, and Kahneman, 2010; Wing and Jeffrey, 1999; DiMatteo, 2004; Norcross and Vangarelli, 1989; Benard, 2012). However, Layous and Lyubomirsky (2014) warn about the danger of perceived social support through interventions having counterproductive

consequences. Bolger, Zuckerman and Kessler (2000) found that it was the perception of the support that was far more important than the received support. Consequently, Layous and Lyubormirsky (2014) warn that interventions need to make participants feel supported without removing their autonomy.

Layous and Lyubormirsky (2014) discuss a number of person features in their paper. However, one particularly interesting discussion is whether individuals need to have a certain level of wellbeing to be able to benefit from interventions. They suggest that individuals with low levels of wellbeing may find interventions too challenging on an emotional level. They go on to suggest that interventions may need to start with a 'positive mood induction' (p.25) to boost the motivation and eagerness of participants.

In summary the model of psychological mediators and moderators underlying the efficacy of Positive Activity Interventions suggests that effective interventions should:

- consider the frequency of activities,
- aim to be sustained,
- include a variety of activities,
- encourage high levels of motivation in the participants,
- offer perceived social support,
- accept that individuals with low levels wellbeing may find it difficult to engage with interventions.

3.4 Can wellbeing interventions be used in Education?

Despite, Chafouleas and Bray's (2004) concern that there had been very few applications of positive psychology in education, a number of researchers have argued that these are ideal institutions to make a link between research and practice (Clonan *et al.*, 2004; Howard-Jones, 2007; King *et al.*, 2009; Waters, 2011; Keyes *et al.*, 2002; Frallion, 2004). Indeed, Waters' review of school-based wellbeing interventions (2011) highlighted that there has been an increase in PPIs for improving wellbeing. She states that the focus on wellbeing should be a key aspect of 21st century education and asserts that wellbeing skills can be taught. Her paper discusses twelve successful interventions in education. Unfortunately, the programmes she discusses focus on only one aspect of wellbeing rather than focusing on the broader aspect of wellbeing encouraged by Schueller, Kashdan and Parks (2014) and Layous and Lyubormirsky (2014):

Table 3.1 Focus of Wellbeing Interventions

Intervention Focus	Research Study
Hope	Green, Anthony, and Rynsaardt, 2007; Marques, Pais-Ribeiro and Lopez, 2009
Gratitude	Froh, Sefick, and Emmons, 2008; Froh, Kashdan, Ozimkowski, and Miller, 2009
Serenity (including mindfulness)	Broderick and Metz, 2009; Huppert and Johnson, 2010; Nidich <i>et al.</i> ,2011
Resilience	Bernard and Walton, 2011
Character Strengths	Seligman <i>et al.</i> , 2009; Madden, Green, and Grant 2010; Austin ,2005

A high profile programme that attempted to go beyond the narrow focus on one element of wellbeing was the UK Resilience Programme (UKRP) which was supported by the Department for Children, Schools and Families (Challen *et al.*, 2009). It was launched in three local authorities in England during the academic year 2007-08. The workshops were delivered to Year 7 pupils in secondary schools (aged 11-12) and aimed to improve children's psychological wellbeing by building resilience and promoting positive thinking.

However, there are three issues that need to be considered surrounding this programme. Firstly, by focusing purely on the building of resilience the programme could well have missed some of the other inbuilt resources within individuals which were proposed by Hendry and Kloep (2000). Masten (2001) defined resilience as 'good outcomes in spite of serious threats to adaptation or development' (Masten, 2001, p.228). From this one might infer that this is a skill that is only required at times of difficulty. However, it could be argued that resources can be utilised and developed during positive experiences as well as bad. A focus on a greater variety of skills would enable individuals to 'flourish' rather than to just bounce back from negative life experiences.

Secondly, Hart and Heaver (2013) reviewed twelve resilience programmes for children aged 12-18 years old. They found that many of the programmes implemented within schools applied the term 'resilience' in a vague and weak way. Consequently, it became difficult to identify those that could be realistically described as resilience-based.

Thirdly, the success of the UKRP programme was measured against pupils' depression and anxiety scores which highlight a concern with their concept of wellbeing. A more current thinking on wellbeing interventions is that any intervention programme should focus on students' strengths rather than deficits (Seligman and Csikszentmihalyi, 2000). This reflects psychology's shift from pathology to wellbeing as:

reductions in depressive symptoms ... over the course of a positive psychological intervention offers nothing beyond the primary outcomes being used in clinical psychology and psychiatry (Schueller, Kashdan, and Parks, 2014 p.95).

In response to this concern, Noble and McGrath (2008) encouraged educators to use positive psychology in educational settings by focusing on the Positive Youth Development (PYD) approach when designing interventions. This involves:

- promoting positive relationships with peers
- emphasising strengths
- building competencies
- providing opportunities to learn healthy behaviours
- connecting youth with caring adults (Noble and McGrath, 2008, p.120).

This more positive idea of focusing on strengths and competencies is highlighted by others (Wyn *et al.*, 2000; Yuen *et al.*, 2002, 2007, 2010; Keyes, 2002; Lang, 2003; Seligman *et al.*, 2009; Bernard and Walton, 2011; Green *et al.*, 2011; Norrish and Vella-Brodrick, 2009; Sun and Hui, 2007; Taylor, Gillies and Ashman, 2009). This focus would result in interventions becoming proactive, rather than reactive and available to all, not only those who are suffering with behavioural difficulties (Akin-

Little *et al.*, 2003). Many researchers also believe that a consequence of this focus would result in maximised educational achievement alongside an increase in student wellbeing (Cushman, Clelland and Hornby, 2011; Stafford *et al.*, 2007; Seligman, *et al.*, 2009; Mahar and Sullivan, 2002; Bernard and Walton, 2011).

The need for wellbeing interventions in educational settings increased in the UK with 2014 ending with an amplified focus on wellbeing in schools. The end of 2014 saw Nicky Morgan, Education Secretary, unveil a £5million fund to offer character-building classes (Clark, 2014). She insisted that resilience and ‘grit’ in pupils was just as essential as helping pupils achieve good grades. Sir Anthony Seldon, Master of Wellington College, also warned of a ticking time bomb if schools did not make young people's happiness and wellbeing a major priority for in the year ahead (Telegraph, 2014). The month also ended with the CentreForum report calling for schools to act as enabling environments that build resilient young people (Taggart, Lee and McDonald, 2014). However, yet again it could be argued that this focus purely on resilience is too narrow. It could be argued that interventions within education should focus on the variety of resources available to young people, and that strategies should be taught in order to access them. This would mean that individuals would have a greater range of approaches available to them to cope with the challenges they face.

In answer to this demand for greater focus on wellbeing Manning and Paxman (2015) sought opinion from both staff and pupils from six state schools in England, on whether the appointment of a Head of Wellbeing would be of benefit to the whole school community. The report highlights the national trends that indicate that current health and wellbeing strategies are making little or no impact in a

significant number of schools. They quote a 2013 Ofsted report which estimated that the quality of personal, social and health education (PSHE) was below acceptable standards in 40% of schools. This report argued that the need for this role in schools is imperative due to sombre data on both staff and pupil wellbeing.

The report offered three possible models that schools could follow in their appointment of a Head of Wellbeing and gave suggested roles and job specifications for each. Across the three models there were eight common tasks ranging from 'Pupil Mental Health; prevention co-ordinator' to 'increasing parent engagement', all of which are valuable roles but it is questionable whether this is achievable by one member of staff. Manning and Paxman (2015) also suggested experiences and qualifications of the post holder that included educational experience alongside counselling and/or medical capability. This leads to the question of whether recruitment for this role would be successful. Consequently, introducing wellbeing interventions to educational settings may be a better solution to meeting the need for enhancing wellbeing.

3.5 Is there a need for an Intervention for FE Students in Wales?

This thesis has already established that wellbeing has become a field of research that has made significant developments in recent years. However, Vinas *et al.* (2014) highlight that research has focused more on adults and less so on adolescents. This seems surprising considering the intensification in attention given to the wellbeing of young people (see Chapter One), especially in relation to the findings of the United Nations who placed the UK in the bottom third of countries for children's subjective wellbeing (United Nations Children's Fund, 2007). This also reflects the concern that FE 'remains grossly under-researched, studied and

Enhancing wellbeing – Evaluating an Intervention for Further Education Students analysed' (Hughes, Taylor and Tight, 1996, p. 7). However, before developing an intervention there is a need to question whether a wellbeing intervention is relevant and appropriate for students in FE.

Adolescence is an especially vulnerable period of development due to considerable changes in psychological, social and biological behaviours (see Chapter One for further discussion). A number of researchers (Hurry, Aggleton, and Warwick 2000; Harden *et al.* 2001; Stanley and Manthorpe, 2001; Jacobson, 2002; Warwick *et al.*, 2008; Cushman *et al.*, 2011; Yates and Atkinson, 2011) state that 16 to 19 year olds are at greater risk of mental health problems due, in part, to stressful life experiences and enhanced risk factors. Social factors, such as family unemployment, media pressure and diminished connectedness to their community, also have their effect on this age group (Ginsberg and Jablow, 2006; McCreanor *et al.*, 2006).

As a sector of education the Learning and Skills Improvement Service (LSIS, 2009) state that FE encounters learners that 'are statistically more likely to experience poor health and well-being' (p.2). This appears to be supported by studies that indicate that a decline in levels of wellbeing appear as children get older (Gutman *et al.*, 2010; Tomy and Cummins, 2011). McLellan and Stewart (2014) state that learners nearing the end of Year 11 (age 15-16), appear to experience the lowest levels of wellbeing compared to other year groups. Allen (2011) suggests that this may be due to learners' concerns relating to their futures. The Schools Health Education Unit (2002) highlight the high rate of mental health issues in one FE college where 26% of students had experienced problems during the current term, with 46% having experienced problems in the past. Foster (2005) also put forward

an argument that a number of FE students were particularly vulnerable to mental health problems due to finding school difficult, needing extra time to develop basic skills and being from socially and economically deprived backgrounds.

So is FE the right place to tackle these issues? Bond *et al.* (2004) state that educational institutions have long been recognised as ideal places for health promotion and education. Consequently, in July 2008, a number of UK government departments announced the launch of the Healthy Further Education Programme (Healthy FE) which placed the improvement of staff and learner wellbeing at the heart of its strategy. Healthy FE highlighted the benefits of wellbeing promotion in sectors beyond health (Friedli, 2009). The Healthy FE programme was very similar to the Health Promoting School (HPS) framework (World Health Organisation, 1996) which encouraged collaboration between health and education sectors to be more effective in health promotion. Lee *et al.* (2006) maintain that institutions following this approach 'build important protective factors for students' health and wellbeing' (p.534). Unfortunately, the Healthy FE programme is only available to FE Institutions in England. In Wales, despite a Welsh Government Task and Finish Group meeting in July 2012 (Bowker, 2013), a Healthy FE scheme is only at the pilot stage at the moment, although in January 2015, the scheme did develop further with a framework being finalised (UK Healthy Universities Network, 2015). This document outlines the criteria that FE should be considering when developing action plans to promote a whole setting approach to health improvement. The framework will now be developed as an online resource by Public Health Wales, so is still not an accessible tool for FE intuitions at this time. Therefore, this highlights the need for an intervention programme for Welsh FE Learners.

When considering the focus of a wellbeing intervention programme Benard (2012) makes a plea that we should not see adolescents as:

problems which need to be fixed but as resources who can contribute to their families, schools, and communities (p.9).

This points towards the need for a wellbeing intervention that enables young people to develop skills that facilitates them to develop as ‘good and decent people’ (Wong, 2011, p.77), reflecting the key goal of positive psychology. This also links to the aim of 21st century education which develops the whole student (Cain and Carnellor, 2008; McCombs, 2004; Noddings, 1995; Palmer, 2003).

When considering which key skills are needed for this age group it is interesting to look at the findings of Nyutu and Gysber (2008) who found that there were five areas for which adolescents sought counselling: human relationships, career development, self-development, social values and learning skills. Yuen *et al.* (2010) investigated this further by undertaking focus group research with adolescents. They identified students’ recognition of significant life skills, including those related directly to ‘academic development, ‘learning to learn’, personal and social growth, and future career planning’ (p.295). This link between challenges (as identified by the key areas the students sought counselling for) and skills also reflects the two opposing elements of the model of wellbeing proposed in Chapter Two.

Consequently, it seemed appropriate to undertake focus group research with FE students for the current study to establish what challenges and resources/life skills they feel are important to them. This would then feed in to the development of an intervention that focuses on the skills/resources that FE students could develop.

Subsequently, the aim of the programme would be to assist students in developing the skills/resources required to deal with the challenges faced by this age group.

In terms of developing these skills Jephcote *et al.* (2008) proposed that FE is the ideal sector. His research briefing, based on interviews in three FE colleges in south Wales, revealed that both staff and students felt that FE gave learners more individualised help and placed more importance on outcomes aside from academic achievement than other educational sectors. Indeed, he strongly states that:

Teachers have professional identities which emphasise further education's role in compensating for previous educational disadvantage and the teachers' primary responsibilities for the social well-being of their students (P.3).

This view is further supported by other researchers who believe that we must pay as much attention to developing the skills for wellbeing as we do academic skills (National Scientific Council for the Developing Child, 2006) and that wellbeing must be accepted as an additional indicator of educational success alongside more traditional measures such as examination success (Waters, 2011; Huebner, Gilman, Reschly, and Hall, 2009; Judge and Kammeyer-Mueller, 2011; Huebner, 2010).

So when answering the question of whether a wellbeing intervention programme is needed for FE students in Wales it is worth considering the thoughts of Layous *et al.* (2013):

The dearth of work on enhancing happiness and prosociality in youth, coupled with evidence of their many benefits, highlights the desirability of extending research to this age group (p.1).

3.6 Four key influences on the content of the intervention

The research discussed so far has indicated that a skill-based wellbeing intervention, focusing on strategies to build the resources to cope with challenges, could be appropriate for this target audience. However, the success of any intervention could be determined by the evidence base that has influenced its content. A number of researchers have explored how the content of interventions can have an impact on effectiveness. This part of the chapter will review four key influences that will act as guidance for the content of the pastoral intervention developed for the current research.

3.6.1 Human Givens Theory – Griffin and Tyrell (2003)

Human givens (HG) theory (Griffin and Tyrrell, 2003) links closely to the model of wellbeing on which the intervention was based. This theory believes that individuals have innate emotional needs (appendix E) that need to be met if emotional wellbeing is to be ensured. If these needs are not met, the individual may experience emotional distress and possible mental health problems. Griffin and Tyrrell propose specific resources (see appendix E) that individuals require in order to ensure their needs are sustained. Andrews *et al.* (2011) explain that these needs can be maintained through the use of an individual's existing resources in conjunction with further development of resources through learning and life experience.

A number of researchers (Muss, 1991; Corp, Tsaroucha and Kingston, 2008; Andrews *et al.*, 2011) have compared HG theory with the principles of Cognitive Behaviour Therapy (CBT). CBT is a brief therapy that encourages individuals to explore the challenges they face and aims to support individuals in understanding the connection between their thoughts and feelings and their behaviour (Dunsmir

and Lyadurai, 2006). However, the difference between the two theories is that whilst CBT focuses on questioning and testing unhelpful thoughts and beliefs, HG theory identifies unmet needs and looks to ways of developing resources to meet these needs. This has become the basis for HG therapy, where goal setting, skills training and mental rehearsal is used to help clients develop these resources. Griffin and Tyrell (2007) assert that individuals who have their needs met form better relationships with others and do not suffer from mental health problems.

A critical consideration of whether HG as a theory was appropriate for the current intervention was whether it was suitable for adolescents. Yates (2011) states that the theory is particularly effective with this age group owing to the fact that its foundations are grounded in neuropsychological findings. However, in an interview for the British Medical Journal (Sladden, 2005) Tyrell, one of the co-founders of HG theory, had spoken of the need for research evidence for the theory. Consequently, Yates and Atkinson (2011) explored the use of HG Therapy by undertaking a case study on three adolescents using HG therapy on an individual basis. In this research the HG therapy produced positive outcomes in all three participants. Yates (2011) concluded that the HG approach had a great deal to offer this age group but there was a need for further research. Although this result could be questioned due to the small sample, it would seem logical to consider the resources suggested by the Human Givens Theory, when deciding on the content for the current intervention. As the planned sample size for the current research was much larger it was anticipated that the results of the current intervention would extend Yates's and Atkinson's research on a greater scale.

3.6.2 Positive Educational Practices (PEPs) Framework – Noble and McGrath (2008)

The second significant influence comes from Noble and McGrath (2008). Their work was greatly influenced by the core principles from the positive psychology movement in education which moves away from the concept of student welfare, with students being seen to be at risk, towards the notion of student wellbeing alongside resilience in order to enable students to flourish. Noble and McGrath (2008) proposed a Positive Educational Practices (PEPs) Framework for promoting learner wellbeing (see appendix F) which Waters (2011) has compared to Seligman's building blocks for a flourishing life (PERMA, 2011), which was discussed in Chapter Two. The aim of the PEPs framework is for educators to use it as 'an organising tool for facilitating ... pupil wellbeing and supporting pupils to achieve learning outcomes and engage in prosocial behaviour' (Noble and McGrath, 2008, p.119).

Noble and McGrath (2007) believe that the PEPs framework allows educators to enhance student wellbeing through: developing positive emotions and relationships; improving mastery through a skills-based approach; maximising engagement through a strengths-based approach; and fostering a sense of meaning and purpose. The framework emerged from their BOUNCE BACK! Resilience programme (McGrath and Noble, 2003) developed for Year 1 (ages 6-7) to Year 8 students (ages 13-14) in Australia. The programme aims to promote the development of resilience in both staff and students. A relatively recent report, based on the experiences of the programme by staff and students at sixteen primary schools in Perth and Kinross, Scotland (Axford, Blyth and Schepens, 2010), found that pupils showed an increase in personal resilience attitudes and skills following the programme. There was also a marked increase in pupils' awareness

of control over their feelings. From a teacher perspective the research demonstrated an increase in the use of resilience skills alongside a very significant increase in their mental wellbeing after teaching BOUNCE BACK! Some teachers commented on the positive effects the programme had on their own personal resilience. These teachers felt that the programme helped them to feel more equipped to deal with challenging situations in and out of the classroom.

Noble and McGrath (2012) encourage educators to use the PEPs framework alongside a number of guiding principles that have emerged from effective wellbeing curriculum programmes:

- Research has demonstrated that whole institutional programmes work best (Scheckner *et al.* 2002; Wells *et al.* 2003). By teaching a programme that encourages coping strategies and positive relationships, teacher wellbeing and job satisfaction can also be increased (Axford *et al.* 2010; Goldstein and Lake, 2000; Rimm-Kaufman and Sawyer, 2004).
- Programmes should be delivered by teachers and incorporated into their academic programmes (Durlak *et al.* 2011; Weissberg and O'Brien, 2004).
- Programmes should be taught to all students, not just to those who could be categorised as being 'at risk' (Greenberg *et al.*, 2003; Durlak *et al.*, 2011).
- Long-term approaches are likely to producing more enduring benefits (Durlak *et al.*, 2011).
- A significant element of the programme should be based on cognitive behavioural approaches (Andrews *et al.*, 2001, 2002; Scheckner *et al.*, 2002).

This framework fits in with the focus this chapter has placed on positive psychology as well as developing a programme that has a skill and strength based approach.

Consequently, it would be useful to consider this framework when designing the intervention.

3.6.3 Protective personal factors that contribute to resilience and wellbeing - Noble and McGrath, 2012

As part of their discussion on wellbeing and resilience in young people Noble and McGrath (2012) identified eleven key skills, attitudes and behaviours that research has suggested would lead to higher levels of resilience and coping in individuals:

Table 3.2 Skills identified by Noble and McGrath (2012) and the research evidence supporting them

Skills Attitudes and Behaviours	Research evidence
Social Skills	(Bornstein <i>et al.</i> 2003; Cove <i>et al.</i> 2005; National Crime Prevention 1999; Zins <i>et al.</i> 2004)
Behaviour that reflects empathy and prosocial values such as kindness, fairness and altruism	(Gilman 2001; Vandiver 2001; Werner and Smith 1992)
Emotional regulation	(Masten 2004)
Optimistic Thinking	(Moore, 2000; Ben-Zur 2003; Seligman <i>et al.</i> 1995; Gillham and Reivich 2004; Seligman 1992; Benard 1997)
Helpful thinking skills	(Werner and Smith 1992; Ellis 1997; Ellis and Dryden 1987)
Adaptive distancing	(Werner and Smith 1992)

A sense of humour	(Benard 2004; Lefcourt, 2001)
Goal-setting skills	(Masten and Obradović 2008; Vaillant 2003; Werner and Smith 1992; Werner, 1993)
A sense of autonomy, self-efficacy and awareness of one's strengths	(Masten 2004; Vaillant 2003)
A sense of meaning and purpose	(Cove <i>et al.</i> 2005)
Spiritual connectedness	(Haglund <i>et al.</i> 2007; Masten and Obradović 2008).

This set of skills and behaviours again reflected the aims of positive psychology within education and acted as a clear guide to what should be included in the pastoral intervention.

Noble and McGrath (2014) have more recently condensed the eleven areas into six foundations of positive education that link school-based practices and pedagogy:

- (i) strategies for teaching social-emotional capabilities that include prosocial values, social skills, resilience skills, skills for managing strong emotions, and skills for self-management and self-discipline;
- (ii) strategies for magnifying positive emotions;
- (iii) strategies for building positive relationships;
- (iv) using strengths-based approaches for both character and ability strengths;
- (v) helping young people achieve a sense of meaning and purpose and
- (vi) creating an optimal learning environment.

3.6.4 Abraham and Michie's Taxonomy of Behaviour Change techniques (2008)

A final framework to consider at this stage is Abraham and Michie's (2008)

Taxonomy of behaviour change techniques used in interventions. This taxonomy (see appendix G) covers 26 techniques and was the first systematic analysis to identify potentially effective techniques across behavioural domains. The taxonomy is grounded in theory as it links to a variety of theoretical accounts of behaviour change.

The strength of the taxonomy is that it has enabled behaviour change techniques to have standardised definitions. Michie *et al.* (2011) stated that this enabled the study of behaviour change to be more scientific for four reasons:

1. Standardised definitions allow for identification of effective techniques.
2. Authors can more accurately describe interventions which allows for accurate appraisal of the intervention.
3. Behaviour change techniques can be linked to actions. This can lead to an understanding of how interventions work.
4. Standard definitions are required so that research procedures can be implemented in practice.

From an educational perspective van Stralen *et al.*, (2011) recommended that future educational-based intervention studies applied Abraham and Michie's taxonomy when describing their intervention studies. van Stralen *et al.* believed that the adoption of the taxonomy would provide relevant information on effectiveness of techniques for future studies. In terms of the age group that the current intervention was targeting there have been a number of researchers that have already based their adolescent interventions on Abraham and Michie's

taxonomy (Lubans *et al.* 2010; Alberga *et al.*, 2013; Araújo-Soares *et al.*, 2009; Draper *et al.*, 2014). Consequently, it seems appropriate to ensure that the newly developed intervention included as many of these techniques as possible.

However, it is important to note that, although there appears to be many benefits of incorporating these frameworks into an intervention this could also cause challenges. Green (2000) warns that ‘any difficulty arises not so much from an insufficiency of theory, but rather the capacity to select relevant theory and apply it in practice’ (p.126). Therefore, the incorporation of these frameworks should not take priority over the design of the intervention if it is felt that the inclusion of the theories would prevent the intervention from working in practice. Therefore, before considering the frameworks there are other pragmatic factors that also need to be considered. Firstly it was important to assess the content of the current pastoral provision that the students would have experienced. This was designed to ensure that the content of the pilot is unique to the research and not a repeat of anything the students would have already encountered. Secondly, the views of the students from the focus groups need to be considered to ensure that the intervention is sufficiently theorised and operationalised. Finally a literature review will inform what content would be appropriate for the intervention.

Therefore, it was decided that the frameworks should then be used as a guide to the design of the content rather than as an extra level of requirement which could potentially overload the intervention. Fortunately, the four frameworks did not conflict with each other and provided a sense of congruence. This was aided by the fact that two of the frameworks are from Noble and McGrath, however, there are also similarities between the other frameworks (such as goal setting featuring in

both Noble and McGrath (2012) and Abraham and Michie (2008)). Therefore, the challenge of incorporating four frameworks into the intervention is less demanding than it may seem as there are common messages in each framework which allow for a holistic incorporation of the theoretical components. Also, only the relevant features of each model were incorporated rather than being the leading aspect in the design of the intervention. As they are all frameworks to guide intervention programmes it was hoped that selecting relevant aspects from each theory would not compromise the validity of the specific holistic incorporation of the theoretical components of each model.

3.7 Conclusions

As the thesis has established that there was no satisfactory existing definition of wellbeing alongside no appropriate measure for the age group under investigation, it was decided that this study would be based on the proposed definition (Dodge *et al.*, 2012). This subsequently influenced both the data collection and the design of the intervention.

3.8 Summary

In summary this chapter has discussed a number of questions surrounding wellbeing interventions.

Is it possible to enhance wellbeing?

Despite concerns surrounding set point theory and the hedonic treadmill, research suggests that it is possible to alter an individual's level of wellbeing. The Sustainable Happiness Model (Lyubomirsky, 2005) suggests that this altering of wellbeing levels can be achieved through focusing on intentional activities. Therefore, wellbeing interventions are a way of encouraging individuals to engage with activities to

enhance their wellbeing. Subsequently, the question that needs to be answered is what activities are the most successful in making this change?

What makes an intervention successful?

Research suggests that there is a need for wellbeing interventions to focus on wellbeing in the broader sense, rather than just addressing mental health issues. When designing an intervention there is a need to consider the regularity of the sessions, length of the programme (being at least ten weeks) and the variety of exercises. Any intervention needs to consider the level of motivation of the participants taking part. As the intervention designed for this thesis cannot rely on self-selection, it was important to ensure that the programme addresses autonomy, competence and relatedness (Deci and Ryan, 2000). This could be achieved by focusing on strategies to teach individuals about the innate resources they have to deal with the challenges they face in life. Social support is a central contributor to increases in wellbeing. However, learners will need to feel supported without losing their autonomy. It may be worthwhile accepting that individuals with low levels of wellbeing may find it difficult to engage with the intervention.

Do interventions work in educational settings?

For programmes in education to be successful research suggests that they should be based on the theoretical basis of positive psychology rather than the deficit approach. For that reason, a number of researchers believe that educational settings are the ideal place to explore the link between research and practice. Waters (2011) drew attention to the fact that there had been an increase in positive psychology programmes in education. However, many of these programmes focus on a narrow dimension of wellbeing (such as hope). More recently, there have been boarder programmes introduced into schools; however,

it could be argued that even these programmes need a wider focus. Contrariwise, the methods for measuring their success have also been linked to the deficit approach rather than that of positive psychology.

Is there a need for a wellbeing intervention for FE students in Wales?

In terms of the age group for the suggested intervention it is interesting to note that both FE and adolescence have been under-researched areas in this field.

However, adolescents are the ideal participants for the programme due to being: in a vulnerable period of development; at greater risk of mental health problems; at an age where wellbeing decreases. FE appears to be the ideal sector to develop a skill based wellbeing intervention. Surprisingly there is a lack of research in the sector despite the evidence that students receive more personalised support. In Wales, where the research is taking place, there is currently no Healthy FE Programme so there is a gap in provision, despite FE Institutions being judged by ESTYN on the level of wellbeing of their learners (ESTYN, 2009).

What needs to be included in a successful wellbeing intervention?

When developing the content of the intervention, a number of key frameworks were considered to ensure the efficiency of the intervention. Human Givens Theory (Griffen and Tyrell, 2003) focuses on the personal needs that require attention if an individual's wellbeing is to be enhanced. The theory has been closely linked to CBT and has already been used effectively with adolescents.

Noble and McGrath's PEP framework (2008) and subsequent research on protective personal factors that contribute to wellbeing (2012) has given specific content guidance for the future intervention developed for this thesis. Their research has

also suggested that successful educational interventions should be delivered over a sustained length of time to the whole institution, by teachers.

Finally, Abraham and Michie's taxonomy of behaviour change techniques (2008) allows for the future intervention to be underpinned by existing behaviour change theory. By applying the taxonomy to the intervention it allowed for more effective description of the programme which will lead to possible evaluation. This also enabled the developed intervention to be compared to existing or future programmes. The taxonomy has been recommended for use in educational settings (van Stralen *et al.*, 2011) and has already been applied to adolescent interventions.

Chapter Four – Focus Group Research

4.1 Introduction

Chapter Three has already introduced the idea of involving Further Education (FE) students in the exploration around the specific challenges they face and the resources they require to tackle these challenges. Consequently, this chapter will outline the exploratory part of the study which used a focus group format to identify FE students' perception of wellbeing. This reflected the need for research to capture the voice of young people by undertaking discussions about what wellbeing means to them (Rees *et al.*, 2010; Rees, Goswami and Bradshaw, 2010; Ben-Arieh and Gross-Manos, 2009; Hanafin *et al.*, 2007; Fattore, Mason and Watson, 2006). This need stems from a concern that too many existing wellbeing measures were a reflection of what adults viewed as childhood, rather than what young people actually experienced (Fattore, Mason and Watson, 2007). From a Welsh perspective this was recognised as a gap in the first edition of the Children and Young People's Wellbeing Monitor for Wales (WAG, 2008a) but something which was extremely important in developing our knowledge of wellbeing.

4.1.1 Subjective Wellbeing

Diener, Lucas, and Oishi (2002) define subjective wellbeing as 'a person's cognitive and affective evaluations of his or her life' (p.63). This subjective viewpoint is reminiscent of the revolutionary statement about patient's experience of pain by Margo McCaffrey (1968). Her definition; 'Pain is what the person says it is and exists whenever he or she says it does' (McCaffery and Beebe 1989, p. 7) could very easily be applied to wellbeing. Therefore, the aim of undertaking the focus groups was to understand the wellbeing experience of FE students, the meanings they attach to the experience and the essence of wellbeing as they experience it

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

(Spradley, 1979). This part of the research follows the data and analysis process recommended by Polkinghorne (1989):(a) group interviews that allow participants to share their experiences; (b) transcription of the data; (c) location of relevant statements in the transcript that articulate units of meaning; (d) identifying the meanings within the statements; (e) transforming the meanings into common themes and (f) amalgamating the themes across the focus groups to create a general description of what wellbeing is like for FE students.

4.1.2 Developing a wellbeing measure

Another and main purpose of the focus groups, however, was to aid the development of an appropriate wellbeing measure for this age group. This part of the research also responded to a recommendation from Frallion (2005):

An operational measurement model of student well-being will consist of an overarching definition of student well-being that is manifest in a set of interrelated but discrete dimensions (p.6).

The idea for the need for dimensions or indicators within wellbeing research has been specified by a number of researchers (Thompson and Akhed, 2009; Michaelson *et al.*, 2009; Rees *et al.*, 2008; Frazer, 2008; Diener, 2006, Fraillon, 2005; Pollard and Lee, 2003). However, Rees *et al.* (2008) noted that this was a challenge of devising wellbeing measures. Therefore, the structure of the sessions allowed the students to explore a variety of explanations of wellbeing as well as considering what aspects of their daily lives had an impact on their own personal wellbeing. This facilitated the development of a relevant questionnaire that was focused on the activities and experiences of students at their current time rather than retrospectively (Boli-Bennett and Meyer, 1978; Meyer, 1987).

4.1.3 Why use focus groups?

Focus groups seemed the most appropriate method to help facilitate the creation of a clear picture of how life is experienced by young people in FE (Ben-Arieh, 2000). Ben-Arieh (2006) stated that this approach was relatively new and not easily adopted by researchers. Indeed, this was an issue that had been raised by Qvortrup as far back as 1990. He drew attention to the fact that children were not considered as individual entities in national social statistics. He purported that if we were aiming to improve their life conditions we must first allow them a voice alongside others reporting on their opinions. This attitude may also be partly due to quite an outdated view of the use of focus groups with young people. Krueger and Casey (2000) warn researchers that focus groups with young people will be different from those with adults. They claim that this is because young people may not believe that researchers want both positive and negative opinions. However, this seems to reflect the authors' lack of knowledge of the education system at the turn of the millennium, which had already started to encourage the rights of the child to voice their opinion (Bloomer and Hodgkinson, 1997; Brooker and Macdonald, 1999; Levin, 2000 and Thornton and Chapman, 2000).

Student voice is now high on the education agenda in the UK. In 2000 the Welsh Assembly Government (WAG) made it clear that they wanted to hear the voices of children and young people, to listen to their views, and to ensure that services respond to their needs and their aspirations (WAG, 2000, p.3). This was reinforced in 2005 when WAG held a competition asking young people to sum up the meaning of participation and the winning entry stated that:

participation means that it is my right to be involved in making decisions, planning and reviewing an action that might affect me. Having a voice, having a choice’ (Children in Wales, 2010).

The focus groups undertaken for this research reflected this feeling.

4.2 Materials and Sample

In preparation for the focus groups a facilitator schedule (see appendix H) was written to ensure consistency across the groups. The session was planned in a sequenced manner; moving from the general to the specific. The aim was to recruit six students for each focus group as previous research has suggested that this number allows for each participant to feel that they can voice their opinions, enables the identification of separate voices when undertaking transcription and allows transcription to be manageable (Barbour, 2007; Litosseliti, 2003; Krueger and Casey, 2000; Barbour and Kitzinger, 1999).

4.3 Ethics

Before embarking on the research it was crucial to consider any potential discomfort or inconvenience to the participants. The focus groups were judged to produce minimal discomfort for the students. The materials were designed with the pastoral session in mind and followed the code of conduct of the college. Some sessions may have touched on sensitive issues regarding wellbeing. However, as the member of staff at the college who had responsibility for pastoral provision, this was my area of responsibility and I had the resources of the college available to me in the event of any student becoming upset. There was no inconvenience to the students involved as the research was undertaken during timetabled lessons.

In order to deal with any potential risks each participant was provided with a full description of the nature of the study, and any predicted risks before the focus

group began. Students all had easy access to talk to me if they experienced any discomfort from the focus group. Once collected, data were stored in a secure location, identifiable by a coding reference which could only be accessed by the principal researcher.

Further ethical considerations were included in the signed declaration form (see Appendix I). This included the participants' 'right to withdraw' from the study at any time, without penalty, and an outline of any 'potential risk' the study may foresee. There was an assurance of 'data protection' and 'anonymity'. All participants were informed that their participation would remain confidential and all the data anonymised throughout, and after the study. Confidentiality was assured by students receiving a reference code that was used on all research material. Only the researcher had access to the names of participants.

4.4 Procedure

The research was undertaken in a small but comfortable room at the students' college. This was chosen because Lecuyer (1975) found that group interaction on a task was more intense in a small room than a large room. The participants sat in a circle as research on spatial arrangements suggests that a circle enables discussion and reduces the tendency for dominant speakers and the emergence of sub-groups (Stewart, Shamdasani and Rook, 2007). In order to ensure depth and range of discussion (Litosselitit, 2003) four focus groups were arranged. All four focus groups were undertaken on 7th July 2011. Consent had been given by the college to undertake the focus groups as part of the pastoral programme. There was no inconvenience to students as the research was undertaken during timetabled lessons. Ethical clearance had been gained and students were asked by their

pastoral tutors to volunteer to take part in the research. In total 25 further education students attended (Group A, six participants, Group B, six participants, Group C eight participants and Group D five participants). The sessions lasted an average of 30 minutes. There was a range of students from A Level and Vocational areas with a mix of males and females. All students were from the Lower Sixth (L6) whose ages ranged from 16-18.

In preparation for the focus groups a facilitator schedule (see appendix H) was written to ensure consistency across the groups. The session was planned in a sequenced manner; moving from the general to the specific. The session started with a briefing to allow the participants to be fully informed of the purpose of the research before signing a consent form (see appendix I). Participants then undertook a post-it note activity, exploring their perceptions of wellbeing, which led to the participants placing them in categories. The proposed model of wellbeing (Dodge *et al.*, 2012) was then introduced to the participants. This facilitated a discussion on their opinions of the challenges faced by their age group. Participants were also asked to identify what resources FE students had to deal with these challenges. All focus group discussions were audio-recorded and transcribed verbatim. They were then analysed using a thematic analysis which Braun and Clarke (2006) describe as 'a method for identifying, analysing, and reporting patterns (themes) within data' (p.79) The thematic analysis of the focus groups was driven by the theoretical model of wellbeing proposed in Chapter Two. Therefore, the structure of the focus groups explored the perceived challenges that the students faced and the resources they employed to face those challenges. The structure of the sessions aided the thematic analysis which aimed to establish a list

of challenges identified across the focus groups alongside a consideration of what current resources the students had. A semantic approach was undertaken where themes were identified by only exploring the explicit meanings of the data. Consequently, the research did not consider anything beyond what a participant said. The method of thematic analysis followed the six phases suggested by Braun and Clarke (2006):

Table 4.1 Phases of Thematic Analysis

Phase	Description of the process
1. Familiarizing yourself with your data:	Transcribing data (if necessary), reading and re-reading the data, noting down initial ideas.
2. Generating initial codes:	Coding interesting features of the data in a systematic fashion across the entire data set, collating data relevant to each code.
3. Searching for themes:	Collating codes into potential themes, gathering all data relevant to each potential theme.
4. Reviewing themes:	Checking if the themes work in relation to the coded extracts (Level 1) and the entire data set (Level 2), generating a thematic 'map' of the analysis.
5. Defining and naming themes:	Ongoing analysis to refine the specifics of each theme, and the overall story the analysis tells, generating clear definitions and names for each theme.
6. Producing the report:	The final opportunity for analysis. Selection of vivid, compelling extract examples, final analysis of selected extracts, relating back of the analysis to the research question and literature, producing a scholarly report of the analysis.

(p.87)

During phase one of the analyses the researcher aimed to become immersed in the data. The process of transcribing each of the focus groups into a rigorous and thorough verbatim account was an excellent way to become more familiar with the data (Riessman, 1993) as the data had to be listened to (and read) on a number of occasions. Phase two enabled the researcher to start to look for initial codes. The data were placed into initial meaningful groups (see Appendix J for an example). Initial coding was undertaken by using different colour highlighters with each of the transcripts to see if there were common trends across each of the focus groups. This naturally led to a searching for themes (phase 3). This enabled the analysis to be refocused by considering if any codes could be combined and looking for relationships between codes. This also allowed for consideration of whether any

codes did not belong within the analysis. The reviewing of themes (phase 4) was undertaken by looking closely at the coded data extracts across all four groups. Before deciding on a theme the researcher looked for a coherent pattern emerging out of the coded extracts. This enabled the consideration of the validity of each of the themes in relation to the data set as a whole. Once the themes were established it was important to consider appropriate names for the themes in a way that identified the essence of what each theme was about (phase 5). The following results aim to tell the story of the focus groups as a 'concise, coherent, logical, non-repetitive and interesting account' (Braun and Clarke, 2006, p.93).

4.5 Results

The results of the post-it note activity demonstrated that wellbeing, from a FE student perspective, is definitely multidimensional. Across the four groups seven common themes emerged: happiness; health and fitness; positive relationships; feeling content with yourself; living the life you want; safety and wealth, in descending order (see Appendix J for raw data). The discussion based on the Dodge *et al.* model (2012) revealed an emerging consensus from the students that wellbeing is multi-dimensional. This supported previous research into childhood wellbeing (Andrews *et al.*, 2002; Gabhainn and Sixsmith, 2005; Newton, Ponting and Breen, 2011; Rees *et al.*, 2010; Stratham and Chase, 2010). The results of the focus groups suggested that the key challenges for further education students are: future employment/higher education (highlighted by all four focus groups); exams/college assignments; friends/social relationships (both highlighted by 3 focus groups); other issues relating to college; confidence; family and relatives; healthy

lifestyle; finances (all highlighted by two focus groups) and personal safety (highlighted by one focus group).

Throughout this chapter the discussion will be put in context by including direct quotations from the focus group participants. This reflects the findings of Corden and Sainsbury (2006) who found that readers of research reports felt that quotations made the report more interesting to read and encouraged confidence in the findings. They also stated that quotations helped to demonstrate how the topic was valuable to real people and ‘added depth, richness and flavour’ (p.15).

However, the identity of the students has been protected by the use of pseudonyms. The pseudonyms were chosen to reflect common names of students found in Further Education.

4.5.1 Future employment/higher education

Each of the focus groups spoke of the challenge of getting a job and/or a university place. Their concerns were based around the fact that jobs were hard to get (*‘It’s impossible to get a job at the moment’ - Joshua, ‘I haven’t had experience in a job before so that holds you back’ - Amie*) and the feeling that everything was happening too fast (*‘It just feels like it’s all come around too quickly’, ‘We’re being rushed a bit to have to decide’, ‘Over the summer we have to looking into universities that we want, but I feel like we ... I don’t know ... everyone knows, you start from high school you know you’re going to university, so it started there, but it seems like it’s gone so fast and it’s a realistic like coming.’ - Jake; ‘you don’t know what the future holds. You can’t like control it’, ‘They kind of assume that you already know what you’re doing when you don’t’ - Katherine, ‘... it doesn’t feel that we’ve got enough time to plan for it ...’ - Joe*).

Research demonstrates that this feeling was not unique to the focus groups. NUS Scotland (2010) found that 75% of students reported that thinking and planning about their future was either reasonably or very stressful. The worry about finding a job was backed up by research undertaken by ResearchBods (O2, 2011) who conducted an online survey amongst a nationally representative sample of 1,500 16–24 year olds. The survey found that 49% of respondents were confident that they would have a secure job in the next five years. This is echoed by WG (2011) who found that while young people could identify preferred occupations older children were uncertain about whether they would be able to attain a job in their chosen area because of the economic crisis and competition for jobs. It would seem that this challenge is a reality for this age group with UK youth unemployment figures jumping from 14% in December 2007 to 22% in March 2012 (OECD calculations based on the Short-term Indicators from Eurostat and various national sources. Cut-off date: 2 May 2012). Indeed, Sedghi (2012) states that this is ‘more than double the unemployment rate affecting the general population.’

In terms of the resources, the students highlighted that they searched for information to help them cope with this challenge. This was through a number of different means: using the internet to undertake research; going to the job centre or looking at job bulletin boards in the college. One student also talked about the support that she had received from the careers advisor which ‘*definitely helped*’ (Amie, Focus group, C). However, the students felt that the college could provide them with extra strategies through introducing them to CV writing and interview skills.

4.5.2 Exams/college assignments

It may come as no surprise that three of the focus groups raised exams/college assignments as one of the main challenges they face at their age. Jane stated:

‘we’re under a lot of pressure because you need to do well in your exams to do well in your life’. This was echoed by Joshua who stated that studying for his AS exams was *‘the most stressed I’ve been in in my life’.*

NUS Scotland (2010) found examinations to be the biggest concern for students in their survey into student mental wellbeing. 90% of students reported that examinations caused them more stress than expected with less than 2% reporting that examinations did not cause them stress at all. This was echoed in 2010/11 by the number of calls made to Young Minds, the UK’s leading charity committed to improving the emotional wellbeing and mental health of children and young people. Over the year they received 6332 calls to their helpline, 884 calls were from 16-17 year olds and, of those, 39% were about school problems including exam stress (The Telegraph, 25th August 2011).

From a Welsh perspective ‘The Voices of Children and Young People in Wales’ study (Welsh Assembly Government Social Research, 2010) stated that the necessity of succeeding in education was one of two key challenges for young people. The young people in this research highlighted that they were under enormous pressure to do well. This seemed to be affected by the current economic climate as the perception from young people was that even good grades would not necessarily secure employment (WG, 2011). This was reiterated by Newton, Ponting and Breen (2011) who noted that 16-19 year olds were experiencing a particularly stressful

and emotional time 'and that specific support was required to provide more targeted intervention' (p.46).

This area of challenge highlighted a number of different resources and strategies that the students used in order to manage. The support of friends and family featured quite heavily in focus group A. The students in this group felt that this support from others was valuable as working with friends was seen as a valuable strategy which preparing for exams, and friends and family seemed to be on hand to give advice. One student also highlighted that a useful personal resource in facing this challenge was '*determination and motivation*' (Jane, Focus Group A). She felt that this skill was gained by seeing others who have not done so well which makes '*you realise you don't want to be like them. So you work harder to try and avoid it.*' The majority of the resources that the students discussed, however, could be seen as strategies and techniques that they felt the college could help them to learn; revision techniques; revision timetables and improved time management.

4.5.3 Friends/social relationships

The third challenge to emerge from the focus groups was '*friendship and stuff like that. We still worry about the social side of friends*' (Stephanie). The students talked about how challenging it can be to make '*friends with people you hardly know*' (Stephanie), how students '*might find it harder to learn as part of the class without all their friends in the classes. So they might not really take interest, or find it harder perhaps*' (Joe) and the '*pressure amongst friends. Like if someone else has done it you want to try it*' (Mitch).

As far back as 1987 Argyle highlighted the importance of friendship on levels of happiness in adolescents. Indeed, he found that friendship was a predictor of

happiness which was later backed up by research undertaken by Cheng and Furnham (2002). Hendry and Reid (2000) highlighted how problems with friends can have a great impact on the self-confidence and emotional wellbeing of adolescents, especially young women. Unicef (2007a) also stated that young people saw the ability to create and maintain good friendships as a crucial element of their development.

In three substantial surveys investigating young people's views of wellbeing (Rees *et al.*, 2010; Welsh Assembly Government Social Research, 2010 and Newton, Ponting and Breen, 2011), friendship has come out as a key factor. Friends came out as the second of ten key topics in Rees, Goswami and Bradshaw (2010) and the highest ranked item in Newton, Ponting and Breen's research (2011). The importance of friendship to young people was also made very clear by the results of the Welsh Assembly Government Social Research (2010):

Young people and children, irrespective of age, perceived relationships with others as one of the most important aspects of their wellbeing. For the most part, relationships were prioritised by children and young people over material possessions. Younger children focused primarily on the importance in their lives of their parents/guardians, while older children looked to their relationships with their peers, teachers and other significant others, as well as their families (quoted in WG 2011 p.34).

Although friends were raised as a challenge area, it is also interesting to highlight that they were also viewed as a resource throughout the focus groups. The students highlighted that their friends helped them cope with relationships, peer pressure and exams, alongside teaching them about determination and motivation.

4.5.4 Other issues relating to college

Aside from examinations and assignments the focus groups highlighted that attending college itself was sometimes a challenge experienced by their age group.

This challenge covered ‘starting college’ (Carys), getting used to ‘intimidating’ spaces like the canteen (Lily) and pressure from teachers:

‘In a way they, in how they teach, they put more pressure on you... They build up the pressure that you have to do well’ (Jane).

Wellbeing research backs up what the students felt. Although WG (2011) states that most children and young people enjoy school Rees, Goswami and Bradshaw (2010a) highlighted school, education and learning as one of the key areas highlighted by over 8,000 young people that can affect their wellbeing both positively and negatively. Konu *et al.* (2002), using data from over 80, 000 children in Finland, also found that educational environment accounts for 17% of general subjective wellbeing for boys and 20% for girls.

4.5.5 Confidence

Confidence was mentioned as a challenge in three of the focus groups. When asked if they thought it was quite a common challenge amongst people of their age one focus group strongly agreed. A participant from another focus group indicated that it was more of a challenge because it is ‘something you need to do yourself’ (Dylan).

Research highlights that confidence and high self-esteem has been reported to be one of the strongest predictors of psychological wellbeing (Rosenberg, 1965; Campbell, 1981; Diener, 1984; Cheng and Furnham ,2002). The UK government placed confidence as part of the foundations of ‘Every Child Matters’ (HMSO, 2003) stating that they aimed to increase young people’s skills alongside confidence and self-esteem. This is something that was then taken on board by the Scottish government who implemented their ‘Curriculum for Excellence’ in 2010. This places confidence at the core of the health and wellbeing of students. The Scottish government believes that:

learning through health and wellbeing promotes confidence, independent thinking and positive attitudes and dispositions (p.8).

The centrality of confidence was even highlighted in the light of the London riots of 2011. The Riots Communities and Victims Panel (2012) was set up to investigate the causes of the riots. Its remit was also to consider what more could be done to build social and economic resilience in communities. One of the issues that came out of the community's concerns was low self-esteem. The report discusses how schools and colleges have a responsibility to develop self-esteem and confidence. They make a bold recommendation that 'a new requirement should be made of schools to publish their policies for building the character of their pupils, by September 2013' (p.53).

The focus groups discussed a number of strategies that they employed to increase their level of confidence. Focus group A suggested that joining in with extra-curricular activities enabled people to meet a wider group of peers, which in turn helped them to gain more confidence. Sarah, also highlighted the need '*to have good role models, not to look at celebrities too much*' (Focus Group A) in order for you to gain more confidence. The same students also highlighted that confidence comes from a personal strategy of '*feeling content with yourself*'.

4.5.6 Family and Relatives

The focus groups highlighted the support the students felt they had from their families and relatives (*'I mean, with me, I have my family as a back-up'* - Melanie) which stressed that the challenge would occur if that support was absent. In actual fact, this did not come as a big surprise as Huebner's Multidimensional Student Life Satisfaction Scale (Huebner, 1994), a widely used wellbeing measure, features family as one of five key elements and Rees, Goswami and Bradshaw (2010)

identified family as the first of its ten key areas that affect young people's wellbeing.

This potential challenge also reflects the findings of McLaren (2002) who indicated that parental support has a lasting impact the wellbeing of adolescents. Indeed, the Department for Children, Schools and Families (2007) stated quite strongly that:

Families are a key factor in the development of social and emotional skills in children and it's known that children with better social skills experience enhanced outcomes, including improved educational and employment outcomes, more positive peer relationships, and better mental and physical health (p.16)..5.7
Healthy lifestyle

The challenge of living a healthy lifestyle dominated the discussions of two of the focus groups. This again reflects the findings of Rees, Goswami and Bradshaw (2010) whose survey placed health tenth, and Newton, Ponting and Breen's (2011) research where health was listed as the seventh most frequently cited item. This is a vital area for this research to consider, especially as 'enjoying the best possible health' is one of the seven core aims of the Children and Young People's Wellbeing Monitor for Wales (2008 p.21, 2011 p.21).

In the focus group research, the issue was split between three aspects of health: activity, diet and substance use and abuse. The challenge of activity seemed extremely relevant to this age group as one focus group explained:

Melanie 'We don't have to do anything compulsory do we?

Helen Yeah like PE, even though you didn't want to do it, you'd do something.

Whereas now you have to pay for it, like gyms and stuff, but then ...

Dawn You end up not doing it. I definitely don't exercise anymore.'

(Focus Group C)

This was also echoed in Focus Group D:

‘Maybe, it’s the fact, that when we were in high school it was compulsory. But here nobody is telling you ‘go there’ and stuff even though the gym is free and stuff’ (Katherine).

A number of participants mentioned the challenge of sticking to a healthy diet and the lack of healthy options at college. For example, one student stated;

‘It’s just like with the café and that, with all the muffins and the cookies, there’s so much temptation’ (Rebecca).

This was echoed in Focus Group C:

‘There’s not many healthy choices’ (Chloe).

Smoking and drinking also featured in the discussion. Students spoke of *‘binge drinking’* (Stephanie) and the fact that *‘smoking’s pretty bad. We have so many frees and like people just go outside and smoke’* (Melanie).

A lot of the discussion around healthy lifestyle was focused around the feeling of stress. In all four focus groups the students discussed different resources and strategies they used to deal with this challenge. Some of them said that exercise helped them to cope as it helps you *‘try to clear your head’* (Jane, Focus Group A). Others talked about the benefits they received from listening to music (Sarah, Focus Group A), playing computer games (Sean, Focus Group A) and getting enough sleep (Carys, Focus Group C). Dylan, from Focus Group B, also spoke about how useful he had found talking through his stressful times with his tutor.

4.5.8 Finance

Money has featured heavily in previous research on the wellbeing of adolescents.

Rees, Goswami and Bradshaw (2010) placed it eighth in its categories relating to

young people's wellbeing and Newton, Ponting and Breen (2011) saw money ranked as the fourth most frequently cited item in their research.

NUS Scotland (2010) also found that almost 70% of the students surveyed reported financial stress as an issue for them. This was reflected in the comments made in each of the focus groups. One participant stated her frustration at working hard for small financial gains (*'I have to work 8/9 hours to get the same amount of money that people on the EMA [Educational Maintenance allowance] get, so I get really annoyed about that'* -Jane) but most of the worries were concerned with their futures:

'The inflation is pretty high at the moment and when you get older it will be twice as high... I won't have enough money for buying a house' - Sarah

'Well that you are just going to spend money on stuff you need but you won't be able to pay it back because you haven't got a job and you just can't pay it back.'
- Rachel

'We don't know how to go about getting student loans and things like that. What the repayments are.' - Joshua

'It will take ages to pay back.' - Lily

'Yeah, because student loans and going to college. I mean I don't want to go but even the thought of it scares me. People spending the prices to go into Uni and I can't think of that.' - Rebecca

The feeling stated by students has been reflected in evidence published by the Sutton Trust (IPOS 2012). Their survey of 2,750 11-16 year olds revealed that fear of debt and cost concerns could be deterring significant numbers of young people from going to university, or choosing the most appropriate place to study.

In terms of resources the students from the focus groups stated that gaining more information made them feel more able to cope with the challenge of finances.

Some students also highlighted how their family had been a useful resource by giving them '*advice on spending your money wisely*' (Jane, Focus Group A).

4.5.9 Personal safety

Safety was a theme that had emerged from the start of the focus group discussions on what wellbeing meant to the students. One participant stated that a challenge to his life was '*not being stabbed in town*' (Mitch), although another student was quite philosophical in his views: '*At the end of the day if I get stabbed I get stabbed*' (Daniel).

This challenge echoes the findings of McClaren (2002) who discussed the importance of safety factors on young people's wellbeing and Rees, Goswami and Bradshaw (2010) who found a key cross-cutting theme related to safety and to a sense of freedom or autonomy. They reported that sometimes these two aspects were in tension with one another.

From a Welsh perspective 'freedom from abuse and victimisation' and having 'a safe home and community' are two of the Seven Core Aims of the Children and Young People's Wellbeing Monitor (WAG, 2008, WG, 2011). The Welsh Assembly Government Social Research project (2010) reinforces this as an area of importance to young people. They found that, irrespective of age, feeling safe and secure was important for all children and young people.

From a resource perspective the students who saw this area as a challenge appeared to rely on their personal resources. Some of these were physical such as Mitch (Focus Group B) suggesting that he would use his fists, whereas Josh endeavoured to use quite a different approach by trying '*to bamboozle them with words*' (Focus Group B).

4.5.10 Evaluation of the model

Each focus group ended with a discussion on the proposed model of wellbeing

(Dodge *et al*, 2012). Overall the model received positive responses by the participants (although it is accepted that demand characteristics may have had an influence on the results as the researcher was also a teacher at the college). Their feedback covered four elements of the model:

- the use of challenges and resources:

'I agree with that. If you don't have any challenges in life and everything is given to you, you don't work for anything or you don't see how to do stuff yourself. So you fall back into relying on everybody else.' – Jane

'Yeah I think it could work because most of the things we've looked at, like mental health and things, fit under either one of the challenges or resources, which makes it easier to explain.' – Mitch

'I think it's right ... I think you use your resources to meet the challenges. Because if you've got the resources to do everything and you just don't then you might not have a lot of confidence then you can't actually meet the challenges anyway.'
– Daniel

- equilibrium as depicted by the see-saw:

'I think it's really good. It shows you need balance and it shows that if you are tipping towards the challenges side you can make yourself feel better by confidence and something.' – Hannah

'... I think it's really good and in certain situations you find yourself in different areas on the see-saw.' – Rachel

'I think it works, because if it's balance you've got good wellbeing. Like people our age, like confidence, they only use resources when it's easy or they remember.' – Dylan

'I think it is about weighing it up. You are definitely balancing the resources that you have with what you're faced with. I agree with it.' – Joe

'Yeah I definitely agree. The fact that you use the see-saw, it's like really good as well. Because the fact that people move, especially like us as teenagers. You see that one day we're happy and then another day we're not.' – Katherine

- the simplicity

‘It’s simple. You can look at it and it makes sense.’ - Dawn

- its positive nature

‘I also agree with it. I think it will also help you look into a bit more so you can figure out what could help.’ - Rebecca

It is pleasing that these comments reflect a number of the strengths of the model proposed by Dodge *et al.* (2012): simplicity, optimism and a basis for measurement.

4.6 Reflective considerations

At the time of the student focus groups it is essential to reflect the fact that the researcher was working within the institution as a teacher and pastoral manager. Finlay and Gough (2003) emphasise the need for researchers to undertake ‘self-aware analysis of the intersubjective dynamics between researcher and the researched’ taking into account the ways in which the researcher’s ‘social background, assumptions, positioning and behaviour impact on the research process’ (p.ix). Roulsten and Shelton (2015) highlighted that there are numerous forms of bias that can threaten the validity of research which results in the misrepresentation of the phenomena explored:

- Selection bias;
- Experimenter bias;
- Observer bias and
- Confirmation bias

In terms of selection bias even though the students volunteered to attend the sessions the position of the researcher in the institution could well have affected their participation in the research. However, it would be fair to say that the

students who arrived for the focus groups had made a judgement that they were happy to discuss wellbeing with the researcher. However, their motivations for doing so were not explored. They may have had a personal motivation for sharing the information; maybe having expectations that the pastoral manager had some influence on changing things within the college. However, whatever their motivation for attending, the researcher’s position within the institution may also have prevented them from sharing more freely about what challenges they faced in life.

In terms of researcher bias as it is quite possible that the researcher’s presence may well have contaminated the data by affecting the responses or reactions of the students within the focus groups. Students could well have discussed generic challenges rather than feeling able to discuss challenges specific to the institution due to the researcher’s managerial position. The final discussion around critiquing the new definition of wellbeing could be seen as an example of how the way the definition was presented could well have affected their response. As the sessions were structured using a facilitator schedule (see appendix H) rather than a structured interview schedule, the way the questioning of the definition was presented varied slightly across each focus group:

Table 4.2 Introduction to the critique of the definition

Focus group	Extract from transcript
A	‘So, in terms of the theory then, as I haven’t found somebody else who has really defined wellbeing yet, this is what I’m saying it is. I’m open to anything you want to say about this theory because that will help me and I’ll be able to develop it if

	you think there are things I can change.'
B	'Right, you've come up with brilliant ideas and this is your time when you can be completely honest with me. I will not be offended at all. I want to go round each person and they can give me their opinions on my theory. Ok? And whether they think this theory works or whether it doesn't. Whether it needs changing. And I'd be really grateful, and you just don't need to say nice things.'
C	'Now I'd like you to give me some feedback on my theory. If you think it works, if you think it needs anything adding to it. I really won't be offended if you don't like it at all. So if we could go round individually and give me some feedback.'
D	'Ok this is your chance now to say what you think about my theory. I'm really thick skinned so I won't be offended if you think it's a load of rubbish. Because I need to get feedback on it and I'd just like your opinion on whether you think that this is a good way of defining what wellbeing is. Ok, so do you want to start?'

Although each introduction is different it was made clear to each group of students that the definition was personal to the researcher. Despite reassuring each group that they could be honest in their feedback it is unlikely they would have been confident to do this considering the position of the researcher within the college.

Having transcribed the focus groups verbatim it was hoped that this would reduce the impact of any prejudicial perspectives (Gall, Gall and Borg, 2003) the researcher may have had on the observations made. However, there is a chance that confirmation bias may have occurred by selectively collecting and interpreting data in a way to support the definition of wellbeing that was being proposed. After the students had undertaken the post-it note activity considering their view of wellbeing the rest of the focus group session was based on the model:

‘..one of my challenges has been to come up with my own definition of wellbeing because loads of researchers are doing research in this area but they haven’t really said what wellbeing actually is. So I’m going to show you my definition of wellbeing. (Pause) There here is my definition of wellbeing. So, it’s like a see-saw and I believe you’re in the middle and you’re balanced with your wellbeing when the challenges you’re faced with, you have the resources to deal with it. So what I want us to go on to talk about is, because my research is specifically for your age group, what challenges do you think that you face as an age group and what resources you’ve got to deal with them, or what we could be doing as a college to develop your resources. ‘ – transcript from Focus group D

Therefore, the data collected could well be seen as already biased in favour of the model. However, by setting the scene with the definition, it was hoped that the students were able to respond to the framework, rather than be biased by it.

Without a clearly established and accepted definition of wellbeing it was important to clarify the concept of wellbeing with the participants and the new model allowed for a shared understanding of the definition for the purposes of the research.

4.7 Conclusion

The use of focus groups in this research has enabled the discovery of new information; the attainment of different perspectives, views, attitudes, beliefs, responses, motivations and perceptions; and the examination of shared understandings of life alongside the brainstorming and the generation of ideas (Morgan 1988, Morgan and Krueger 1993; Krueger 1994; Race *et al.* 1994; Powell

Enhancing wellbeing – Evaluating an Intervention for Further Education Students and Single 1996; Gibbs 1997). Most essentially, the focus groups have resulted in data that can be used to structure a new measure of wellbeing for Further Education students. The detailed insights from the students have allowed the development of a questionnaire that truly reflects their view of the challenges faced by their age group.

The matrix of different topics that the focus groups produced had been seen as 'one of the challenges for any framework of well-being' (Rees, Goswami and Bradshaw, 2010, p.19). The development of this questionnaire from the focus group has also fulfilled the suggestions from Newton and Ponting's (2011) participants about developing a survey that targeted at various factors/areas of teenage life.

This part of the research has also enabled the research to fulfil a number of the suggested improvements from Stratham and Chase (2010, p.3) in theorising and operationalising childhood wellbeing:

- the research results are 'multi-dimensional';
- the development of the questionnaire has incorporated 'the views and perspectives of children and young people themselves';
- the model created 'focuses on attributes and strengths as well as difficulties and deficiencies';
- the research 'considers the wellbeing of children in the 'here and now' and does not focus exclusively on long-term outcomes';

- the questionnaire incorporates ‘measures of individual physical and emotional/mental wellbeing ...which take account of the context for children and young people’s lives’.

However, the findings should be interpreted with some caution. Although the sample of students came from different courses across the college, we cannot be certain that comments from participants would be representative of all FE students. A cross-sector survey with a large number of FE students would be needed to confirm the findings.

4.8 Summary

- Focus groups were chosen in order to create a clear and current picture of the challenges faced by FE students. This enabled the creation of a questionnaire that reflected the views and opinions of the sample group.
- In order to reflect the model of wellbeing developed by Dodge *et al.*, 2012 (p.230) the students in the focus groups were asked to identify key areas of challenge faced by FE students. The students suggested nine key areas:
 1. future employment/higher education;
 2. exams/college assignments;
 3. friends/social relationships;
 4. other issues relating to college;
 5. confidence;
 6. family and relatives;
 7. healthy lifestyle;
 8. Finances;
 9. Personal safety.

An exploration of previous research undertaken in each of these nine areas and the wealth of evidence suggests that basing a questionnaire for FE students around these factors would be a valid measure of the challenges faced by this age group.

- The focus groups with a discussion of the model of wellbeing developed by Dodge *et al.*, 2012 (p.230). The model was seen to be accepted by the students as being easy to understand due to its simplistic manner as well as it placing wellbeing in a positive light with the students understanding how to gain a sense of balance.
- It is important to consider the possible influence the researcher had upon the data gathered from the focus groups. Student responses alongside a possible bias within the analysis of the data could well have been affected by the managerial position the researcher had within the institution.

Chapter Five – Questionnaire Development

This chapter will discuss the development of the Wellbeing in Further Education Students Survey (WFESS). The questionnaire followed on directly from the proposed definition of wellbeing (Dodge *et al.*, 2012) and incorporated the insight gathered during the focus group research. The overall purpose of the questionnaire was to enable the evaluation of the pastoral intervention designed to enhance the wellbeing of FE students.

The chapter will also include a consideration of the need for measuring wellbeing alongside a discussion of what existing measures were available and why they did not fully meet the needs of the current research. Subsequently, the chapter will move into a discussion of each stage of the development of the measure, highlighting the ethical considerations of the research, lessons learnt at each stage of data gathering and how the questionnaire evolved in response to the feedback gained.

5.1 Introduction

Scott (2012) recommended that a logical enquiry into the measurement of wellbeing should consider how wellbeing is defined, who should be involved in discussions and how wellbeing measures have a role in influencing policy to improve wellbeing. The steps outlined to this point have responded to these recommendations. Chapter Two of this thesis outlined a discussion of the challenge of defining wellbeing and concluded with the proposal of a new definition. This definition has received positive response from the research community and has been cited by a number of researchers (126 to date, Google Scholar 2015) from a variety of research areas. In terms of application the definition has been used

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

directly as a basis for measuring wellbeing in a number of research papers (Spiers ,2015; Wilckens and Hall,2015; Duran *et al.*, 2015; Wosinski *et al.*, 2015; Director of Public Health, 2015; Gibson. 2015; Ray-Sannerud *et al.*, 2015; Castel. *et al.*, 2015; Townshend *et al.*, 2014; Golparvar and Abedini, 2014; Lemma *et al.*, 2014; Yaremtchuk, 2014; Hlatshwayo, 2014; La Placa, and Knight, 2014; Low, 2014; Lyman and Luthar, 2014; Radcliffe, 2013; Bakara *et al.* 2013. See Chapter Two for a discussion about how these studies have applied the definition in their research). These frequent citations suggest the definition may have an intuitive appeal which could well validate the decision taken to use the definition as a basis for a wellbeing measure.

Chapter Three of this thesis outlined the focus group research which engaged the target group in the discussion of defining wellbeing as well as discussing the challenges faced by FE students and the resources they use to combat them. The nine challenge areas identified by the focus groups responded to Frallion's (2005) recommendation that:

An operational measurement model of student well-being will consist of an overarching definition of student well-being that is manifest in a set of interrelated but discrete dimensions (p.6).

As discussed in Chapter Two, the need for dimensions or indicators within wellbeing research has continued to be specified by subsequent researchers (Thompson and Akhed, 2009; Michaelson *et al.*, 2009; Rees *et al.*, 2008; Frazer, 2008; Diener, 2006). Moreover, Rees *et al.* (2008) noted that this need was a clear challenge when devising wellbeing measures. In response to this, the preliminary research, via focus groups, has provided nine clear dimensions of the perceived challenges faced

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

by FE students. This followed the recommendation of Pollard and Lee (2003) to develop a set of positive indicators of wellbeing for young people. They believed that this would in turn lead to the improvement of wellbeing for these individuals. The development of this questionnaire also answers the concern that too many measures were relying on a single measure, often based on happiness and satisfaction (Thompson and Aked, 2009; Diener *et al.*, 2009 and Frazer, 2008)- a reoccurring theme that was discussed at the second International Conference of Wellbeing Policy at Hamilton College in New York (2014).

Thompson and Marcs (2008) have also argued that wellbeing measures should be developed for discrete groups. Consequently, an important feature of the development of the questionnaire was that it specifically focused on FE students. Chapter three emphasised the need to capture the voice of young people within wellbeing research. This echoes the three strands discussed by Rees *et al.* (2008) that have emerged over the past decade when considering the development of wellbeing measures for children and young people:

1. A focus on using available indicators, specific to this age group (such as child poverty rates);
2. A growing interest in the subjective and psychological wellbeing of children
3. A move towards incorporating the views of children and young people themselves.

The last strand was seen as a great step forward after Qvortrup (1990) had argued that children had often gone unnoticed in national social statistics. However, it is worrying that as recently as 2007, Fattore *et al.* stated that children's experiences

and the intricacies of their lives had not been taken into account in the development of wellbeing measures. Even in 2012 Watson *et al.* expressed concern that measures were not capturing the voice of the child. Therefore, any advancement in the measurement of wellbeing in FE students would need to ensure that it is based on the views of the target population rather than the view of adults who ‘often struggle to reflect children’s views accurately’ (Axford, 2008, p.71). It is noteworthy that researchers believe that asking students directly about what impacts on their wellbeing can lead to new and pertinent findings in the field (Thompson and Aked, 2009; Layard and Dunn, 2009). Therefore, the focus group work, prior to the development of the questionnaire, has addressed the criticism of these researchers.

One aspect that requires further discussion, however, is the term ‘child’. The Oxford English Dictionary (2010) defines ‘child’ as ‘a young human being below the age of puberty or below the legal age of majority’. This covers an extremely wide age range and highlights a concern raised by Fraillon (2005) and Rees *et al.* (2012) that there is a need to develop an understanding of key dimensions of wellbeing at different ages. Therefore, the fact that the wellbeing measure for FE students has been based on the focus group research, with the same age group, meant that there was a greater chance that the results would be both representative and meaningful to this age group.

5.2 Ethical Issues

Chapter One outlined some of the main ethical issues relevant to the current research. However, when developing the measure within an educational setting there were a number of ethical issues that needed to be considered. Firstly, this

research was conducted within the college's professional conduct framework and the questionnaire design was Phase 2 of the research undertaken in the college. The development of the measure took place within professional practice, with the researcher being a member of staff at the college who had responsibility for pastoral provision. The research was discussed fully with the management of the college and they gave overall consent for the research. All students involved in the research were 16 or older. This allowed the students to give informed consent.

The measure was undertaken during pastoral sessions that were a timetabled part of the students' provision at the college. Wellbeing was already a theme of the existing pastoral provision so this was not a departure from the norm. The students were given a briefing which explained the process in which they were undertaking, why their participation was necessary, how the research would be used and how and to whom it would be reported. All of these processes reflected the ethical guidelines for educational research set out by the British Educational Research Association (BERA 2011).

Students were asked to undertake the survey at the start of a pastoral session. Each student sat at an individual computer and was not monitored individually by the tutor present in the room. Consequently, participation was encouraged but not enforced, thus giving them the right to withdraw. Students were able to opt out by not completing the survey and there was no negative consequence of making this choice. The questionnaire was prefaced by information about the study and the topic of the questionnaire and completing the questionnaire was taken as consent. Anonymity was assured because students used their student number rather than their names on the survey.

5.3 Measuring wellbeing

Although there has been some concern about measuring wellbeing (Watson *et al.*, 2012) there is a growing consensus that the question is not *whether* to measure wellbeing but *how* (Steuer and Marks, 2008; Waldron, 2010). However, as discussed in Chapter Two, the issue of how wellbeing should be defined has led to unresolved issues of how it should be measured (Dodge *et al.*, 2012; Smith *et al.*, 2001; Diener *et al.*, 2003). Consequently, Diener and Seligman (2004) showed concern that the measurements of wellbeing of the time were often disorganised and called for a more systematic approach to measurement. This echoes the thoughts of others that there is a lack of consensus about appropriate measuring techniques (Fraillon, 2005; Lent, 2004; Pollard and Lee, 2003). Therefore, any new measure of wellbeing need to be methodical in development and grounded in theory (Buckingham and Saunders, 2004; Gasper, 2004).

This chapter will demonstrate how the development of this questionnaire has followed the guidelines for new wellbeing measures set out by Diener (2006):

- By including the nine challenging life areas the questionnaire allows separate elements of subjective well-being to be assessed by participants;
- Due to the repeated nature of the questionnaire, as well as the fluid nature of the definition of wellbeing it is based on, it will be sensitive to changes in subjective well-being;
- The need to assess validity has been addressed as part of the development of the questionnaire to ensure that the measure is robust in its nature;
- Whilst developing the measure steps have been taken to correct any inherent biases with a number of amendments being applied;

- Part of the motivation of the measure has been to provide useful knowledge that can inform the creation of better policies for students in FE.

5.4 Published Measures of Wellbeing

Before developing the new measure, it was necessary to review what existing measures of wellbeing were available for students given that Diener and Seligman (2004) felt that although many measures of wellbeing were available much better measures were needed. Chapter One outlined the prevalence of interest in wellbeing through policy but the measurement of the population's wellbeing really started soon after World War II when Gallup *et al.*, and Cantril (1965) led the way in using large-scale surveys as an assessment technique (see Diener, Lucas and Oishi 2002). However, one of the first key developments was the creation of the Multi-National Project for Monitoring and Measuring Child Well-Being in 1996 (Ben-Arieh, 2000). The project involved researchers from 28 countries and aimed to improve how the status of children was measured and monitored across the world. They developed a set of around 60 indicators under five overarching domains that they felt covered the nature of child wellbeing:

- Safety and Physical status;
- Personal life;
- Civic life;
- Children's economic resources and contribution;
- Children's activities.

Land *et al.* (2001) also wanted to monitor child wellbeing trends over time by establishing the Child and Youth Well-being Index in the United States. The 28

indicators of this measure were placed under seven domains, each of them a social indicator of child wellbeing:

- family economic well-being;
- health;
- safety/behaviour;
- educational attainment;
- community connectedness;
- social relationships;
- emotional/spiritual well-being.

This has led to an update report of the findings being produced annually.

In the UK, it has already been established that wellbeing also became a key focus of government policy. In England the Every Child Matters framework (HMSO, 2003) included a set of national indicators, in Scotland, *Getting it right for every child* (Scottish Government, 2008) focused on eight wellbeing indicators, the Republic of Ireland government developed a National Set of Child Well-Being Indicators, which included a consultation exercise with children and young people (Hanafin and Brooks, 2005), and the Welsh Assembly Government published the first Well-Being Monitor for Wales in 2008 (see Chapter One for further discussion). However, all these documents are indicator based, intent on collecting objective wellbeing, rather than providing a measure that can be used directly with young people to measure their own subjective wellbeing. Fortunately, a number of surveys (too many to discuss fully in this chapter) have been developed over the last decade to

measure young people's wellbeing. The most prevalent assessments are outlined below.

One of the most widely used surveys is the Huebner's Multi-Dimensional Student Life Satisfaction Scale (Huebner, 1994) which measures well-being in five domains – family, friends, school, living environment and self, using a 40-item Likert-type scale. These five domains are totalled to obtain an overall life satisfaction score.

This move away from one question measuring life satisfaction was because Huebner felt that preadolescent students were able to differentiate among specific domains in their lives – hence the multi-dimensional nature of the measure. The measure was developed specifically for this age group because Huebner recognised that very few studies on positive SWB had been undertaken with children or adolescents. Although the move to develop a measure specifically for young people reflects the aim of the current research, unfortunately the age range does not extend to FE students. Also, as discussed in Chapter Two, a problem with focusing purely on life satisfaction is that it is a dimension of wellbeing, rather than a full measure of wellbeing itself. Consequently, it goes against what the proposed definition is trying to achieve; a fuller understanding of an individual's wellbeing.

In the UK, there have been a number of more recent attempts to measure the wellbeing of our youth. In 2005, The Children's Society included two key questions on well-being in a national survey of 14 to 16 year olds in England. These questions asked 8,000 young people to indicate what they think makes for, and what prevents, a good life for young people. This led to the society developing the 'Good Childhood Index' (Rees *et al.*, 2008) for 10-15 year olds. The domain-based survey made use of existing measures and scales (including Huebner's Student Life

Satisfaction Scale) and they alleged that it was ‘the first of its kind in England to take a comprehensive view of well-being, based on young people’s own perspectives’ (p.78). However, it is clear again that this measure has not been developed for the age group of the current research. Furthermore, the authors themselves question the extent that the measure will be suitable to use when measuring the level of individual change when evaluating interventions. Therefore, as the purpose of the measure developed for FE was specifically for the purpose of evaluating an intervention, this measure was deemed unsuitable for the current research.

The Tellus survey (Ofsted/DCSF) was first devised in 2007 and surveyed 11-15 year olds about their wellbeing and views under the five themes of the ‘Every Child Matters’ framework; Be Healthy, Stay Safe, Enjoy and Achieve, Make a Positive Contribution and Achieve Economic Well-being. The roll out of this national, annual survey aimed to provide an opportunity to develop a population level, outcome-focused measure of wellbeing. The questions covered a variety of areas of children’s lives including diet, exercise, aspirations, feelings about the local area, participation in activities, substance use, worries, enjoyment of school and bullying (OFSTED, 2007). The UK government decided to stop the delivery of the Tellus Survey in 2010 as part of its commitment to reduce the imposed collection data burdens on schools and local authorities. Unfortunately, for the current research this measure was school-based, which meant it was, yet again, not appropriate for FE students.

Regrettably, for the nature of this current research, all these measures highlight two problems. Firstly, there are no established measures that are appropriate for

the age range in Further Education; those young people who are beyond 16.

Considering that in Wales alone there were 45,745 full-time learners at further education institutions when this research began (WG, 2012) this is a large proportion of the population that has no access to an appropriate wellbeing measure. Secondly, all of these measures are domain based which echoes the concerns raised around the need for a clear definition of wellbeing. Therefore, it was decided that there was a necessity for developing a survey specifically for this age group that moved away from a purely domain based measure.

5.5 Why use a questionnaire?

The decision to develop a questionnaire for this research was taken for a number of reasons. Firstly, due to the high sampling frame (n.657) a questionnaire could be administered without the presence of the researcher (Cohen, Manion, and Morrison, 2000, p.245). However, due to the nature of the educational setting the questionnaire would always be taken in the presence of a teacher, allowing the purpose to be explained and any questions answered.

Secondly, it was accepted that the study could not be mandatory for students. The teachers would offer assistance if needed but the students could stop the questionnaire at any time. Oppenheim (1992) believes that this would ensure a high response rate, accurate sampling and would minimise researcher bias.

Finally, self-administered questionnaires (SAQs) have been one of the often used methods of providing participants with as level of anonymity (Wright, Williams and Supple, 1998). Due to the sensitive nature of some of the ten life areas (e.g. relationships) it was hoped that students would be able to provide information

without experiencing embarrassment at telling someone face to face and without the fear of being overheard.

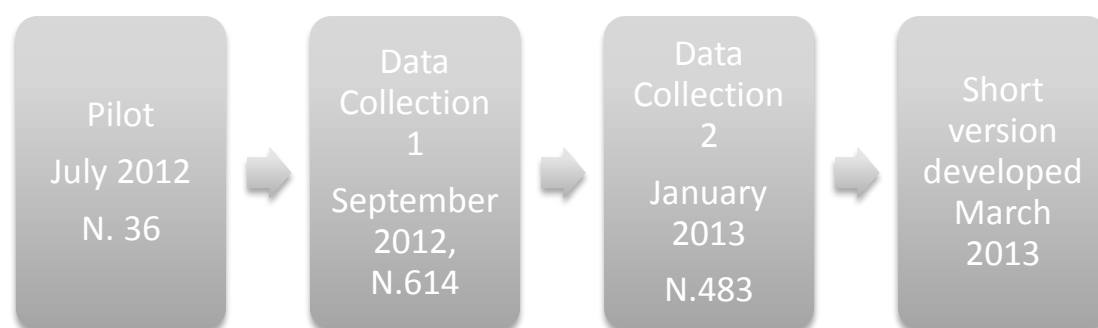
Owing to the nature of the sample it was decided that the option of using an online survey (via Survey Monkey) would be the best way to administer the measure. This was decided for a number of reasons. Firstly, research has indicated that, due to free access to the web within an educational setting (Couper, Traugott and Lamias, 2001), computerised administration allows researchers to obtain sample sizes that can 'far exceed those obtained with most traditional techniques' (Gosling *et al.*, 2004, p.93). Secondly, research has indicated the adolescents have a greater acceptance of computers as a method of gathering data (Tourangeau and Smith, 1996) compared to using paper-and-pencil surveys. A further benefit of this acceptance is that research has indicated that adolescents feel that computer surveys offer them a greater sense of privacy, especially with socially sensitive research (Turner *et al.*, 1996; Tourangeau and Smith, 1996; Couper and Rowe, 1996).

Finally, there is a belief that computer-assisted questionnaire design increases the flexibility of the research (Wright, Williams and Supple, 1998). This includes the ability to ensure each question is answered, the facility for presenting each topic on a different page and the capability to indicate progress to participants (Brace, 2008). In fact, Couper, Traugott and Lamias (2001) found that the use of progress indicators increased completion rates from 86.4% to 89.9%.

5.6 Questionnaire development

In order to develop a robust measure, the questionnaire went through four stages of development:

Figure 5.1 Design stages of the WFESS



At each of these stages data were gathered in order to refine the questionnaire to ensure that it was user friendly as well as being a valid measure of the resource and challenge variables.

5.7 The structure of the questionnaire

One of the aims for the Wellbeing in FE Students Survey (WFESS) was to collect subjective data about nine core areas of challenge identified via the focus group research. Thompson and Aked (2009) believe that it is right to do so because the data would be based on self-report, and would be a direct reflection of what the students thought and felt. Although there have been concerns regarding self-report data because of a fear of 'authenticity of student responses' (Fraillon, 2005, p.42) and the worry that young people may not be able to reliably report their inner feelings (Thompson and Aked, 2009), Thomas (2009) makes it clear that many studies have been successful in gathering information from young people and that it is, in fact, essential that young people answer wellbeing questions themselves.

In order to reflect the proposed model of wellbeing (Dodge *et al.*, 2012) the first section of the new questionnaire (Self-assessment) was designed to gain a subjective measure of how much each life area challenged the participant. Once the participant had reflected on how each of these life areas was affecting them at the current time the next aim of the survey was to discover what impact these challenges had on them and what strategies they employed to approach the challenges. As with many of the existing measures it seemed appropriate to turn to existing psychological surveys as a guide to developing this new assessment. The two measures deemed most applicable were the Strengths and Difficulties Questionnaire (Goodman, 1997) and the Personal Concerns Inventory (Cox and Klinger, 2002).

The Strengths and Difficulties Questionnaire (SDQ) was designed by Goodman (1997) to measure psychological adjustment in children and adolescents.

Psychological adjustment reflects the relative adaptation of an individual to changing environmental conditions, which mirrors the see-saw concept of the definition of wellbeing (Dodge *et al.*, 2012). For the purpose of this research it was imperative to find a measure that was suitable for the age range of FE students.

Although the SDQ was originally designed for children between 11 and 16 years old, further research has highlighted its use for older adolescents (Van Roy, Ventra and Clench-As, 2008). In fact, since its development Vestas (2006) believes that the SDQ has become the most widely used research instrument used with children and early to mid-adolescents.

There are many reasons why researchers have explained its popularity; it is readily available, free and easy to download online; it is brief and easy to complete

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

(Goodman, 2001 and Rothenberger and Woerner, 2004); it has been successfully utilised across a number of countries and cultures (Bourdon *et al.*, 2005; Becker *et al.*, 2004; Rothenberger and Woerner, 2004; Muris, Meesters and Van den Berg, 2003; Klasen *et al.*, 2000; Koskelainen, Sourander and Kaljonen, 2000; Smedje *et al.*, 1999; Goodman, Meltzer and Bailey, 1998); it can be used with healthy populations (Van Roy, Veenstra and Clench-Aas, 2008; Becker *et al.*, 2004; Goodman, 2001) and it can be used as a measure of outcome to evaluate interventions (Vostanis, 2006) which was extremely essential in this research. A number of studies have also highlighted its satisfactory internal, test-retest reliability and validity (Van Roy, Veenstra and Clench-Aas, 2008; Becker *et al.*, 2004; Muris *et al.*, 2003). The SDQ has also been used by researchers to assess the 'life of adolescents' (Rønning *et al.*, 2004) and it has been applied specifically, and in conjunction with other measures, to measure psychological wellbeing in adolescents. (Ussher *et al.*, 2007; Allik, Larsson and Smedje, 2006; Whetton *et al.*, 2009; Boivin *et al.*, 2009; Clarke *et al.*, 2011).

There are a number of different versions of the SDQ, but the S11-17 short self-completion version with impact supplement (see appendix K) appeared to lend itself to the measurement of impact challenges as Goodman (1999) intended it to measure the chronicity, distress and social impairment and burden to others. The first question on the original impact supplement was used by Goodman to establish the perceived level of difficulty. As section A of the newly designed measure had already measured this, there was no need for this question. The next three questions from the impact supplement were then used as a basis to measure the impact that the challenges from the nine life areas had on individuals in the new

questionnaire. The word ‘difficulties’ was changed to challenges, and it was felt that the original four-point scale was not allowing for the entire measurement continuum. Therefore, the original four-point scale was increased to a five-point scale (see appendix L):

Table 5.1 Transforming the wording of the SDQ questions

SDQ Original Questions	Wellbeing in FE Students questions
How long have these difficulties been present?	How long has the challenge of ... been present?
Do the difficulties upset or distress you?	Does the challenge of ... worry/distress you?
Do the difficulties interfere with your everyday life in the following areas? Home Life, Friendships, Classroom learning, Leisure Activities.	Does the challenge of ... interfere with your everyday life in the following areas? Home life, Friendships, Learning, Leisure activities.

The final question on the impact supplement, regarding the burden on those around them, was deemed unimportant to the current research due to the investigation looking at the effect on individuals.

Having established the strength of challenge in Section A of the survey, and the Impact of Challenge in Section B, it was hoped that the final section of the newly developed survey would measure the resources/strategies that the individual took when dealing with the challenge. The Personal Concerns Inventory (PCI) is a revised and abbreviated version of Klinger, Cox and Blount’s Motivational Structure Questionnaire (MSQ) which was developed in 1995. Cox and Klinger (2002)

designed the PCI so that respondents could ‘identify their goals and rate them in terms of their value, attainability, imminence, and controllability’ (Sellen *et al.*, 2009, p.452). Based on motivational theories the questionnaire explores a participant’s current concerns and their potential effect on achieving their goals.

The first initial appeal of the PCI was the fact that it covered eleven life areas that were similar to the nine identified by the focus groups in the current research:

Table 5.2 Comparison of life areas

PCI Life Areas	Challenge areas identified by FE students
Home and household	Family and relatives
Employment and finance	Employment, Higher Education Finances
Partner, family and Relatives	Family and relatives
Friends and Acquaintances	Friends/social relationships
Love Intimacy and Sexual matters	
Self-changes	Confidence
Education and Training	Exams/ college assignments College in general
Health and Medical matters	Health
Substance use	Health
Spiritual matters	
Hobbies, pastimes and recreation	

It therefore, seemed appropriate to use this as a basis for the final section of the measure.

Cox and Klinger (2004) saw the purpose of the PCI as a way of identifying participants' most central concerns and the resources/strategies they use to resolve these concerns. They also felt that wellbeing was the broadest measure of success for an individual and felt this was closely related to satisfying and attaining goals. This reflected the aim of the current research to measure the strategies/resources required by individuals to meet their challenges. The PCI rating scale sheet included 10 questions on a scale of 0-10 which Cox and Klinger argued provided consistency across questions as well as using a scale that was 'intuitively meaningful' to participants (Cox and Klinger, 2004, p.148):

Table 5.3 Original PCI Rating Sheet

PCI RATING SCALE SHEET
Importance: How important is it to me for things to turn out the way I want? Choose a number from 0 to 10, where
0 is not important at all, and 10 is very important
How likely: How likely is it that things will turn out the way I want? Choose a number from 0 to 10, where
0 is not likely at all, and 10 is very likely
Control: How much control do I have in causing things to turn out the way I want? Choose a number from 0 to 10, where
0 is no control at all, and 10 is much control
What to do: Do I know what steps to take to make things turn out the way I want? Choose a number from 0 to 10, where
0 is not knowing at all, and 10 is knowing exactly
Happiness: How much happiness would I get if things turn out the way I want? Choose a number from 0 to 10, where
0 is no happiness at all, and 10 is great happiness
Unhappiness: Sometimes we feel unhappy, even if things turn out the way we want. How unhappy would I feel if things turn out the way I want? Choose a number from 0 to 10, where
0 is no unhappiness at all, and 10 is great unhappiness
Commitment: How committed do I feel to make things turn out the way I want? Choose a number from 0 to 10, where
0 is no commitment at all, and 10 is strong commitment
When will it happen? How long will it take for things to turn out the way I want? Choose a number from 0 to 10, where
0 is very short (e.g., days), and 10 is very long (e.g., years or never)
Will alcohol/drugs help? Will using alcohol or drugs help things to turn out the way I want? Choose a number from 0 to 10, where
0 is not helpful at all, and 10 is very helpful
Will alcohol/drugs interfere? Will using alcohol or drugs interfere with things turning out the way I want? Choose a number from 0 to 10, where
0 is not interfere at all, and 10 is interfere very much

As the newly developed survey was already becoming relatively long it was necessary to select questions from the original PCI to make it more manageable for participants. Firstly, there were three questions that reflected what the FE students had mentioned in the focus groups about the strategies they used to meet their challenges: how likely; control and commitment. As the survey was intended to measure wellbeing it was decided to not confuse the concept with questions related to happiness. Due to the age group concerned and ethical considerations, it was also decided to exclude the questions regarding alcohol and drug use. Finally, it was felt that the question regarding 'when will it happen' was not relevant as the intervention was going to be delivered over a ten-week period. As the second measure would be taken after the ten weeks of the intervention, this made this question redundant.

Each of the three selected questions from the PCI were reworded to reflect the current research:

- How likely is it that you will deal with the challenge of...?
- How much control do you have in dealing with the challenge of...?
- How committed are you to solving the challenge of...?

However, a key area that had been discussed in the focus group regarding the strategies the students' used when dealing with challenges, was missing; the idea of utilising support from others. This echoes research discussed in Chapter Three which demonstrates how support is linked to higher levels of wellbeing.

Consequently, an extra question, following the same style, was added:

- How much support do you have to deal with the challenge of...?

Although, the PCI was originally intended to only inform the strategy measurement questions, it was felt that the question of importance would assist in gauging each of the challenges in terms of impact. This directly reflected the theoretical background of the new definition of wellbeing. Chapter Two discussed Csikszentmihalyi's theory of flow in relation to the need to consider both challenges and resources. As part of this theory Csikszentmihalyi felt that individuals' attention to the challenges they faced enabled them to enter flow experiences. This point was further emphasised by Nakamura and Csikszentmihalyi (2002) who felt that an individual needed to be fully absorbed in the challenges at hand to even have a chance of experiencing flow. This reflects William James's (1890) classic idea that 'my experience is what I agree to attend to'. Consequently, it seemed right to measure the level of importance an individual placed on the need to confront the challenge. Therefore, this was reworded to become an impact question:

- How important is it for you to deal with the challenge of...?

The addition of this extra question also allowed for equal data collection for both impact and strategies the questionnaire would now supply a maximum score of 40 for both variables. This effectively reflected the concept of equilibrium that the definition had been based on.

In summary, the questionnaire developed from the pilot consisted of three sections:

Section A – **Self-assessment** (influenced by the focus group research)

featured nine life areas. Students were asked to 'Read through the

challenges listed below, and think carefully about how each one is affecting you at this moment in time. Using the drop down box, rate each challenge on a scale of 1 to 10, where 1 is no challenge and 10 is extreme challenge.'

- Section B - **Impact** (influenced by the SDQ) featured four questions that aimed to measure the impact the challenge was having on the individual.
- Section C- **Strategies** (influenced by the PCI) featured four questions that aimed to measure the strategies that individual's used to face the challenge.

5.8 Pilot

After developing the first draft of the wellbeing questionnaire it was necessary to pre-test it with a group of FE students in order to identify in advance any problems with the length, reading age or comprehensibility of the survey (Thompson and Aked, 2009). In January 2012, 38 FE students were given the first draft of the questionnaire (see appendix L). As there was an initial concern about how long the questionnaire would take, the students were firstly asked to 'rate each challenge on a scale of 1 to 10, where 1 is no challenge and 10 is extreme challenge'. The students then answered the set questions for the three biggest challenges 'at this present time'. This concern turned out to be unfounded as the average time to undertake the survey was 6 minutes. Also seven of students stated that it was 'difficult to choose three challenges' whereas three students stated they had 'more than three' challenges that they wanted to respond to. Hence, thereafter, it was decided that participants would be asked to address all the life areas that they considered to be a challenge.

In terms of the challenge areas that had been highlighted by the focus groups it was interesting to note which life areas the pilot group deemed appropriate. There was

a feeling amongst some of the students that exams and college in general was very similar and that this required changing. The students also expressed a need to highlight future employment as some of the students had based their response on their current part-time jobs rather than the career paths they were aiming for, which they believed to be the bigger challenge. Some of the students expressed difficulty with fully understanding the term 'confidence' and wanted the life area to be more specific.

Finally, they felt that the two relationship categories were too broad and suggested the addition of more personal relationships. Although this was not mentioned by all focus groups a comment by one participant highlighted that this may have been due to the fact that the focus group moderator was a teacher at the college: *'Yeah, but you can't really go to your tutor and like 'me and my boyfriend ...' (Carys)*. This highlights Stewart, Shamdasani, and Rook's (2007) warning that focus group data can be affected by the extent that participants feel comfortable with openly discussing their views.

However, previous research indicates that this seems a valid area of challenge for this age group. Rees, Goswami and Bradshaw (2010) noted that many young people made comments about their relationships with others. Four topics emerged from their research: love/care, support, fair treatment and respect (p.17).

Interestingly, Ciairano *et al.* (2006) looked at the impact of a dating relationship on adolescents. This research considered 2,273 Italian adolescents and found that being in a dating relationship correlated with less alienation, more positive views of the self, and higher general expectations for success. In terms of dealing with this challenge both Focus Group B and C highlighted the need for support from others.

This could be friends '*when you need advice*' (Karen, Focus Group B) or turning to family.

Therefore, it was accepted that dating/personal relationships would be added to the challenge areas which led to the nine life areas becoming ten:

Table 5.4 Table demonstrating revised life areas

Pilot Questionnaire Life Areas	Post-Pilot Questionnaire Life areas
Exams/College Assignments	Exams/College Assignments
College in general	Other issues relating to college
Employment/Higher Education	Future employment/ Higher Education
Confidence	Self-confidence
Personal Safety	Personal Safety
Friends and acquaintances	Friends/social relationships
Family and relatives	Family and relatives
	Dating/personal relationships
Health	Healthy living
Finances	Finances

Despite the suggested changes 66% of the pilot group found the questions to be clear with all students finding the survey to be user friendly.

5.8.1 Validity

Before undertaking the survey with a larger population it seemed an appropriate time to address Diener's (2006) third recommendation of the need to assess the measure in order to ensure that the developed measure was robust in its nature.

As the second part of the measure had two separate variables (impact of challenge

and strategies that individuals used to face the challenge) a validity measure was required for each. However, due to the original nature of the survey it was not possible to find an established measure for either impact or strategies.

Consequently, the validity measures are intended to correlate with the variables rather than fully represent them; the Perceived Stress Scale (Cohen, Kamack and Mermeistein, 1994) was chosen to correlate with impact of challenges on the individual and the Oxford Happiness Questionnaire (Hills and Argyle, 2002) for an individual's level of strategies used to face the challenges. The hypothesis was that participants with high impact scores would have high stress scores and low happiness scores, whilst participants with high strategy scores would experience the polar opposite.

Within the focus group research, the participants often referred to the term stress when discussing the impact that challenges had on them as individuals. As already discussed in Chapter Four stress was discussed in relation to exams with Joshua explaining that the challenge of exams resulted in being '*the most stressed I've been in in my life*' (Focus Group B). This feeling reflects the transactional model by Cox (1978) who described stress in terms of interaction between the individual and his or her environment. He believed that stress was experienced when the perceived demands of the environment are greater than the individual's perceived ability to cope. It therefore seemed appropriate to correlate stress with impact of challenge as a validity measure. The Perceived Stress Scale (PSS) is often quoted as being the most widely used psychological instrument for measuring the perception of stress (Cohen, Kessler and Underwood Gordon, 1995; Kalra *et al.*, 2007; Mezzacappa and Katkin, 2002). The PSS is a 14-item self-report instrument designed to measure 'the

The most frequently stated word used by students to define wellbeing in the focus group research was happiness:

Figure 5.2 Word cloud demonstrating words used by focus group participants to describe wellbeing



At this stage in the thesis it might seem surprising to be returning to the concept of happiness, especially when the focus of the research has been to move away from dimensions of wellbeing. However, it was necessary to have a way of testing concurrent validity. Therefore, without a suitable measure of subjective wellbeing (SWB) it was important to identify a variable that could be linked to resources.

Fredrickson's (1998) Broaden and Build theory of positive emotions (first discussed in Chapter Two) includes happiness as a credible measure. The theory proposes that when positive emotions arise in response to challenges individuals momentarily increase their attention and thinking leading to an increase in personal resources. In support of this theory, studies have shown that individuals who experience positive emotions more than others also have increased resources in ego-resilience (Cohn *et al.*, 2009), mental health (Stein *et al.*, 1997), optimism (Fredrickson, *et al.*, 2003), and quality of close relationships (Gable, Gonzaga, and Strachman, 2006; Waugh and Fredrickson, 2006). All of these resources would be useful strategies when dealing with the challenge of each of the life areas.

The Oxford Happiness Questionnaire (OHQ) is a short-form of the Oxford Happiness Inventory (OHI; Argyle *et al.*, 1989). The OHI has been widely used in the UK and cross-culturally (e.g. Furnham and Brewin, 1990; Joseph and Lewis, 1998; Valiant, 1993; Francis *et al.*, 1998). The survey has shown high internal reliability (e.g. Hills and Argyle, 2001; Argyle and Lu, 1990 Francis *et al.*, 1998; Liaghatdar *et al.*, 2008; Cruise, Lewis, and Mc Guckin, 2006), with high reliability over time (Argyle *et al.*, 1989). The scale consists of eight questions which seemed appropriate in length so not to overburden the respondents. It was predicted that the challenge strategy

variable of the wellbeing survey would be valid if high scores correlated with high happiness and low stress scores and vice versa.

5.9 Survey 1 – September 2012

5.9.1 Method

As discussed, the survey was developed to include the validity measures and participants were asked to address all the life areas that they considered to be a challenge. The questionnaire was administered to 657 Lower Sixth students in a FE college in south Wales. Students were asked to complete the wellbeing survey as part of their pastoral session in September 2012. They were given access to a computer and the link to the survey. Students answered the questions individually with a level of privacy. Students were not reprimanded if they chose not to complete the survey.

5.9.2 Results

A total of 614 students completed the questionnaire and 43 abstained from completing it (a 93% return rate). All ten areas were answered across the sample. The possible range for the impact score was between 5 and 40, and was between 4 and 40 for the strategy score. When looking at the life areas it was interesting to note which were viewed as most challenging for the sample as a whole:

Table 5.5 Table demonstrating life areas chosen by participants

Area of challenge	% of students selecting this as a challenge	Mean score for impact	Mean score for strategy	Difference between impact and strategy
Future employment/ Higher Education	49%	21.05	27.37	6.32
Exams/ College Assignments	48%	14.52	27.60	13.08
Confidence	36%	22.4	24.87	2.47
Other issues relating to college	23%	19.12	24.56	5.36
Finances	22%	23.69	26.8	3.11
Dating/personal relationships	19%	21.36	24.12	2.76
Friends/social relationships	18%	22.58	25.3	2.72
Family and relatives	17%	24.12	23.71	-0.41
Health	9%	22.46	25.07	2.61
Personal Safety	7%	19.66	24.34	4.68

The above table demonstrates that nine of the ten areas demonstrate higher scores for Strategy than Impact. However, when examining the distribution of scores (Figures 5.3 and 5.4) this highlighted that there was a greater difference between Impact and Strategy scores in the areas that were chosen by more participants (e.g. exams/college assignments compared to personal safety):

Figure 5.3 Box plot demonstrating difference in impact and strategy scores for Future employment

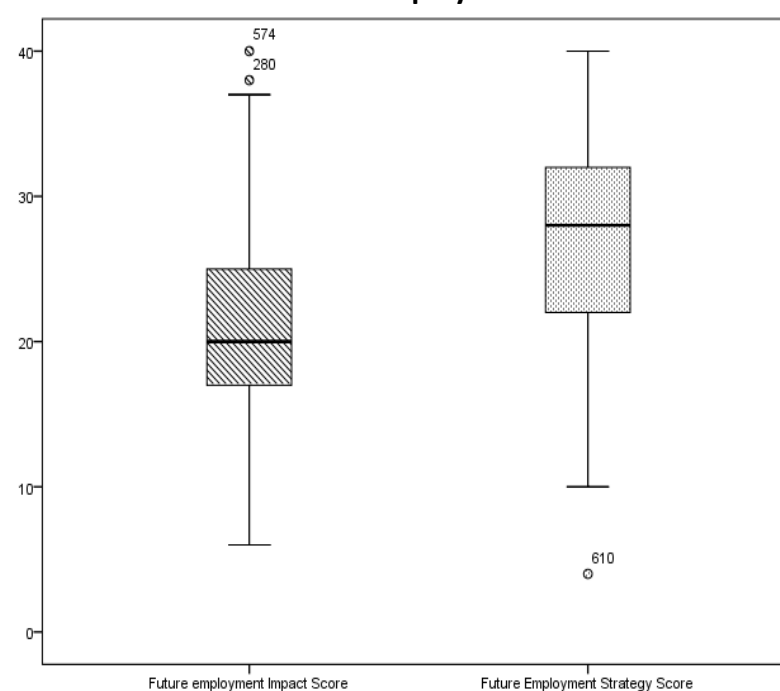
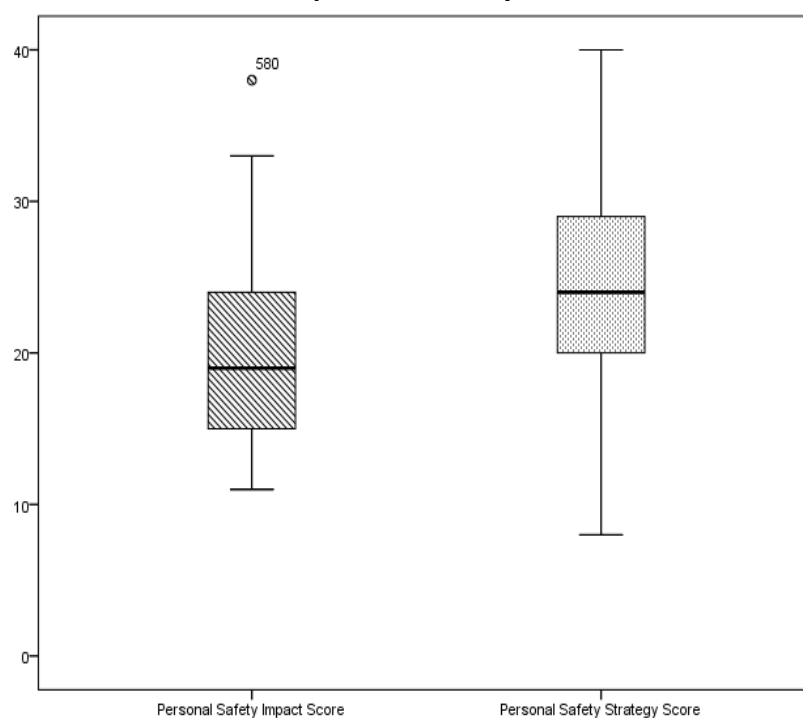


Figure 5.4 Box plot demonstrating difference in impact and strategy scores for personal safety



The relationship between happiness (as measured by the OHQ), stress (as measured by the PSS) and the two key variables (impact and strategy) was investigated using Spearman's rank correlation coefficient:

Table 5.6 Spearman's rank correlations for impact of challenges and strategies for challenges

	Happiness/impact	Stress/impact	Happiness/Strategy	Stress/Strategy
Future employment (N.303)	-.192**	.268**	.298**	-.350**
Exams (N.299)	-.320**	.378**	.228**	-.311**
Confidence (N.229)	-.420**	.409*	.251**	-.289**
Other Issues (N.143)	-.186*	.308**	.297**	-.201*
Finance (N.136)	-.300**	.341**	.168*	-.187
Dating/Personal (N.117)	-.233*	.482	.033	.116
Friends/Social (N.113)	-.312**	.430**	.119	-.064
Family and Relatives (N.105)	-.388	.398	.159	-.046
Health (N.57)	-.355**	.400**	.341**	-.088
Personal Safety (N.41)	-.297	.474**	.290	-.136

**Correlation is significant at the 0.01 level (2-tailed).

*Correlation is significant at the 0.05 level (2-tailed).

The above table demonstrates that for Impact, in line with prediction, all areas correlated negatively with Happiness with eight of the ten life areas showing a significant correlation. Impact also, in line with prediction, correlated positively with Stress, also with eight significant results. This suggests that overall as the level

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

of the impact of challenges increases individuals experience more stress and lower levels of happiness. When looking at the level of strategies used when dealing with challenges, again in line with prediction, all areas demonstrate a positive correlation with Happiness (with six areas demonstrating significant results) , with nine areas negatively correlating with Stress (with four areas demonstrating significant results). There were no significant correlations that ran counter to prediction; furthermore, where the correlation coefficient failed to reach significance, all but 1 of the 40 coefficients appeared in line with prediction. This result starts to demonstrate robust validity for the measurement of impact and strategy.

Although the questionnaire provided an impact and a strategy score out of 40 for each of the areas chosen by participants it was vital to ensure that the numbers gained by each participant were not seen as comparative to another participant in terms of numerical score, due to the nominal nature of the data.

However, the above results raise a very important issue of salience. The variability in the salience of the domains could well be because the survey was asking so much information from each participant. Therefore, to have a fuller picture of the relationship between the variables the mean impact and strategy scores were correlated with the Happiness and Stress scores:

Table 5.7 Spearman's rank Correlations for mean Impact and Strategy Scores

		Mean Strategy Score	Happiness	Stress Score
Mean Impact Score	Spearman's rank Correlation	.102*	-.355*	.417**
Mean Strategy Score	Spearman's rank Correlation		.293**	-.311**

** . Correlation is significant at the 0.01 level (2-tailed).

The above table demonstrates that when the mean scores are taken into consideration the Impact score still comes out in line with the prediction, correlated negatively with Happiness and correlated positively with Stress. Strategy scores also come out in line with prediction with the mean Strategy score significantly correlating positively with Happiness and negatively with Stress. It is also interesting to note that this analysis reveals a significant positive correlation of .102 ($p = .05$) between Strategy and Impact, suggesting that as the impact of challenges increase so does the use of personal strategies to deal with them.

5.9.3 Discussion

When reviewing the first questionnaire in the survey there was concern that the emphasis was placed on only measuring areas that were challenging for individuals. This was also emphasised by a stronger positive correlation of .522** (compared to .417**) for participants that selected a greater number of challenge areas when completing the questionnaire. This highlighted the fact that participants were not selecting areas where they did not feel challenged or maybe where they felt they had adequate resources. Therefore, the definition of wellbeing was not being fully utilised. Consequently, it was decided that it would be beneficial to ask participants to answer all ten areas to establish a balanced view of challenges and resources.

However, the order of the challenge areas was changed to reflect the popularity of the areas in September data, in case fatigue effects affected the responses:

Table 5.8 Revised order for life areas

September	January
Exams/College assignments	Future employment/Higher Ed
Other issues relating to college	Exams/College assignments
Future employment/Higher Ed	Confidence
Confidence	Other issues relating to college
Personal Safety	Finances
Friends/social relationships	Dating/personal relationships
Dating/personal relationships	Friends/social relationships
Family and Relatives	Family and Relatives
Health	Health
Finances	Personal Safety

Due to the length of the questionnaire it was also decided to remove the Stress and Happiness scales as validity checks had already been undertaken.

5.10 January data collection

5.10.1 Method

The second questionnaire was undertaken in January 2013 with 536 students as part of a pastoral session. 482 students completed the questionnaire and 53 abstained from completing it (which was a 90% return rate). This time the students answered the Impact and Strategy questions for all life areas. However, due to

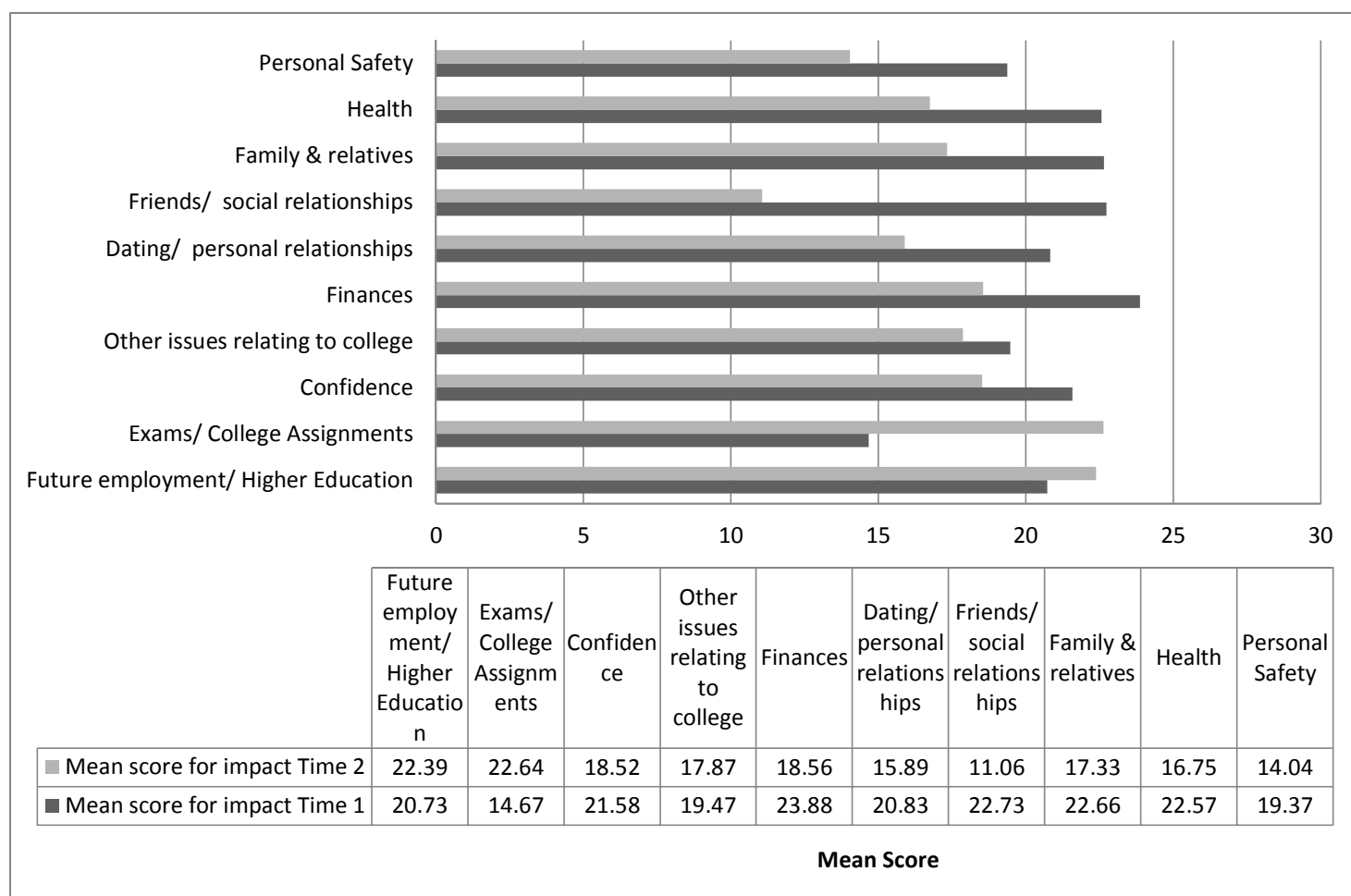
issues with attendance, not all of the students would have also undertaken the survey in September.

5.10.2 Results

Although not all participants completed the Time 1 and Time 2 data it was interesting to compare the overall difference in mean scores for each area (see appendix M). As with the September data, all life areas reveal a greater score for Strategy compared to level of Impact. However, the results demonstrate an increase in impact in Future employment/ Higher Education and Exams. This is not surprising due to the timing of the survey corresponding with the January exam period in FE. It is also interesting to note that in all life areas there was a reduction in the score for Strategy.

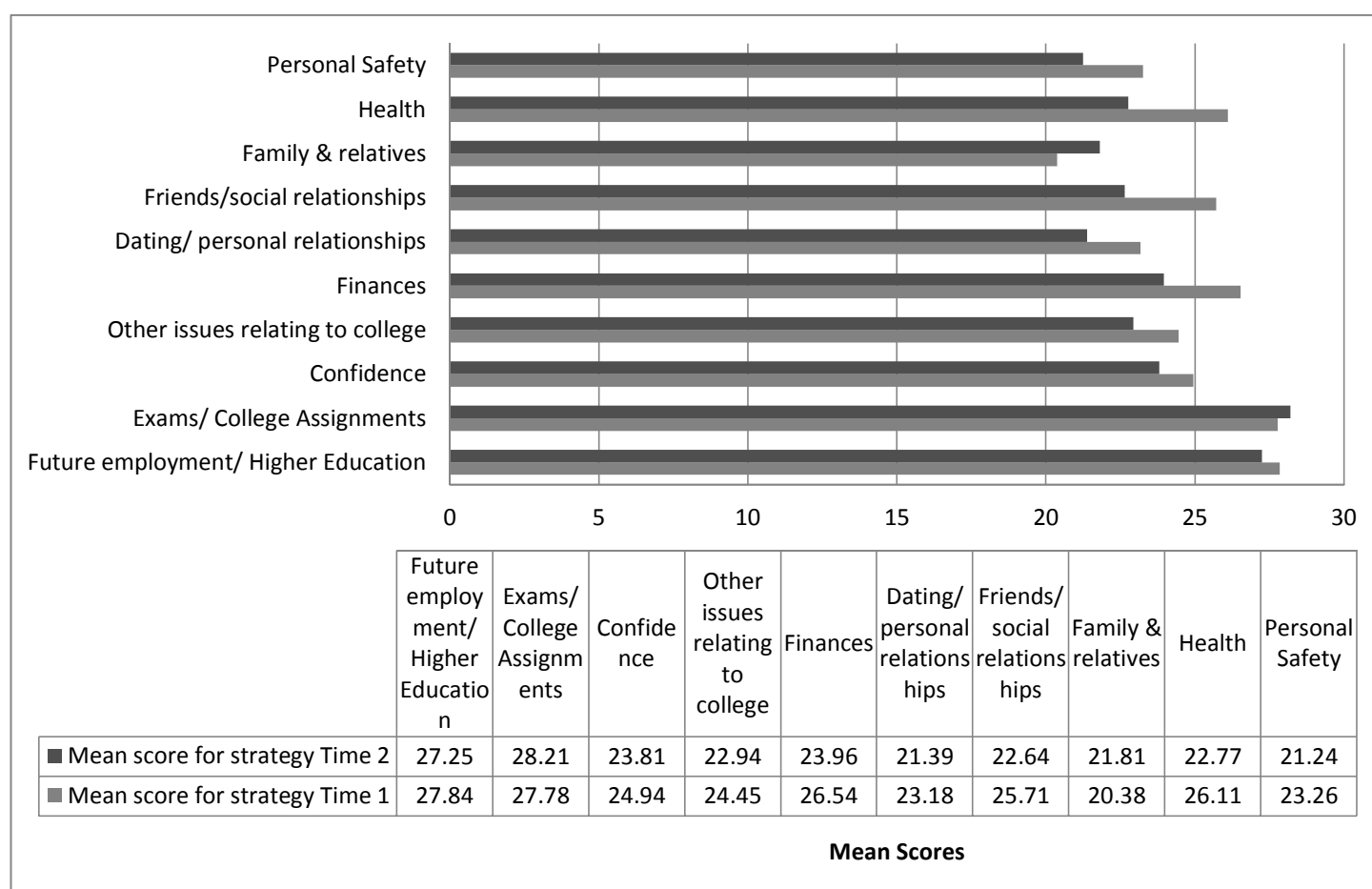
When examining only those participants who completed the questionnaire at both time points (n. 278) the same pattern for Impact emerges:

Figure 5.5 Comparison of Life Area means for Impact between Time 1 and Time 2



However, when it comes to the strategies that these participants take the pattern is slightly different:

Figure 5.6 Comparison of Life Area means for Strategy between Time 1 and Time2



Although eight areas show a reduction in strategy, this time there has been an increase in the life areas of Exams and Family and relatives.

The relationship between Happiness (as measured by the OHQ, Time 1), Stress (as measured by the PSS, Time 1) and the two key variables (Impact and Strategy) was investigated using Spearman's rank correlation coefficient. The analysis demonstrated a significant negative correlation between Happiness and mean Impact ($-.147$ $p = .005$ level) with a significant positive correlation between mean Impact and Stress ($.145$ $p = .05$). These results still demonstrate that the more challenges impact on an individual the more they will experience stress, however, these correlations are weaker than the results gathered at Time 1. This may be

either due to fatigue effects of answering questions on all the life areas or the distance in time between the standardised measures and WFESS. With regards to Strategy at Time 2, there are no significant results. This reflects the findings from the life areas (see Figure 5.6) where the direction of change varies across life areas. This change from the significant results found at Time 1 could also be due to the fact that participants answered the questions for all the life areas. By focusing on ten areas of life that the focus group had highlighted as challenging this may have resulted in 'the greater power of bad events over good ones' (Baumeister et al, 2001, p.323). This focus on negative/challenging life areas could well have resulted in a negativity bias (Rozin and Royzman, 2001) where the participants' focus on the impact that these life areas had on them became more imperative than the positive strategies they were able to employ to deal with them. Alternatively, another way of explaining the results is that impact of challenges remains constant across the time period while strategies to deal with these challenges fluctuate. This could explain why impact still correlates at Time 2 but the application of strategies does not.

The Time 2 analysis yet again reveals a significant positive correlation (.145, $p = .05$) between Strategy and Impact. This could support the theoretical idea that individuals have innate strategies that they are able to use at times of challenge.

5.10.3 Discussion

In terms of design, feedback from staff and students highlighted the negative impact of fatigue due to the length of the questionnaire. The length of the questionnaire could also be a reason for the variability in correlations between the life areas as well as the change in significant results for the strategy area of the

measure. Therefore, a shortened version of the questionnaire was developed (see appendix N) which was only two sides of A4 (stage 4). As it was felt that the questionnaire did not fully allow for participants to reflect on their level of resources, section A of the questionnaire was developed to allow participants to assess 'How Resourceful I feel' and 'How Challenged I feel' for each of the ten life areas, using a drop-down menu 'where 1 is not at all and 10 is very much so'. The addition of the extra side to the questionnaire meant that the participants' perception of both resources and challenges could be compared following the wellbeing intervention. The benefit of the new questionnaire is that it made it possible to be undertaken as a paper exercise if computers were not available to participants. A pilot of this questionnaire was positively received by students as they felt it was concise and user-friendly.

5.11 Conclusion

In order to devise a robust measure of wellbeing the WFESS went through a number of design stages. At each stage data were gathered in order to test the validity of the findings and whether the questionnaire was user friendly. The final version of the questionnaire was regarded as the most robust version that would be able to be applied to the evaluation of an intervention programme that aimed to enhance the wellbeing of FE students.

5.12 Summary

- The main purpose for the development of the 'Wellbeing in Further Education Students Survey' (WFESS) was to allow for a wellbeing measure to be taken pre and post intervention and was influenced by the conceptualisation of wellbeing as a balance between resources and

challenges. The design of the survey responded to guidelines set out by Diener (2006) for the development of new wellbeing measures. It also followed the call to be written specifically for the age group it was intended for. This target population was also pivotal to the development of the final survey in terms of feedback.

- The developed survey consists of three sections: Self-Assessment that allows participants to give a subjective response to how each life area challenges them (and in the final version how resourced they are to deal with the challenge); Impact (influenced by the SDQ) that aims to measure the impact these life areas has on an individual; and Strategy (influenced by the PCI) which aims to measure the strategies individuals take in dealing with the life areas. Validity tests were undertaken which investigated the correlations between happiness (measured by the OHQ) and stress (measured by the PSS).
- The survey underwent four stages of development. A pilot was undertaken with 38 FE students, followed by Time 1 data in September 2012 (n.614). After some minor adjustments the updated survey was undertaken at Time 2 in January 2013 (n.432). At both stages validity testing revealed a positive correlation between high levels of Impact and Stress alongside a positive correlation between high levels of Strategies and Happiness. Both stages of the research also demonstrated the participants had higher levels of Strategies compared to levels of Impact. However, at Time 2, the levels of Strategies had reduced across nearly all life areas. The results also demonstrate an increase in Impact in Future employment/ Higher Education

and exams. Both results could indicate a need for a pastoral wellbeing intervention programme before this stage of the academic year (January).

- In terms of being a useable survey, feedback strongly suggested that the survey should be much shorter. The development of the shortened survey at stage 4, which is now only two sides of A4, had the added benefit of being used as a paper version if access to computers is not a possibility. The addition of the second subjective measure of 'How Resourceful I Feel' also represents the model of wellbeing (Dodge *et al.*, 2012) in a more effective manner. This was an extremely important measure because the purpose of the intervention was to teach strategies to students to access their resources. If the intervention was successful students would perceive themselves as being more resourced and would gain a higher score on this measure following the intervention.

Chapter Six - Methodology and Descriptive Data for the pilot Pastoral Intervention Programme

6.1 Introduction

Chapter Three outlined the use of wellbeing interventions within education, and what needed to be considered to allow for an enhancement of wellbeing. The conclusions drawn from this chapter led to a decision that the intervention developed for this research needed to be:

- at least ten weeks long;
- a variety of exercise/techniques;
- based on positive psychology; and
- skill focused.

Chapter Five then went on to outline the development of the Wellbeing for Further Education Students survey (WFESS). The whole purpose of the survey was not to develop a measure for its own sake but to be able to measure the impact of a pilot wellbeing pastoral intervention for the target audience. Indeed, Marquès-Brocksopp (2012) believes that without a wellbeing measure ‘any wellbeing interventions would be rendered impotent’ (p.52) because we would be unable to measure the success of the programme. Consequently, like the questionnaire, the pilot intervention was based on the proposed definition (Dodge *et al.*, 2012) and was rooted in psychological theory.

6.2 Ethics

As the 2011 BERA guidelines state, the purpose of research in education is to:

extend knowledge and understanding ...from all perspectives including learners, educators, policymakers and the public (p.4).

Research undertaken in this context aims to bridge the gap between academic research and the day-to-day workings of an educational institution (de Zeeuw, 2003). However, the very nature of undertaking research in an educational setting makes it extremely important to undertake ethical considerations.

The pilot pastoral programme was phase three of the research study. However, a change in employment of the researcher meant that the research moved from an insider project (conducted by a teacher) to a joint project (conducted by a researcher within an educational setting). This meant that a further college agreement was signed (see appendix O) that stated that the college was happy for the research to continue. From an ethical viewpoint this could be seen as a more judicious approach as the role of the researcher was clearly discussed and negotiated in terms of roles, tasks and outcomes (Nolen and Vander Putten, 2007). The ethics committee at the University were also informed of this change and approval was given for the research to continue.

In order to track the difference between students' levels of wellbeing before and after the pilot pastoral intervention it was necessary for participants to place their student number on the wellbeing questionnaire. This meant that anonymity was not possible. However, confidentiality was ensured by the individual data not being shared with staff at the college that could identify students by their college number, and secondly, by the researcher having no access to databases that could identify students by this number.

One issue that was essential to consider was the freedom of the students in choosing whether to participate in the research. The pastoral intervention was

planned to be delivered through tutor sessions that students are expected to attend. The scheme of work for this year group had traditionally focused on wellbeing, therefore the intervention was not a diversion from the normal pastoral focus within the college; it was just a different delivery method. Although all students experienced the intervention, the freedom of choice was exercised via the questionnaire. Guidance was given to the relevant staff not to place the students under pressure to complete the questionnaire and any incomplete data was seen as a choice not to participate in the research. However, it needs to be acknowledged that, as the researcher was not present when the questionnaires were administered there is no guarantee that this happened in all cases. The nature of the questionnaire distribution within this setting could also have led to soft or unintentional coercion which could be demonstrated by the high return rates (93% for Survey 1 and 90% for survey 2) found in the pilot of the questionnaire.

The BERA guidelines clearly state that participants should understand the process that they are involved in, why it is necessary, how it will be used and who will the findings be reported to (BERA, 2011, p.5). As the researcher was not delivering the sessions this information was given to the relevant tutorial staff as part as their training session on the intervention. These were Learner Coaches who had the responsibility for pastoral delivery within the college. Session one of the intervention also covered some of these points.

As the intervention touched on some potentially personal issues, necessary steps needed to be taken to reduce any experiences of discomfort or distress. Part of the Learner Coaches' role within the college was to deliver pastoral sessions that touch on personal issues, so the programme was not unique in this sense. As part of their

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

training they are instructed how to deal with students experiencing distress. There were also other support mechanisms within the college, such as access to the college counsellor, who could have been contacted by students if they felt distressed by any of the programme's content. A website (<http://www.resource-fullwellbeing.co.uk>) was also developed that featured a contact page. This allowed students to make contact with the researcher if they felt worried by anything they had covered in the sessions. The link to the website was displayed on all resources relating to the programme, making it easy for students to access this support. However, it is acknowledged that the students had no relationship with the researcher which could have resulted in a lack of trust in using this as a support mechanism.

A final ethical consideration was that the research did not impact on the normal workloads of the Learner Coaches. To ensure this impact was minimised all Learner Coaches were given a tutor file that contained all the resources they required for each session (e.g. lesson plans, PowerPoint, hand-outs). Learner Coaches were also shown the materials in advance and were given the option of suggesting any changes. They all felt that the resources were appropriate and no changes were suggested.

6.3 Design

The purpose of the pilot intervention was to design a standalone unit of ten sessions that enhanced the wellbeing of FE students. These sessions were intended to be delivered weekly to enable the students to have time to reflect on what they had learned and to try to implement some of the new resources they had gained. In response to the previous research that highlighted that individuals were happier

and experienced less stress when they had high levels of strategies and resources, the programme was named Resource-Full.

6.4 Sample and Recruitment

The research was undertaken at an FE College located on one campus in south Wales. At the time of the research it had approximately 1,800 full-time, 16-19-year-old learners. Approximately 45% of learners were from areas of socio-economic deprivation. The majority of learners at the College follow Level 3 courses with approximately 25% of learners mixing academic and vocational programmes. The College offered AS and A Level courses as well as vocational programmes. This college was recruited as the researcher had eight years' experience of working at the college as a teacher and middle manager.

The pilot programme was administrated by eleven Learner Coaches all of whom were female. Their role within the college is to act as a personal tutor to students within the pastoral system. Their job description outlined that their role included

monitoring behaviour and attendance, guiding, and instructing groups in tasks associated with the Welsh Baccalaureate Qualification, as well as UCAS and other work as it arises (See appendix P for full job description).

In 2013 the FE institution where the research was undertaken implemented a new model of pastoral support and provision. Prior to this academic year the role of the personal tutor was undertaken by teaching staff within the college. Regardless of teaching area, all members of the teaching staff had pastoral responsibility for at least one group of students. In 2013, it was decided that the role of the tutor would become separate to curriculum delivery and Learner Coaches were recruited to take over the responsibility for pastoral sessions for all students. Therefore, the Learner Coaches in this research were all new to their role in the 2013-14 academic

year. As there was no requirement for recruits to have an education background the Learner Coaches came with varying levels of experience in education; some were newly qualified teachers and others came from employment backgrounds outside education. Further information would have been useful from a research perspective on their level of experience in order to investigate the reliability of delivery, however, it proved inappropriate to interrogate the Learner Coaches on their background. This was decided because the Learner Coaches were new to their role and a certain lack of confidence was observed. This was confirmed by the fact that the Learner Coaches did not volunteer to be observed once the programme was running. It was felt that any insistence on providing further information on their experience and background could have placed a risk on the research not going ahead.

The pilot programme was delivered to the 2013-14 Lower Sixth (L6) cohort. The students were distributed across 41 tutor groups. This accounted for approximately 900 students within the college. All students were allocated a tutor group at the start of the academic year. The student composition of the groups was mainly dependent on which secondary school they came from. Therefore, tutor groups contained students studying a variety of academic and vocational subject combinations. The tutor groups varied in size with the maximum number of 24 students in some groups. Students had four sessions a week with their tutor group which covered the pastoral, Welsh Baccalaureate and General Religious Education provision. These sessions were compulsory and therefore could not allow for randomised sampling. Consequently, all L6 students undertook the intervention programme, although attendance varied between sessions.

6.5 Materials

In order to measure the impact of the wellbeing intervention the participants were asked to undertake the short version of the Wellbeing in Further Education Student Survey (WFESS). This was undertaken by students in session one and session ten. Although this was designed via an electronic platform the Learner Coaches felt that it would be easier to ask students to complete this on paper due to lack of access to computers during the pastoral sessions.

As already outlined the Learner Coaches were instructed not to watch the students whilst they were undertaking the survey. This was requested so that if students decided to withdraw through non-completion they did not experience any pressure or reprimand. The tutors were instructed not to read the questionnaires and to place them directly into an envelope that was sealed and passed on to the researcher. This ensured that the student responses remained confidential.

6.6 Intervention

The pastoral intervention comprised of ten sessions influenced by the challenge areas discussed in Chapter Four alongside research evidence of what should be included in an intervention for this age group. The aim of the pilot pastoral intervention was to help students enhance their level of wellbeing by developing a personal resource bank to enable them to face challenges. The reason behind this is, although the adolescent years are often seen as difficult:

teenagers also have the ability – or at least the potential – to rethink and remake their lives in a way that younger children do not (Tough, 2013, p.48).

The sessions were designed to be as interactive as possible in order to gain the interest of the students. A variety of activities were developed including the use of video clips, music, quotes and scenarios linked to the key ten challenge areas that

came out of the focus group research (see Chapter Four). The FE students were provided with colourful dividers that allowed them to record information to use as a summary of each session. Each session was devised to end with a homework task which was used as a recap at the start of the next session. This allowed the students to reflect on what they had learnt in the previous session. The researcher was well placed to design appropriate materials for this age group with eighteen years' experience of teaching both academic and vocational courses in post-16 environments. The researcher also had three years' experience as a pastoral manager with the responsibility of designing the pastoral programme across an FE institution. This experience was coupled with a thorough review of literature that informed each of the sessions.

The programme allowed students to consider ways of developing different resources within each session. Each session encouraged reflection on what they had learned which was drawn together in session ten. This reflection is based around four key areas:

1. What I have learned;
2. How I reacted;
3. What I might try;
4. What didn't work for me.

The aims and resources of the ten sessions are outlined below along with the theoretical rationale. Full details of each session are available by looking at the separate 'Resource-Full' teaching file.

6.6.1 Session 1 - Your amazing brain

Aim: To teach students about how their brain is still developing in adolescence.

To introduce students to the concept of wellbeing.

To introduce students to the programme.

Resources: Session One PowerPoint

Ted Talk Video (Insight into the Teenage Brain: Adriana Galván at TEDxYouth@Caltech)

Brain Quiz based on Ted Talk

Wellbeing in Further Education Students Questionnaire

Baby Steps Video (Extract from the film 'What About Bob')

Session one reflection jigsaw hand-out

One of the themes permeating this thesis is the uniqueness of adolescence as a development stage. Chapter One emphasised that this was a particularly important stage to support young people in as the choices made during this stage would influence the rest of their lives (Zarrett and Eccles, 2006). This became one of the reasons why Chapter Three called for a pastoral programme written specifically for adolescents.

One specific area of biological development that is crucial at this age is that of the brain. Many researchers (Howard-Jones, 2007; Morgan, 2005; Doidge, 2007; Tough, 2013, Steinberg, 2014) have highlighted how neuroscience has

demonstrated the surprising extent to which the brain is still developing during adolescence. In 2007, Pickering and Howard-Jones undertook a survey of educator's views to Neuroscience and 90% of those sampled felt that knowledge of the brain was important for educational programmes. Therefore, it seemed right to start the programme with this focus.

The specific focus on synaptic pruning within the session also reflected other reoccurring themes of the thesis: positive psychology; emphasising strengths and being proactive rather than reactive. According to Steinberg (2014), studies indicate that adolescent brains are particularly malleable. This reflects the work of Merzenich (2001) who claims that we can teach the brain to improve so that we can learn with greater precision, speed, and retention. Therefore, the session encouraged students to move away from a fixed biological view of the brain, and to take control of the behaviours through synaptic pruning.

Defining wellbeing has been a key consideration from the start of this thesis.

Therefore, session one seemed the ideal place to introduce the proposed definition. The concept of challenges and resources is outlined briefly before the students undertake the Wellbeing in Further Education Student Survey. It is hoped that the brief introduction enables students to understand the model that the questionnaire is based on but without resulting in bias.

Chapter Three focused specifically on four key concepts that a successful intervention should be based on. The biological content of the session lent itself naturally to the memory and thinking brain elements of Human Givens theory (Griffin and Tyrrell, 2003). The videos and discussions around the unique nature of

the adolescent brain will hopefully prompt practice of synaptic pruning, provide opportunities for social comparison via pair work and aimed to model behaviour (Taxonomy of behaviour change techniques, Abraham and Michie, 2008).

6.6.2 - Building the resource bank

Aim: To encourage students to focus on their individual strengths and their personality type.

To introduce them to the power of goal setting.

For students to complete a mission statement.

Resources: Session two PowerPoint

Personality Cards (adapted from Hodgson, 2006)

The VIA classification of Character Strengths (VIA Institute on Character, 2004)

‘The Great Discovery’ (a structured hand-out that leads to the students’ forming a personal mission statement – Covey, 2004)

Session two reflection jigsaw hand-out

Chapter One discussed the call from researchers (Lerner *et al.*, 2005; Cobb, 2010) for programmes to be designed for adolescents which place an emphasis on future plans and goals, positive self-views and the encouragement of qualities that ensure positive youth development. Ginsberg and Jablrow (2011) agree that young people need to focus on their strengths in order to obtain particular skills to cope and be to be prepared for future challenges. However, they believe that they cannot do this alone – this is a skill that needs to be taught. Engagement and awareness of

strengths also feature in two of the four concepts of successful interventions discussed in Chapter Three (Noble and McGrath, 2008; Noble and McGrath, 2012).

The focus on individual strengths also links to the focus on positive psychology throughout the thesis. Gander *et al.* (2012) highlight that focusing on what is best in people can be seen as a mission statement of this psychological approach and that assisting individuals to discover and practice their strengths is one of its major aims. The VIA classification of character strengths was selected for this session because it was developed to focus on psychological health rather than illness (Steen, Kachorek and Peterson, 2003). It is also a tool that has been widely used within wellbeing research (Brdar and Kashdan, 2010; Park, Peterson and Seligman, 2004; Park and Peterson, 2006a; Proctor, Maltby and Linley, 2011) and has been used with this age group (Steen, Kachorek and Peterson, 2003; Park and Peterson, 2006b; Park and Peterson, 2008; Gillham *et al.*, 2011).

Chapter Three discussed the impact of an individual's motivation on the success of any wellbeing intervention. Many researchers believe that the pursuit of intrinsic and self-determined goals is more likely to lead to positive emotions compared to individuals who are externally controlled (Deci and Ryan, 2000; Sheldon and Elliott, 1999; Sheldon and Kasser, 1995; Sheldon, 2002; Jacobs Bao, and Lyubomirsky, 2014). Therefore, by encouraging students to engage in writing a mission statement that focuses on future goals, it was hoped that this would encourage intrinsic motivation. Also, this exercise of prompting goal setting (Abraham and Michie, 2008) and encouraging students to observe themselves (Griffin and Tyrrell, 2003) will hopefully increase student skills in this area (Noble and McGrath, 2012) whilst giving their life a sense of meaning and purpose (Noble and McGrath, 2008).

Consequently, this one session fulfils elements of all four concepts of successful interventions discussed in Chapter Three.

6.6.3 Session 3 - Individual Thought Patterns

Aim: To help students understand the ABC model and the difference between irrational and rational thoughts.

To help students understand ways to improve their self-talk.

To introduce students to the difference between fixed and growth mindsets.

Resources: Session three PowerPoint

ABC scenarios for groups

Resources for the Envelope task (an exercise to encourage students to see how others view them)

Session three reflection jigsaw hand-out

Chapter Three introduced the Sustainable Happiness Model proposed by Lyubomirsky *et al.* (2005). This model suggested the wellbeing could be enhanced by individuals taking responsibility for the direction of their lives through their thoughts, plans and behaviours (Lyubomirsky and Della Porter, 2010). This cognitive theme also featured as 'positive thoughts' in Layous and Lyubomirsky's 2014 model of psychological mediators and moderators that underlay the efficacy of Positive Activity Interventions. Research has shown that students can be helped to change their cognitive thinking towards a healthier style (Taylor, Gillies and

Ashman, 2009; Orpinas and Horne, 2006) so its inclusion seemed appropriate for this intervention.

As Cognitive Behavioural Therapy (CBT) has been shown to be consistent with positive psychology (Karwoski *et al.*, 2006) it was deemed appropriate to include elements of the therapy, such as the ABC model and focus on irrational and rational thoughts, within the programme. The content of the session also fulfilled elements of all four successful intervention models: observing the self (Griffin and Tyrrell, 2003); Positive emotions (Noble and McGrath, 2008); Optimistic thinking; Helpful thinking skills (Noble and McGrath, 2012); information on consequences; barrier identification and prompt practice (Abraham and Michie).

The introduction of mindset theory (Dweck, 2006a, 2006b) was introduced to the students as Dweck believes that by simply knowing the two mind-sets individuals can start thinking and reacting in new, more positive ways. Dweck (2008) reports that when students have been monitored during difficult school changes or courses, those with 'growth' mindsets outperformed those with 'fixed' mindsets. Therefore, encouraging a growth mindset in students should result in more positive thinking patterns that could enhance wellbeing.

6.6.4 Session 4 - Confidence

Aim: For students to consider embracing challenges

To explore the link between values, beliefs and confidence

To encourage students to increase confidence through visualisation of future achievements

To increase confidence via a confidence building exercise

Resources: Session four PowerPoint

If You've Never Failed, You've Never Lived! Video (Aliaga, 2012)

Values and beliefs hand-out

The best motivational video you'll ever see? (Thomas, 2013)

Confidence builder exercise (adapted from Hodgson 2006)

Session four reflection jigsaw hand-out

Confidence came out of the focus group research as one of the ten key challenges for this age group. As Chapter Four discussed research has highlighted that confidence and high self-esteem has been reported as one of the strongest predictors of psychological wellbeing (Rosenberg, 1965; Campbell, 1981; Diener, 1984, Cheng and Furnham, 2002). Ginsburg and Jablow (2011) make a link between mindset, resilience, personal values and confidence in their handbook for building resilience in teens. They believe that the way that adolescents can use their thought processes to address challenges will lead to greater confidence and resilience. The 'Personal and social education framework for 7 to 19-year-olds in Wales' also states that post-16 education needs to explore 'the life experiences which enhance or damage self-esteem' (Department for Children, Education, Lifelong Learning and Skills, 2008, p.24).

The session builds on the mindset research from session three by focusing on Beer's 2002 research that highlighted that shy individuals can demonstrate a growth mindset within social situations. The purpose of this example was to demonstrate that having confidence does not necessarily link to a certain personality type (which

also links back to what they had learned in session two). The session is designed around developing skills; a key theme discussed in Chapter Three.

The focus on values and beliefs reflects Ginsburg and Jablow's principle that young people who stick to their values 'enjoy the strong sense of self-worth and confidence' (2011, p.27). Research has also indicated that this is an expected outcome of education with a Populus (2013) poll stating that 84% of parents believe that it is part of a teacher's role to encourage good morals and values in a student. This focus is now being explored further by the Jubilee Centre for Character and Virtues (Birmingham University) whose research is focussing on character, virtues and values in the interest of human flourishing.

The focus on values and beliefs within this session covers all four successful intervention models. Both Griffin and Tyrell (2003) and Noble and McGrath (2010) place the importance of empathy within a successful intervention. The focus on values and beliefs hopefully encouraged students to understand and accept that as individuals we are all different which will provide opportunity for positive social comparison (Abraham and Michie, 2008). This hopefully led to positive emotions (Noble and McGrath, 2008) and helpful thinking skills (Noble and McGrath, 2012). By modelling positive behaviour (Abraham and Michie) through the activities it is hoped that this would lead to an increase in individual levels of confidence.

6.6.5 Session 5 - Relationships

Aim: For students to see relationships as a resource rather than a challenge

For students to consider what makes a healthy relationship

For students to consider useful techniques to build healthy relationships

Resources: Session five PowerPoint

The Free Hugs Campaign Video (This video shows the story of Juan Mann who carried a 'Free Hugs' sign in his home town. In October 2005 police tried to stop the campaign as Mann had not obtained public liability insurance, but a petition raised 10,000 signatures which overruled the police decision. This true story was turned into a YouTube video which reached 10 million views in just over four months. Mann, 2006)

YouTube Video demonstrating the positive effect that positive relationships can have (TheCorpfa, 2013)

Session five reflection jigsaw hand-out

Three of the ten challenges highlighted by the focus groups in Chapter Four were centred on relationships (friends/social, dating/personal and family and relatives).

This reflects Noble and McGrath's belief that the factor

that appears to make the largest contribution to children and young people's wellbeing and resilience is their experience of positive relationships (2012, p.23).

Positive relationships are also a key feature in the PEPs framework (Noble and McGrath, 2008).

To ensure that the sessions were a progression on from what is delivered in Personal, Social, Health and Economic (PSHE) education in secondary schools, the aim of this session was for students to consider how relationships can be seen as a

valuable resource rather than a challenge. Not only did this link to the key theme from positive psychology, this was also to prevent the session being viewed in any way as a sex-education session and to enable the full range of relationships, highlighted by the focus groups, to be explored. This session also allowed for a number of key factors from the taxonomy of behaviour change techniques (Abraham and Michie, 2008): information about others' approval; model or demonstrate behaviour; prompt practice; and providing opportunities for social comparison.

The session's variety of activities (a key finding of successful interventions discussed in Chapter Three) includes the use of two videos. YouTube has been viewed as a successful channel for 'an outpouring of youth expression' (Hoechsmann, 2008, p.61) whilst offering the opportunity to make a difference, change people's minds and to try to make a mark on society. Consequently, it was felt that this would be a productive way of demonstrating how to build positive relationships through acts of kindness (MacConville and Rae 2012; Lyubomirsky, 2012; Covey, 2004).

The session encourages students to be proactive rather than reactive as well as emphasising the strengths approach (both key themes of Chapter Three). It is hoped that the range of exercises also encourages empathy (Griffin and Tyrell, 2003; Noble and McGrath, 2012) which Ginsburg and Jablow (2011) see as an important ingredient in forging human connections. The session also focuses on emotional regulation, prosocial skills and adaptive distancing (Noble and McGrath, 2012).

6.6.6 Session 6 - Positive communication

Aim: For students to consider their communication style.

For students to compare communication styles.

For students to consider how to communicate in a positive manner

Resources: Session six PowerPoint

Communication style quiz (adapted from Cadogan, 1990)

Communication style card matching activity (Students match behaviours with the three different communication styles)

Scenario cards (Students consider how they would normally react in everyday situations and how they could do this in an assertive manner.)

Session six reflection jigsaw hand-out

Session five touched on positive communication as a useful personal resource, but it was felt that there was a need for a specific session on this resource. This is of particular importance as research has indicated a growing lack of confidence in communicating face-to-face compared to online interactions (Pierce, 2009; Jin and Pena, 2010; Madell and Muncer, 2007). Ingoldsby *et al.* (2006) also found that social skills deficits in adolescents resulted in them feeling discontented with their own achievements, and perceiving themselves as less socially capable than their peers. This ties in with the theme, discussed in Chapter Three, of interventions developing skills in adolescents.

The focus on increasing the skill of positive communication is also important as it links to the area of future employment which was highlighted in the focus group research as one of the ten challenges for FE students. Archer and Davidson (2008) found that 86% of employers consider good communication skills to be valuable. Social skills were also competencies that were highlighted as important by Noble and McGrath (2012) and the PEPs Framework (Noble and McGrath, 2008). It is hoped that the session would encourage students to observe their present communication style (Griffin and Tyrell, 2003) whilst giving them opportunity to model and practice positive styles, alongside looking at social comparisons (Abraham and Michie, 2008).

6.6.7 Session 7 - Healthy living

Aim: For students to consider the 3Rs of habit formation (Duhigg, 2012)

For students to consider how healthy their sleep patterns are

For students to reflect on unhealthy dietary choices

For students to reflect on their level of exercise

Resources: Session seven PowerPoint

‘Are you getting enough sleep?’ quiz (adapted from KidsHelpPhone, 2014)

Health diary

Video ‘Supersize Me in 7 mins: How too much of McDonald's will make you feel!’ (Hibzta, 2009. Selected scenes from the

documentary "Supersize Me" where Morgan Spurlock ate only food from McDonald's for 30 days.)

Desk stretches (Anderson, 2000)

Session seven reflection jigsaw hand-out

This session focuses on the need for healthy habits. This reflects the content of the Healthy Further Education Programme in England (Department of Health, 2009) which aimed to target the health needs of those in the FE sector. Chapter Three highlighted the concern that this approach to healthy lifestyle had not become a focus of FE in Wales even though the need to evaluate personal lifestyle choices in the context of physical health is stated in the PSHE guidelines in Wales (Department for Children, Education, Lifelong Learning and Skills, 2008). Therefore, the focus on the behaviour-health link (Abraham and Michie, 2008) aimed to redress this balance with the session focusing on three key areas: sleep, nutrition and exercise.

A key theme throughout the thesis is the unique stage of adolescence, particularly in relation to brain development. Linked to this theme the National Institute of Health (NIH) identified adolescents as a population at high risk for problem sleepiness (NIH, 1997). This is partly due to puberty which causes changes in sleep patterns, sleep/wake systems and circadian rhythms (Carskadon *et al.*, 1999). In 2003, Smaldone, Honig and Byrne, reported shocking statistic of 15 million American children being affected by inadequate sleep. This resulted in family reports of depressive symptoms, family disagreements and parental concern that the child was not always safe at school, home, or in their neighbourhood. The pattern does not seem any different in Europe with the HELENA study (Garaulet *et*

Enhancing wellbeing – Evaluating an Intervention for Further Education Students
al., 2011) demonstrating that adolescents who slept less than 8 hours a day showed higher values of BMI, body fat, waist and hip circumferences and fat mass index. They also ate lower levels of fruit, vegetables and fruit. Conversely, adolescents who slept more than 8 hours per day were more sedentary and spent more time watching television.

A healthful diet during adolescence promotes health, growth and cognitive development, and may contribute to the prevention of chronic disease in later life (Willett, 1994; Centers for Disease Control and Prevention, 1997; Luzzi and James, 2001; Lytle and Kubik, 2003; World Health Organization, 2003). However, Van Cauwenberghe *et al.* (2010) found that the effects of education initiatives on dietary intake only had a moderate effect on the health of adolescents. They consequently concluded that there is an urgent need for further interventions.

In order to make the discussion on nutrition more relevant to the students, a short overview of the documentary 'Super-Size Me' was used in the session. Veltman (2004) felt that the extreme tactics included in the film, 'might just be the best way of persuading teenagers to swap their lunchtime bag of chips for a whole-wheat salad sandwich and a bag of mini carrots.' The introduction of a health diary was to prompt self-monitoring of behaviours and practice (Abraham and Michie, 2008).

The final focus of the session is on exercise. There have been numerous studies that link increased exercise in adolescence to a variety of aspects of wellbeing including: decreases in depression (Landers, 1997; Martinsen and Morgan, 1997; Glenmullen, 2001; Taylor, Gillies and Ashman, 2009); lower levels of emotional distress (Steptoe and Butler, 1996); disease prevention (Department of Health,

Enhancing wellbeing – Evaluating an Intervention for Further Education Students
1996); psychological wellbeing (Department of Health, 2004a; Ussher *et al.*, 2007);
sleep (Horne, 1981; OConnor and Yongstedt, 1995); and improved social
functioning (Allison *et al.*, 2005).

Research commissioned by Sports Wales indicated that between the ages of 16-18
there is a drop in sports participation in both boys and girls (Bright Purpose, 2012).
This reflected the feelings of a number of focus group participants in focus group C
that was outlined in Chapter Four. It was hoped that by using a practical activity in
the session (the desk stretches) it would be a positive way of modelling behaviour
and to teach through the use of prompts and cues (Abraham and Michie, 2008).

6.6.8 Session 8 - Stress Management

Aim: To increase the students' knowledge of stress

For students to understand the body's reaction to stress

For students to understand the difference between being proactive
and reactive

For students to consider a variety of coping strategies

Resources: Session eight PowerPoint

Coping with stress video (BBC, 2010. Video demonstrating the
body's reaction to stress)

Proactive Vs Reactive video (White, 2012. Video visually exploring
the behavioural difference between proactive and reactive
individuals).

My personal stress plan (adapted from Ginsburg and Jablow, 2011)

Session eight reflection jigsaw hand-out

Stress was a word that was cited by all four focus groups (examined in Chapter Four) when discussing the challenges faced by FE students. This will not be surprising if we accept Mishra and Vashist's (2014) view of stress as 'a state of imbalance between demands made on us from outside sources and our capabilities to cope with them' (pp.12-13). This echoes the model of wellbeing (discussed in Chapter Two) that the intervention was influenced by.

The focus on stress also links to another key theme of this thesis: adolescence, as a key stage in development. At this stage adolescents experience: significant biological and psychological transformations (Kim *et al.*, 2003; Mishra and Vashist, 2014); changes in interpersonal relationships (Rudolph *et al.* 2000; Mishra and Vashist, 2014); a higher rate of depression due to stress (Rudolph *et al.*, 2000; Kim *et al.*, 2003; Cole *et al.*, 2006); higher numbers of negative life events (Kim *et al.*, 2003); rapid pace of life changes (Kim *et al.*, 2003; Kumar and Kadiravan, 2012) and a greater reliance on personal resources rather than external resources, such as parents. Indeed, Compass and Wagner (1991) state that adolescence has been characterised as the development stage with the most intrapersonal and interpersonal struggles. Consequently, it is surprising that Coyle and Vera (2013) state that the relationship between stress and wellbeing has been under researched in this age group which gives a further justification for its place within the programme.

Exposure to some levels of stress in this age group can actually positively contribute to normal development; however, high levels of stress can become a potential

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

threat to the health and wellbeing of adolescents (Grant *et al.*, 2003). Therefore, the session starts with the aim of teaching the students about the biological reaction to stress. This responds to the concern from Kumar and Kadiravan (2012) that lack of awareness about the nature of stress has left adolescents more volatile. This approach also allows students to observe themselves (Griffin and Tyrell, 2003) alongside increasing their emotional competency (Noble and McGrath, 2008, 2012).

Due to the specific challenges that adolescents face, it is imperative for adolescents to develop a range of methods to allow them to function properly when they experience stress (Bryne *et al.*, 2007). Research has shown that by intervention programmes enhancing these skills in adolescents, negative effects of stress are reduced (Bode *et al.*, 2007; Bodenmann *et al.*, 2002; Coyle and Vera, 2013). Kobus and Reyes (2000) also believe that the coping strategies can ‘forecast future and, potentially, lifelong consequences’ (p.163). Therefore, the final focus of the session is around developing coping strategies. Yet again, this skill based approach used in the session echoes the discussion of Chapter Three as well as modelling behaviour and prompting practice (Abraham and Michie, 2008).

6.6.9 Session 9 - Live for the moment

Aim: For students to understand the concept of ‘flow’

For students to understand the conditions for flow

For students to consider and experience the concept of mindfulness

Resources: Session nine PowerPoint

Introduction to flow video (Kelty Mental Health, 2013)

Transcript for the raisin exercise (adapted from Kabat-Zinn, 1990)

Session nine reflection jigsaw hand-out

Csikszentmihalyi and Hunter (2003) suggest that individuals who engage in flow activities are happier than those who engage in activities that present too much or too little challenge. Consequently, flow is a concept that influenced the model of wellbeing that this intervention was based on (see Chapter Two). With Csikszentmihalyi (1997) arguing that flow was a concept that could be taught and Layous and Lyubomirsky (2014) suggesting that future research could look at the link between flow and wellbeing via positive activity interventions, it seemed logical to include this within this session. The variety of practical activities (called for in Chapter Three), explore the concept of flow and were devised to encourage students to develop a sense of meaning and purpose (Noble and McGrath, 2008, 2012) by observing themselves (Griffin and Tyrell, 2003). Discussion around the activities also provided an opportunity for social comparison (Abraham and Michie, 2008).

The session moves into an exploration of mindfulness, which has ‘become a cultural buzzword in the past decade, showing up in more than a thousand popular books, websites, and magazines, in addition to scholarly articles’ (Zack *et al.*, 2014).

Although, a rather abstract and complex cognitive approach some researchers have argued that mindfulness is better suited to youth than adults (Goodman 2005; Kabat-Zinn 1990). The use of the practical exercises within the session allowed for the modelling and demonstration of behaviours, prompt practice and the teaching of prompts and cues (Abraham and Michie, 2008).

6.6.10 Session 10 - Reflection

Aim: To reflect on the fifteen core aspects of the course

To create an action plan for future development

Resources: Session ten PowerPoint

Group reflection jigsaw puzzle

Wellbeing in Further Education Students Questionnaire

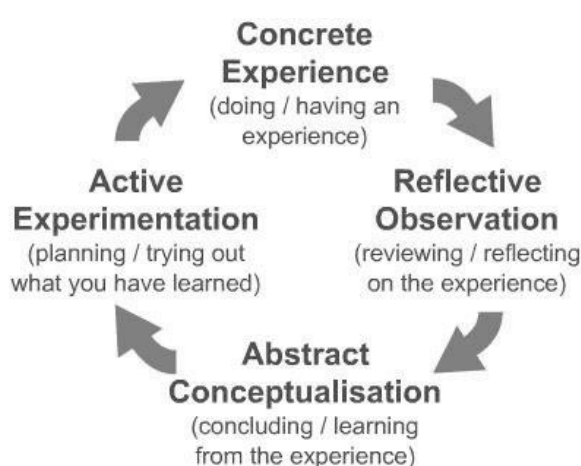
Dream – Motivational video (Mateusz, 2013)

Beyth-Marom and Fischhoff (1997) highlighted that adolescence is a peak time for making choices. They suggested that the ability for adolescents to make these decisions effectively is critical to their wellbeing. At this stage of development Overton and Brynes (1991) claimed that adolescents learn a new level of abstraction; the ability to reflect on this decision making process. This echoes Dewey's belief that we 'don't learn from experience. We learn from reflecting on experience' (1933). Stanchfield (2013) believes that allowing students to reflect on their learning is beneficial in a number of ways; it brings learning to life; it helps learners make connections between prior and future learning experiences; and it creates ownership over learning. Therefore, the final session of the intervention allows the students to reflect on the resources they have been taught throughout the previous nine sessions.

In this session students are firstly introduced to Lyubormirsky's Sustainable Happiness Model (discussed in Chapter Three) to highlight that they have the power to change how they act and think in order to increase their wellbeing. The purpose of this session is for the students to review the jigsaw puzzle reflections

that they have completed at the end of each previous session. This aimed to enable students to produce an overall evaluation of the whole programme. This individual exercise, looking back at the reflective puzzles they had written throughout the programme, allowed students to experience experimental learning, a theory based on the interaction of four stages:

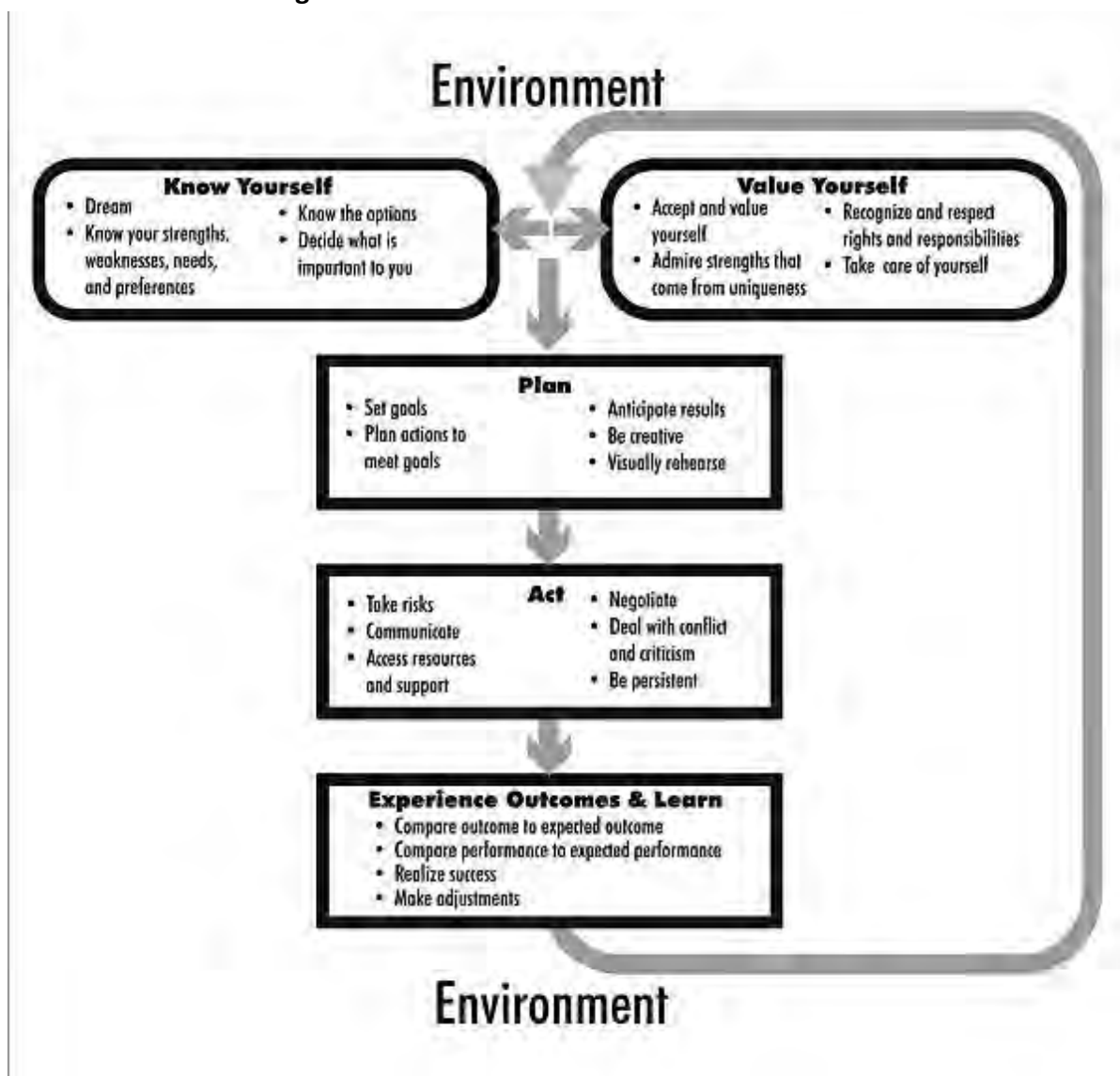
Figure 6.1 Experimental Learning stages



(Kolb, 1984)

The exercise also aims to develop self-determination (as discussed in Chapter Three). Field and Hoffman (1994) saw self-determination as critical to adolescents achieving major developmental activities. Their model, which is similar to Kolb's, encourages individuals to reflect as a focus point of experience outcomes and learning:

Figure 6.2 Model for self-determination



Field and Hoffman (1994)

It was hoped that this individual reflection exercise would assist the students in forming positive intentions; prompted by a review of behaviour goals alongside prompting practice – all key aspects of Abraham and Michie’s taxonomy of behaviour change techniques (2008).

Osterman and Kottcamp (1993) stated that reflective practice is often very difficult and challenging for individuals. Consequently, they suggest that undertaking a

reflective activity in a collaborative manner can be more effective. This idea has been supported by a number of other researchers (Brown, Collins and Duguid, 1989a, 1989b; Prestine and LeGrand, 1991; Hatten and Smith, 1995; Gustafsen and Bennett, 1999) therefore the session developed through a sharing of individual reflections in groups in order to produce an agreed final reflection. This exercise also aimed to give general encouragement through the opportunity for social comparison (Abraham and Michie, 2008).

The session ends with the students undertaking the Wellbeing in Further Education Student Survey to gain the post-intervention measure. It is hoped that the use of a pre and post-intervention measure would improve confidence in the final results of the intervention (Hayter *et al.*, 2011). It is also hoped that the use of this repeated measures design would indicate whether the intervention had a causal effect.

6.7 Effectiveness of intervention content

Chapter Three outlined four key concepts/frameworks that needed to be considered if the content was to be effective in terms of increasing wellbeing. Each of these has been discussed in relation to each of the sessions. However, the following table demonstrates how the ten sessions map across the four frameworks:

Table 6.1 Mapping of the ‘Resource-Full’ sessions across the four key influencing concepts/frameworks

Session	Human Givens (HG) theory (Griffin and Tyrrell, 2003)	Positive Educational Practices (PEPs) Framework Noble and McGrath (2008)	Noble and McGrath (2012)	Taxonomy of behaviour change techniques Abraham and Michie (2008)
Your amazing brain	Memory Thinking Brain			9. Model or demonstrate behaviour 17. Prompt Practice 19. Provide opportunities for social comparison
Building the Resource Bank	Observing self Thinking Brain	Engagement through Strengths A sense of meaning and purpose	Goal setting skills Autonomy, self-efficacy, awareness of strengths	9. Model or demonstrate behaviour 10. Prompt goal setting 17. Prompt Practice 19. Provide opportunities for social comparison
Individual Thought Patterns	Observing self Thinking Brain	Positive emotions	Optimistic thinking Helpful thinking skills A sense of humour	2. Information on consequences 5. Prompt barrier identification 9. Model or demonstrate behaviour 17. Prompt Practice 19. Provide opportunities for social comparison 22. Prompt self-talk
Confidence	Empathy Imagination	Social and emotional competency Positive emotions	Empathy and prosocial values Helpful thinking skills	5. Prompt barrier identification 9. Model or demonstrate behaviour 17. Prompt Practice 19. Provide opportunities for social comparison
Relationships	Empathy	Positive relationships	Social Skills	3. Information about others’

Enhancing wellbeing – Evaluating an Intervention for Further Education Students

	Thinking Brain		Empathy and prosocial values Emotional regulation Adaptive distancing	approval 9. Model or demonstrate behaviour 17.Prompt Practice 19.Provide opportunities for social comparison
Positive Communication	Observing self Thinking Brain	Social and emotional competency	Social Skills Emotional regulation Adaptive distancing	9. Model or demonstrate behaviour 17.Prompt Practice 19.Provide opportunities for social comparison 21. Prompt identification as a role model
Healthy Living	Dreaming			1. Behaviour-health link 9. Model or demonstrate behaviour 12. Prompt self-monitoring of behaviours 15. Teach to use prompts or cues 17.Prompt Practice 19.Provide opportunities for social comparison
Stress Management	Observing self	Social and emotional competency	Emotional regulation	9. Model or demonstrate behaviour 15.Teach to use prompts or cues 17.Prompt Practice 19.Provide opportunities for social comparison 22. Stress Management
Live for the Moment	Observing self Knowing brain	A sense of meaning and purpose	Empathy and prosocial values	9. Model or demonstrate behaviour 15.Teach to use prompts or cues

			A sense of meaning and purpose Spiritual connectedness	17.Prompt Practice 19.Provide opportunities for social comparison
Reflection				4. Intention formation 6. General encouragement 8. Provide instruction 9. Model or demonstrate behaviour 11. Prompt review of behaviour goals 17.Prompt Practice 19.Provide opportunities for social comparison

6.8 Procedure

After the content of the pilot programme had been developed a sample tutor file was produced. It was hoped that the programme could be delivered at the start of January 2014. This timing in the academic year would have allowed the Lower Sixth students to settle into college life, and would not have been close to external examinations as Ofqual (the examinations watchdog) had made a decision that January examinations would not take place from 2014 onwards. However, delays in the pastoral delivery at the college meant that a meeting with all the Learner Coaches at the college along with the Pastoral Manager, was not set up until the start of February that year.

For the pilot to be as successful as possible it was important to give the Learner Coaches as much guidance as possible. This was provided through a training session at the college. It was decided to keep the training session as informal as possible to allow the Learner Coaches to feel able to contribute to the discussion of the suitability of each of the ten sessions within the pilot intervention. Therefore, no recording was made of the meeting. During the session with the Learner Coaches each of the sessions was discussed in turn. For each session the Learner Coaches were shown the lesson plans alongside an explanation of each of the activities within the sessions. It was noted that the Learner Coaches were very accepting of the resources shown to them. However, it is important to state that the Learner Coaches were used to having materials given to them to teach as their role did not include the responsibility for writing materials for their pastoral sessions. One particularly memorable moment from the meeting was that one of the learner Coaches reacted in quite an emotional manner when the researcher presented the confidence building exercise in session four. She explained that she found the exercise very powerful and it affected her personally. Each Learner Coache was also given a copy of the 'Resource-Full' disc that

contained all the PowerPoints for the sessions. By providing the Learner Coaches with a full resource file it was hoped that the detail in the lesson plans would allow them to have all the guidance they needed to deliver each session. The Learner Coaches were also encouraged to give feedback to the researcher during the meeting and were also given the researcher's contact email address. This was to ensure that if they had any further questions about the programme they would get in touch with the researcher to receive more personalised guidance.

It was explained to the Learner Coaches that they had a chance to be part of the development of the programme. The Learner Coaches stated that they liked the content of the sessions and how the resources looked. They were particularly impressed by the dividers for the students to use in the session. No suggestions of changes to the programme were made during or after the meeting so the Pastoral Manager informed the researcher that the Learner Coaches were happy with the programme. Unfortunately, the short time given to the researcher to train the Learner Coaches was a contextual limitation of the amount of guidance that could be offered to each of the Learner Coaches. Due to further delays at the College the programme was finally delivered to 900 Lower sixth students from the 24th March 2014. Each Learner Coach was provided with a tutor file containing all the lesson plans and resources they needed for each session. The students were provided with dividers for each session as a way to record information during the lesson as well as a keepsake reminder of what they had learned. The delays also affected the planned once weekly delivery. This meant that the Learner Coaches delivered more than one session a week. The delivery of the sessions varied between Learner Coaches and not all of them were able to finish the delivery of the course.

Learner Coaches were asked to place the wellbeing questionnaire from Session one, in a sealed envelope with their form group clearly stated on it. This also happened in Session 10. The web address was placed at the bottom of every divider and hand-outs (www.resource-fullwellbeing.co.uk). The Learner Coaches were asked to tell the students that the lessons page on the website contained a number of support links for each lesson and the contact page if a student wanted to ask anything about the programme. Contact details were given to the Learner Coaches so they could gain any further support if they required it. However, as the researcher was no longer a member of staff at the institution the Learner Coaches may well have hesitated in contacting the researcher for any further guidance. Finally, the Learner Coaches were asked if any of them would be happy to be observed delivering some of the sessions. Unfortunately, no volunteers came forward. This is another contextual limitation of the research.

6.9 Conclusion

The creation of the pilot pastoral intervention took into account the newly proposed definition of wellbeing, information gathered from the student focus group research discussed in Chapter Four and four key theories discussed in Chapter Three.

6.10 Summary

In summary, this chapter has outlined the methodological considerations of developing a pilot wellbeing intervention. The ethics of the research were discussed along with the process of recruitment. The chapter has outlined the characteristics of the ten week 'Resource-Full' programme that was designed to increase the wellbeing of a cohort of L6 FE Students. This content was linked backed to key success characteristics that had been outlined in Chapter Three.

The procedure of the delivery of the intervention has been outlined which has highlighted some unforeseeable restrictions around the delivery of the programme. These include the time of year the programme was delivered, the unfortunate lack of access to the sample and the slightly rushed delivery of the sessions.

Chapter Seven – Learner Coach Focus Group

7.1 Introduction

Having undertaken Stage 3 of the research (the delivery of the pilot pastoral intervention ‘Resource-full’) the final stage of the research was to analyse the results of the intervention. The previous chapter has already highlighted problems that were encountered with respect to the timing of the intervention. Unfortunately, problems also occurred in terms of access to the sample during and following the intervention. This was despite an agreement being signed by the college (see Appendix O) that clearly stated that lesson observations could be undertaken by the researcher alongside learners providing feedback on the intervention.

The lack of access to the learners was the most discouraging aspect of this research. This was partly due to the delays in the intervention being delivered at the college, as the students had left for study leave for their Lower Sixth exams after the final session. To try to compensate for this lack of physical access to the sample an evaluation survey was designed in Survey Monkey (see Appendix Q) to enable students to provide feedback in a quick and simple manner. Ethical approval for this amendment for the research was given in September 2014. The survey link was sent to the pastoral manager at the college at the start of the next academic year (September 2014), to email out to all students who had undertaken the intervention programme. In order to encourage participation an incentive of being entered in to a draw for a £50 voucher was offered. BERA guidelines state that the use of incentives to encourage participation must be applied with good sense and must avoid the giving of items which may have undesirable effects. It was felt that a £50 Amazon voucher could not be used to purchase any item that would be detrimental to the students

who chose to take the incentive. It was also accepted that the use of an incentive could produce a bias in the results gathered by the survey. Unfortunately, this survey received no respondents which could suggest that the link was not sent to the students to complete.

With no access to the student participants, a critical step was to gather feedback from the Learner Coaches who had delivered the intervention. To continue the mixed methods evaluation of the research a focus group was undertaken. It was hoped that this method would allow the Learner Coaches to express their personal experience of delivering the intervention.

7.2 Materials and Sample

In preparation for the Learner Coach focus group, enlarged versions of the reflection jigsaw puzzles used by the students in the Resource-Full intervention were prepared. These enabled notes to be taken during the session using a format that was familiar to the learner coaches. Individual questionnaires were also developed (see Appendix R) to ensure that each Learner Coach was able to feedback individually on the intervention. Due to a lack of access to the student participants the focus group session was planned in two sections: first a discussion about the Coaches' perception about how the students responded to the intervention; secondly the approach was used to explore about the Learner Coaches' own experience with the intervention.

The sample for the focus group consisted of seven of the eleven Learner Coaches that had delivered the programme, alongside their Pastoral Manager who had agreed for the pilot to be undertaken in the FE college. All participants were female and had equal amount of experience as Learner Coaches (one year).

7.3 Procedure

The Pastoral Manager had provided the Learner Coaches with the Participation Information Sheet (see Appendix I) before the intervention had taken place in the FE College. This form had explained that phase 3 of the research would involve ‘feedback on these activities and how you, as a teacher, felt the workshops went. We want to know what worked and what didn’t work; and what we need to change’. The focus group was undertaken on 18th July 2014. There was no inconvenience to the Learner Coaches as the research was undertaken during a day set aside to review the pastoral programme. Verbal agreement had been gained from each of the Learner Coaches to audio record the focus group session.

The session started with a briefing to allow the Learner Coaches to be fully informed of the purpose of the focus group research. Learner Coaches then discussed four questions about their perception of the students’ experience of the intervention:

1. What did the students learn?
2. How did the students react?
3. What did the students try following the intervention?
4. What didn’t work for the students?

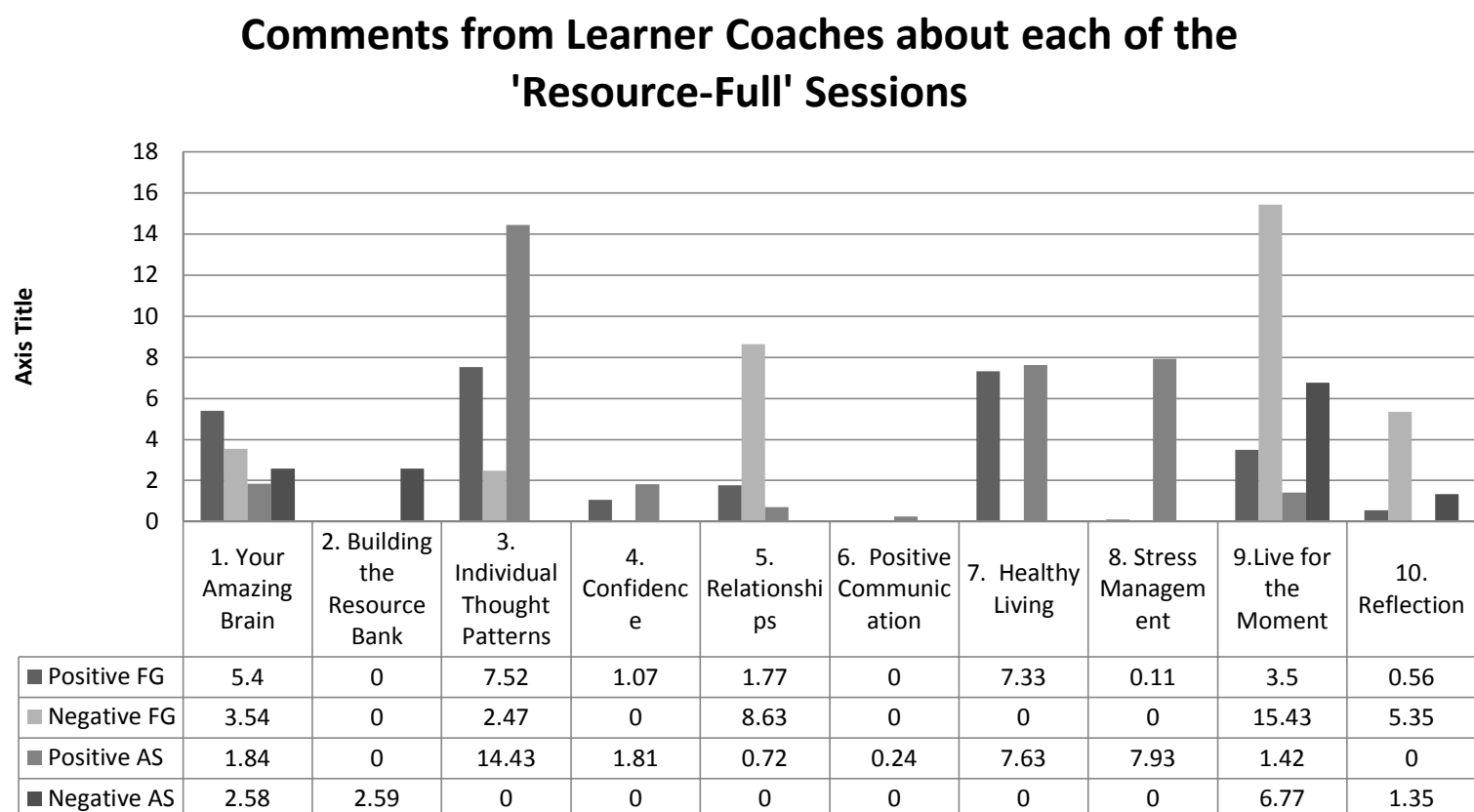
The four questions were then re-focused to gain the personal impact on the Learner Coaches (e.g. ‘What did you learn?’) and structured the session from the Learner Coaches’ perspective. The discussion lasted 35 minutes and was followed by an opportunity for the Learner Coaches to fill in an anonymous survey about the intervention programme (see Appendix R). Having ensured consent all focus group discussions were audio-recorded and transcribed verbatim. The analysis of the focus group followed the same thematic analysis outlined in Chapter Four. However, both the transcript (FG) and the anonymous survey (AS)

were then analysed using NVivo 10. This decision was made as the previous student focus group had been more structured (in terms of discussing challenges and resources) than the format of the Learner Coach focus group. As a number of themes emerged from the discussion the use of NVivo helped to organise the data by coding the text and breaking it down into more manageable chunks. The software was also relatively easy to use as the transcript could be imported easily and coding was able to be undertaken in a straightforward manner on screen. This became a particularly useful tool when investigating whether there were dominant voices within the group. As there were multiple layers of themes emerging from the participants the software allowed for comments to be allocated more than one code. The responses were coded for key themes, such as the 10 'Resource-Full' sessions and other reoccurring themes (see appendix S for nodes). During analysis content was also coded for positive and negative statements.

7.4 Results

In analysing the responses from the Learner Coaches the first task was to decipher which of the sessions had been perceived by them to have been successful in terms of a positive reaction from the students, ease of delivery and having a positive personal impact on the Learner Coaches as individuals. The Figure below summarises the NVivo analysis of the feedback gained for each of the ten 'Resource-Full' Sessions from the focus group (FG) and the anonymous survey (AS):

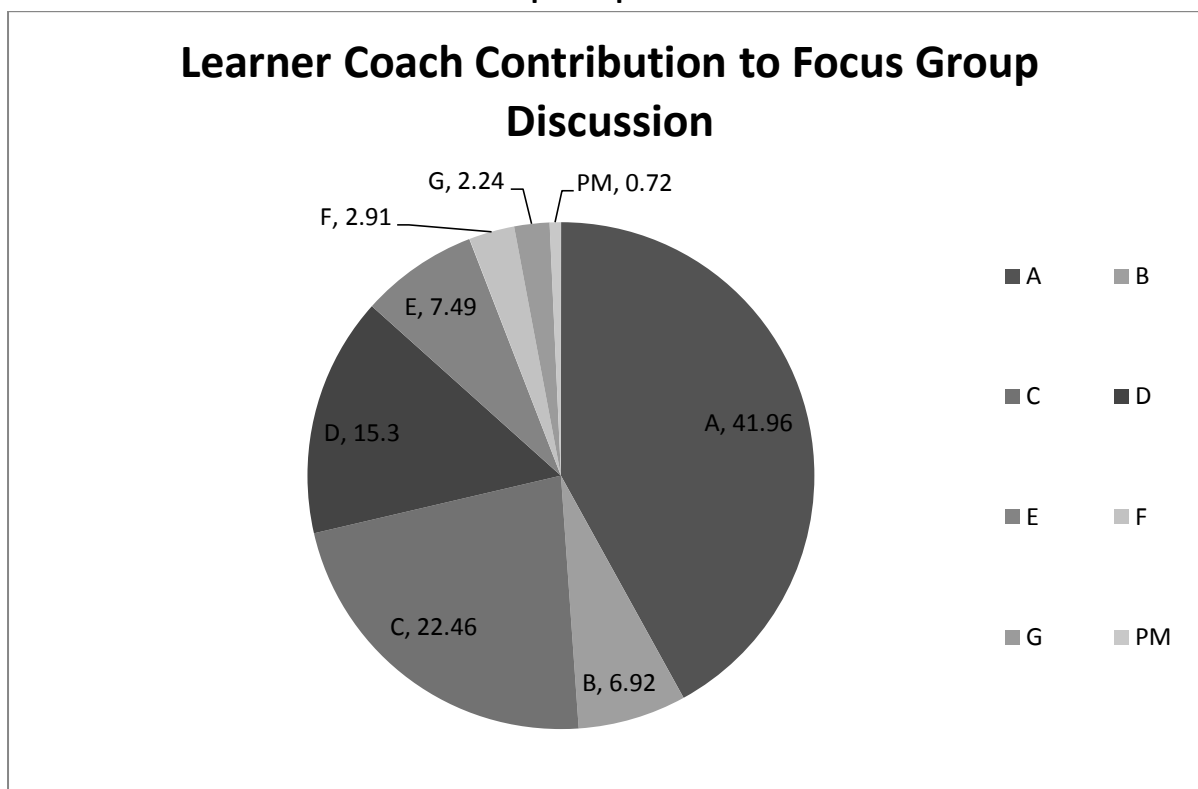
Figure 7.1: Graph to demonstrate the positive and negative perception of the Learner Coaches to each 'Resource-Full' Session
(N.B. FG = Focus Group and AS = Anonymous survey)



The chart highlights a slight difference in response between the focus group discussion and the anonymous survey undertaken by each of the participants. In the focus group discussion six of the sessions (Sessions 1,2, 3, 4,7 and 8) received more positive than negative comments from the Learner Coaches with three sessions (Sessions 5, 9 and 10) receiving the opposite. However, the results of the anonymous survey demonstrate a slightly different trend with a slightly different mix of six sessions receiving positive comments (sessions 3, 4,5,6,7 and 8) and four sessions receiving more negative feedback than positive (sessions 1, 2, 9 and 10).

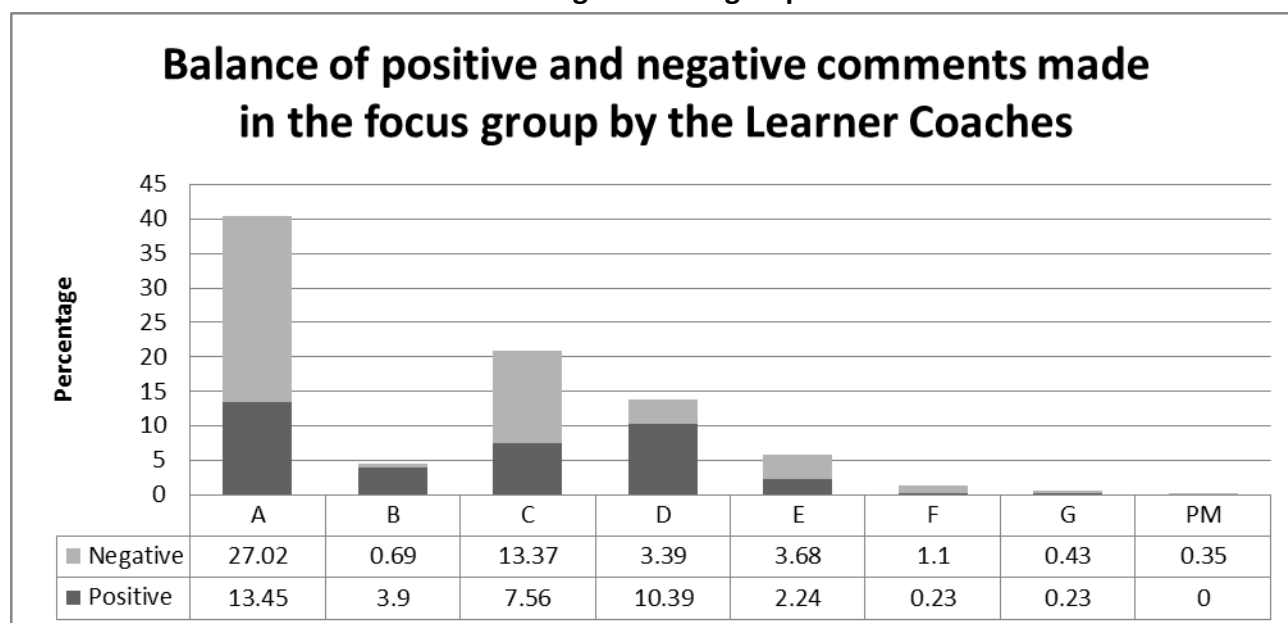
Although the survey produced a smaller amount of comments compared to the focus group it is noteworthy that the findings allowed for all Learner Coaches to have an equal chance of contributing their reactions to the intervention. This becomes particularly valuable considering that a small number of Learner Coaches appeared to dominate the Focus Group discussion. This can be seen by the chart below:

Figure 7.2: Pie chart to demonstrate percentage of contributions from individual participants



With the dominance of Learner Coach A and C, a particular voice developed, and was not strongly challenged by others. Consequently, an overriding viewpoint emerged. The following graph demonstrates the balance of positive and negative comments made by each of the Learner Coaches:

Figure 7.3: Graph to demonstrate the balance of positive and negative comments from the Learner Coaches during the focus group discussion



Unfortunately, the chart clearly demonstrates that the most dominant Learner Coaches (A and C) made more negative comments than positive within the session. This meant that if the focus group transcript was the only data taken into consideration other possible opinions on the success of the intervention may well have been ignored.

7.4.1 Feedback on the intervention sessions

7.4.1.1 Session One - Knowledge of the teenage brain

The unique nature of adolescent development has been a fundamental theme of this thesis.

The literature review undertaken into the ideal content of the 'Resource-Full' intervention pointed strongly towards the focus on the teenage brain. Consequently, the inclusion of a session on the adolescent brain allowed students and staff to gain knowledge about how this stage of development can have an impact on adolescent behaviour. From a positive psychology point of view, it also was intended to educate those taking part about how an

individual can harness this development and ensure it becomes a resource. Although there are still concerns around the existence of ‘neuromyths’ (myths have evolved around the functioning of the brain) in a number of educational interventions (Anasari and Coch, 2006) there has also been a call for a bridge to be built between developmental cognitive neuroscience and educationalists (Anasari and Coch, 2006; Shonkoff, 2000; Fischer, 2009). Eisenhart and DeHann (2005) also suggested that all students within education should be taught directly about neuroscience. Therefore, it was anticipated that the inclusion of a session on the adolescent brain would enable the current research to include teachers and students in the learning process as well as educating a large number of students about the basics of their adolescent brain. This would in turn empower the students with the knowledge to modify their understanding and expectation of their own brains.

Consequently, when asked what the students had learned from the intervention it was reaffirming that the tutors discussed Session One in a predominantly positive manner:

‘They enjoyed the early part about the brain and the Ted talk with the very vivacious American. And they enjoyed the information and the quiz, particularly the students who were doing psychology because they already came with a bit of background, more than a bit really. ... Knowing that stuff about the teenage brain and how the reward system and all that, I think they got a lot out of it.’ - Learner Coach D

From a purely Learner Coach perspective the focus group research also suggested that this session was well received and was beneficial to their own learning:

‘I guess it’s interesting to learn about the difference between the adolescent brain and the adult brain. The teenage brain in particular. That was quite interesting, to know that they need more sleep; they need to have different rewards and that sort of thing. That was new.’ - Learner Coach A

This finding supports the research in this area that knowledge of brain development helps teachers to encourage students to reach their potential (Willis, 2012); be more understanding when students struggle by having a fuller understanding of brain plasticity (Wilson and Conyers, 2014) and to have a fuller understanding of adolescent behaviours (Ansari and Coch, 2006).

However, one aspect of the session, synaptic pruning, raised some negative comments from both the focus group and the anonymous feedback. The PowerPoint for this part of the session described synaptic pruning as:

‘During your adolescence your brain starts to fine tune itself through synaptic pruning. You can think of it a bit like pruning a rose bush; you prune away the weaker branches so that the remaining important branches can grow stronger.’

When asked on the anonymous feedback form what changes the learner coaches would recommend for the programme three of them suggested that they would remove *‘pruning your bush’* from the session. This unfortunate modification of the original source was also alluded to in the focus group when a number of the learner coaches indicated that students reacted to the concept in a suggestive manner. This unintended reaction from the students highlighted the necessity to discuss the resources with the target audience before the pilot intervention had taken place.

7.4.1.2 Session Two - Building the Resource Bank

This thesis has acknowledged the need for wellbeing interventions to encourage adolescents to focus on their strengths and to engage in active goal setting. However, the point has been made that this is a skill that needs to be taught in an effective manner. Steinberg (2014) states that exercises which encourage goal setting should be stimulating, scaffolded and sustained. The inclusion of Covey’s structured handout (2007), that guided

the students through reflecting on their achievements and strengths in order to write a mission statement about their future life, was therefore included to reflect Steinberg's (2014) recommendation. However, this could well have been difficult to achieve in a one-hour session. Therefore, it may not be surprising that one Learner Coach highlighted on the anonymous feedback form that *'the session involving the mission statement was difficult – students found this challenging'*.

However, this session did not feature as part of the focus group discussion. This could suggest that this session was not deemed as either successful or unsuccessful from the viewpoint of the Learner Coaches. However, due to the dominance of the two Learner Coaches, another reason for this session not being discussed could well reflect that the session did not gain a strong reaction from this particular pair.

7.4.1.3 Session Three - Individual Thought Patterns

This session on Individual thought patterns was influenced by all four key concepts/frameworks discussed in Chapter Six. Consequently, it was noteworthy that this session received the most positive comments and was identified as successful by all the Learner Coaches. One activity that was highlighted as being particularly impactful was the envelope task. In this task the students were split into groups of 4-5 and each of them wrote their name on an envelope. Each member of the group wrote a positive characteristic for every other member of the group on separate cards and placed the characteristic in the appropriate envelope. The Learner Coaches felt that this enabled the students to learn *'things they didn't know about themselves'* (Learner Coach A) whilst gaining *'a different outlook from how they perceived themselves'* (Learner Coach B). This development of self-concept is often labelled as Cooley's 1902 theory of the 'looking glass self' (McIntyre, 2006) due to it being determined by the views of others.

This positive result from the intervention reflects previous studies which have highlighted that adolescents are at a stage in their development when they start to become increasingly self-conscious and concerned with other people's opinions (Parker *et al.* 2006; Vartanian, 2000; Rosenberg, 1986). Harter (1987) has also argued that, in late adolescence, peer support is more important in terms of self-esteem than the support of parents.

Furthermore, others have also indicated further that the acceptance from class mates is more powerful than that of close friends (Harter, 1987; Santrock, 1996; Sebastian, Burnett and Blakemore, 2008).

Davey *et al.* (2008) stressed that positive social feedback is increasingly rewarding during adolescence. This is reflected by the reported reaction of the students:

Because some of the feedback that people had done was anonymous, they didn't know who had written it, they were like 'Oh I don't see myself as that'. – Learner Coach A

In one of my groups, there was quite a lot on appearance but in a really positive way. Like somebody said 'you've got really good style' and they were talking about somebody's dress sense and their hair and things so it was really quite positive about it. – Learner Coach C

I loved the envelope lesson – really increased morale in the class. – Learner Coach G

The envelope lesson dramatically altered the mood of the ... group. They are generally very competitive (verging on bitchy!) but this was genuinely an affirmative and confidence raising session. – Anonymous feedback

This exercise allowed the students to engage with positive emotions (Noble and McGrath, 2008), have an awareness of their strengths (Noble and McGrath, 2012) alongside providing an opportunity for social comparison (Abraham and Michie, 2008).

When it came to the anonymous feedback, an unexpected but positive finding was the effect this exercise had on the Learner Coaches themselves. One Learner Coach highlighted

how it made her *'think about the students in a different way'*; whilst another felt that it gave her *'a chance to say positive things about'* her students; and a different Learner Coach felt that the *'session made me realise that I don't praise enough'*. There was evidence that the positive reaction from this session resulted in prompting practice and modelling of positive behaviour from the Learner Coaches (Abraham and Michie, 2008).

7.4.1.4 Session Four - Confidence

The rationale behind including confidence in the intervention was the fact that it was one of the key challenge areas that were identified by the target population at the start of the research. However, although three of the Learner Coaches highlighted this as one of the sessions that worked best on the anonymous feedback forms, this did not feature in the focus group discussion. Again, it is difficult to draw a conclusion as to why this is the case but the perception of the Learner Coaches could well be different to that of the students. For any definite inferences to be drawn as to the success of any of these sessions from a student perspective, a sample of the student participants would need to be included in the evaluation of the programme.

7.4.1.5 Session Five - Relationships

This session received mixed reviews from the Learner Coaches. Although three out of the seven Learner Coaches highlighted this as one of the sessions that they felt worked the best on the anonymous feedback forms within the focus group discussion there were some who felt this was difficult to deliver:

'My students were a bit worrying with relationships. There are a lot of them where they don't quite understand positive relationships with certain people and they take it on a different context; more sexual rather than just a normal relationship... students [were] saying inappropriate things with relationships, but then again some of them are more mature than others.' - Learner Coach A

Another issued raised by a different Learner Coach related to disclosure of personal information of which the Learner Coach was not aware:

'I found with mine when I was doing the relationships with parents, a lot of my students I didn't know were having issues at home with their parents, or they don't live at home. So it was quite a tetchy subject... The reaction wasn't quite what I expected because I didn't know that they were having these things going on at home so for me it was negative because it actually put a dampener on the session. - Learner Coach C

Although it is not clearly stated in the Learner Coach's job description (see Appendix P) tutors are often viewed as a vital personal link with individual students and should be able to keep a regular check on their academic progress and personal circumstances (Davies, 2001). However, Jones and Duckett (2004) state that tutors may be able to provide high standards of academic guidance but they may not automatically be comfortable with supporting learners in resolving personal and social issues. The Learner Coach's experience in this session highlights the complicated nature of relationships and how they can result in negative experiences. However, by focusing on relationships and discussing ways of trying to improve them, it was hoped that the students may start to experience more frequent positive events and emotions (Jacobs Bao, and Lyubomirsky 2014).

Although both these tutors found the discussion around relationships difficult they both gave positive feedback around the second half of the session that focused on the 'Free Hugs' Campaign:

Learner Coach C ‘The Hug campaign was amazing though.’

Learner Coach A ‘Yes they did enjoy the hugs campaign. I personally was a bit reluctant about the hugs campaign because it’s just not where I am. But the students responded really well to it and they said ‘That guy’s amazing’. They were really taken by the guy that did the hugs campaign.’

Bloom and Johnson (2010) have stated that videos such as the ‘Free Hugs Campaign’ enables social revolution due to the strong desire of viewers ‘to be involved, have a voice, and create change’ (p.117). Bloom and Johnson (2010) urge teachers to incorporate the videos such as this into their teaching to enable students to have the opportunity to gain a voice in order to be heard in a new way. Allar, a sociology professor from Philadelphia (Day, 2012), believes that the impact of the campaign can be explained by the fact that society is becoming more isolated in terms of living arrangements and that technology has meant that personal contact has been reduced. She believes the campaign ‘gives us a sense that we belong’ (Day, 2012). The success of this part of the session could also be explained by the fact that all four influencing concepts/frameworks were represented by this activity; students were given an opportunity for social comparison as well as modelling and demonstrating behaviour (Abraham and Michie, 2008). It also presented positive relationships (Noble and McGrath, 2008) alongside empathy (Griffen and Tyrell, 2003; Noble and McGrath, 2012) and social skills (Noble and McGrath, 2012).

7.4.1.6 Session Six - Positive Communication

This session was included in the intervention due to its important links to future employment; an area highlighted as challenging by the target population. However, the session did not feature in the focus group discussion and was only highlighted as a session that worked well by one of the Learner Coaches in the anonymous feedback.

7.4.1.7 Session Seven - Healthy Lifestyle

The sessions that appeared to have stimulated students the most, in actively building their resources, were those around healthy lifestyle and stress management. Both these sessions had been designed to meet Abraham and Michie's call (2008) for prompting practice and modelling behaviour. One Learner Coach had discussed this impact with her students:

'Some of mine tried more sleep, and they did say having an extra hour's sleep helped, that kind of thing. And that's quite easy for them to do, isn't it? That's something really easy they can implement. I think some of them took away from the sleep one, that they weren't actually getting enough sleep. Six hours was leaving them cranky and maybe just taking another hour ...' - Learner Coach A

Learner Coach D explained that one of her students '*showed everyone an app that she had downloaded that helped her to sleep*'. Learner Coach C had had a similar conversation with her students around their increased level of exercise following the session.

Healthy eating was also a key area of discussion due to the impact of the 'Supersize Me' video:

'Some of them were quite horrified by the 'Supersize Me' film. They were talking about how they had takeaways regularly and they were quite seriously, I think, talking about whether they could cut down ... It was amazing. I think they really took, because that was a shortened version, and I think that was quite enough to see it. I think it was long enough to have an impact for the students to want to make a change. It really hit home.' – Learner Coach D

She went on to explain what a challenge it can be for students to eat in a healthy way:

'It was really interesting because quite a few of my students work in McDonalds and KFC and places like that. Part of the perks of the job is getting free takeaways. So some of them were saying 'I've got to eat three or four of them a week to get my money back.' – Learner Coach D

Yet again there was evidence that the content of these sessions had an impact on the Learner Coaches themselves with one of the Learner Coaches stating that she had implemented some lessons in her own life, including adapting her sleep patterns, in the anonymous feedback.

7.4.1.8 Session Eight - Stress Management

Stress had been a clear theme that emerged from all the student focus groups undertaken at the start of this research. However, this session was only mentioned in passing, in a positive manner, during the focus group discussion. Nevertheless, the anonymous feedback forms highlighted this as a positive session and indicated that the session had impacted on their students:

‘The exercises on how to deal with stress was quite beneficial.’

‘Stress management session was useful – important to deliver this in plenty of time for students’ exam preparation.’

Two Learner Coaches even suggested that the programme placed a greater emphasis on this key area.

7.4.1.9 Session Nine - Live for the moment

The session that the Learner Coaches discussed in the most negative way in the focus group discussion was session 9 that focused on the development of flow and mindfulness. Despite the wealth of research that indicates the direct link with flow experiences to enhanced wellbeing in adolescents (Adlai-Gail, 1994; Mayers, 1978; Massimini and Carli, 1988; Hektner and Csikszentmihalyi, 1996; Lefevre, 1988; Carli, Delle Fave and Massimini, 1988; and Nakamura, 1988) the Learner Coaches ‘really struggled with flow’ (Learner Coach A) and felt that the students thought the same:

‘...because they may not yet have experienced it ... so they weren’t really aware and I wasn’t aware of how to convey to them what flow was in their environment.’ - Learner Coach A

This comment could be revealing a lack of the Learner Coaches’ understanding of the concept of flow. This would not be surprising due to the lack of access to the Learner Coaches to offer adequate training in the more complex psychological concepts. The comment also lends itself to the question as to whether our current education system allows for ‘flow’ experiences. Research has indicated that time spent in interactive activities that allow for staff and students to experience flow are between 14% and 11% of the educational experience (Shernoff *et al.*, 2003; Bakker, 2005) with one study finding that students most frequently experienced boredom 45.5% of the time (Clarke and Hawsworth, 1994). Csikszentmihalyi, Rathunde and Whalen (1993) also found that for the majority of adolescents, educational institutions are dull and uninspiring places. In addition, they argued that, due to boredom being so commonplace, most teens consider it a normal part of their development.

It became evident from the focus group that the Learner Coaches themselves may well have low levels of flow experiences:

‘I’d come across the idea of flow but only really in a sports setting. You watch sports and you hear someone saying that they’re in the zone, they’re in the flow. So, only in that respect. But I wouldn’t necessarily think of it in everyday life, but I can understand that from an art perspective, or from a writing perspective it could be useful. But it’s not something that I would have come across personally and so I found it difficult to put it across to some of the students. So, that was difficult. Well for me.’ – Learner Coach A

This finding is notable as Bakker (2005) linked the flow experiences of teachers to the flow experiences of their students. He argued that, due to Emotional Contagion Theory, we would expect that flow experiences of teachers to have a positive influence on their

students, and his study demonstrated this to be true. Consequently, the fact that the students *'really struggled'* with the concept of flow could well have been a reflection of a similar struggle for the Learner Coaches.

The same feeling was expressed by the Learner Coaches in relation to mindfulness, with four out of seven stating in the anonymous feedback that this was particularly difficult to deliver. Although, it has been argued that mindfulness is better suited to youth than adults (Goodman, 2005; Kabat-Zinn, 1990) the Learner Coaches disagreed:

'Mine really struggled with mindfulness but I think it's because they are not emotionally ready to deal with the idea of mindfulness. They don't see it as something they have to do yet. It might be more beneficial later on, maybe at university when they step back and consider it. I think they really struggle with it and didn't take the idea of mindfulness very seriously. They're also so busy as well aren't they? They don't take the time to stop.' – Learner Coach A

'I don't think they were mature enough I think. It would be something that they would later look back on. Once they hit university, they would use more...' – Learner Coach E

The focus group also made it clear that the use of the raisin exercise, based on the work of Kabat-Zinn (2005), was not well received by the students:

- | | |
|-------------------------|--|
| <i>Learner Coach C</i> | <i>'It needs to be approached in a different way. They didn't get it I think. The concept of putting this thing in your hand and rubbing it is wrong.'</i> |
| <i>Learner Coach A</i> | <i>'Again, they weren't mature enough. '</i> |
| <i>Learner Coach C</i> | <i>'Obviously we understand and we try to put it across but they are very immature in that sense.'</i> |
| <i>Pastoral Manager</i> | <i>'They're teenagers. They won't respect what you're saying.'</i> |

This reflects the findings of Zack *et al.* (2014) who found that, for adolescents, mindfulness techniques require modification from adult practices.

Despite the difficulty experienced, the Learner Coaches could see the benefit of keeping the focus on mindfulness but made the valid observation that one session was not enough:

'I think as well, when you're teaching it, it's something that you have to practise often and I don't know whether it might be more appropriate to run it through the programme. I think doing it as a one off is interesting and topical but I'm not sure how many of them would have the maturity to have thought it may be useful to actually accept. Because it is a long term practice.' – Learner Coach D

This is a fair observation with the recommended time for mindfulness training being eight weeks (Williams and Penman, 2011). Research has also indicated that the positive impact of mindfulness training is often only significant when individuals practise it outside of the classroom (Huppert and Johnson, 2010). The focus group did not provide any evidence that their students had tried the techniques following the session. However, maybe it was too early to measure the effects of the group being introduced to mindfulness, due to the time it would take for students to undertake regular practice.

7.4.1.10 Session Ten – Reflection

Chapter Six highlighted the benefits of reflective practice but also acknowledged the demanding nature of the process. The Learner Coaches appreciated the need for the skill but highlighted how challenging this was for their students:

Learner Coach A They just didn't get it. And again, it links in with the mindfulness, because it's actually taking a step back and look at things and reflecting, is not something they felt ...

Researcher Do you think that it's a skill that would be useful for your students to have?

Learner Coach A Definitely.

- Learner Coach D* *It seems like a waste of time. There's so much actual work to get on with rather than sitting around thinking. So thinking is much more of a practice.*
- Learner Coach C* *For them, I think, it was hard because it was short a short period of time, we've got an hour and we have to cram all of this in, you have to think about it, reflect it, and write down, they just went 'Whoa'.*
- Learner Coach A* *They've very rarely evaluated in that sort of way. They're not quite sure what to put down.*

This dialogue highlights a point made by Moon (2004) that it is not advisable to force students to reflect but tutors should aim to create conditions that can induce reflection. She takes this point further by stating that if this is not managed effectively it is a skill that is particularly difficult to develop in educational settings. King and Kitchener (1994) also point to the fact that reflective judgement needs to be developed and it is more effective if it is embedded throughout a curriculum. It could be argued that a ten-week intervention programme may not have been enough to ensure an embedding of this skill. This echoes Hamilton's earlier research (1980) which highlighted the need to supplement all lessons with reflection in order to enhance educational value. Consequently, this may be a skill that needs to be adopted by an educational institution as a whole, rather than introduced in an isolated manner.

7.4.2 Emerging Themes

As well as discussing the individual sessions within 'Resource-Full' the focus group research explored the intervention as a whole. During the NVivo analysis, certain key themes emerged: variety; discussion; time scale; lack of understanding and immaturity.

7.4.2.1 Variety

Chapter Three discussed a number of aspects that research had indicated would lead to a successful wellbeing intervention. Firstly, research suggested that wellbeing interventions

needed to focus on wellbeing in the broader sense, rather than just addressing mental health issues. Although one Learner Coach did suggest that mental health could be added to the intervention, all of them agreed that the ten sessions covered a variety of wellbeing issues:

'I think there was something there for everyone, whether they didn't connect the mindfulness, they connected with something else; the way the mind works, dealing with stress, sleep patterns. Some people from the group felt they could work for hours without getting the recommended hours of sleep. So if they didn't identify with all of it they could take away something. 'Learner Coach B

'Although not all students could identify with all aspects of a unit, they were able to take something away from the programme' Anonymous feedback

Variety was also an important aspect of designing a successful intervention and the Learner Coaches commented on how this helped to engage the students. They particularly enjoyed the use of questionnaires, videos and song lyrics but noted that some of the content was a *'little out of date'* (Learner Coach D). The Learner Coaches also commented on the *'professional'* (Learner Coach B) nature of the tutor file which was *'attractive and well presented'* (Learner Coach E):

'I liked the idea that it was presented as a package. So we had from 1 to 10, then you could see it as a whole. And that was quite nice to see, and to see where next.' - Learner Coach A

7.4.2.2 Opportunity for discussion

Another positive aspect that came out of the focus group was the fact that the intervention had encouraged students to engage in discussions around the themes explored in the sessions:

<i>Researcher</i>	<i>Do you think that that part of the reaction was discussion?</i>
<i>Learner Coach A</i>	<i>I think with the more reflective students it definitely was discussed and again it's raising their game, if you like, so they would discuss it...</i>
<i>Learner Coach D</i>	<i>I think there were some really useful opportunities for students to discuss what worked for them.</i>
<i>Learner Coach A</i>	<i>Yes.</i>
<i>Learner Coach D</i>	<i>They shared that with one another which was very beneficial.</i>

This was seen by the Learner Coaches as a positive response from the students. In fact, one Learner Coach noted that *'some of the PPT could have been more interactive as I felt I was talking a lot when students should have had more space for discussions'*. Research has highlighted a number of benefits of encouraging student discussion within teaching sessions. Brookfield and Preskill (1999) argue that discussion can help students develop self-awareness and critical understanding, appreciate a diverse set of perspectives and provide students with the ability to take action. Other benefits include the development of higher-level cognitive skills (Delaney, 1991; Etchinson, 1988; Ewens, 2000; Gilmore and Schall, 1996; Wade, 1994), students' involvement in their own learning (Cooper, 1995; Leeds, Stull, and Westbrook, 1998) and learning from the contributions of others (Hertenstein, 1991).

7.4.2.3 Timescale

When devising the intervention, research had informed the decision that the programme would be ten weeks long, but the timing of the intervention was also an important consideration. Researchers have found that the best times for interventions are: at key educational points in time, such as at the beginning of an academic year (Cohen *et al.*, 2006; Cohen *et al.*, 2009); during transition periods (Walton and Cohen, 2007, 2011; Wilson and Linville, 1982) or before significant exams (Papay, Murnane, and Willett, 2010). Cook *et al.*

(2011) also found that the earlier an intervention was delivered in the academic year the more it improved the students' grades. They concluded that the timing of the intervention was more important than the frequency. The delays at the college had meant that the programme was delivered in March of the 2014 academic year, rather than the intended January. This was something that the anonymous feedback raised as an issue with the pilot:

The length of the course was adequate. It could have been presented earlier as most of the students would benefit from having lessons on stress well before the exams period.

I felt it should have been earlier in the year – they were too stressed out by fear of exams failure to engage properly by this time.

7.4.2.4 Lack of understanding

It had been hoped that a combination of training alongside the detailed resources, would ensure that the Learner Coaches felt prepared to deliver the intervention programme.

However, when analysing the results of this focus group it became apparent that the absence of an opportunity to train the Learner Coaches had led to a lack of understanding of some of the intervention's content.

Although an agreement had been signed by the college to allow training sessions with the staff only one session was given. This resulted in the Learner Coaches expressing their feelings about being underprepared in the anonymous feedback:

'I felt a bit apprehensive as to what was expected of me and what the outcome should have been. I felt I was not prepared enough to deliver it confidently as I did not have a chance to read it beforehand.'

'I felt quite prepared but in retrospect I could have known more about the issues raised.'

'Felt enthusiastic about the programme, though initially didn't feel adequately prepared. Having run through each session once, felt far better prepared.'

'I felt very enthusiastic about delivering the course although I didn't think I was fully prepared or had enough relevant information to deliver the topics covered in this course.'

'I felt a little on the back foot – mostly because I missed the introduction session when the course was explained.'

Due to the high psychological content in the intervention, Yates and Atkinson (2011) highlighted the need for additional training to ensure that teaching staff develop competencies in specific techniques as well as developing a sound psychological knowledge-base. One tutor highlighted this by stating that *'I think a lot of us didn't know the background knowledge to be able to ad lib freestyle'* (Learner Coach A). This reflects the findings of Bullock and Fertig (2003) who also found that tutors were aware that they were not delivering to high standards and that training was required to help them develop these skills. The UK Resilience programme (Challen *et al.*, 2009) recognised this absolute need for training and ensured that tutors had been through an intensive 8-10-day course before they delivered the intervention. The teachers from the UK undertook the training in their summer holidays in America which illustrated a high level of commitment on their part. However, the researchers noted that, due to this sample, it may be difficult to extrapolate the findings to the wider educational community. In the real-world setting of the current research it would not have been possible to undertake such an intense training programme. However, the results from the focus group confirm that the original plan to maintain greater links with the Learner Coaches in terms of support and training would have been beneficial. Unfortunately, the lack of understanding from the Learner Coaches was also reflected in comments about how the students reacted to elements of the programme:

'I think the term mindfulness, they didn't understand it, but maybe if it was paraphrased as something else, like reflecting or something, they might understand it a little bit more... A couple of students just didn't get it. But I think if they are not the reflective student, they were fine and let it wash over them, but they said 'I don't really get it'. I don't know, you can't make somebody understand and if you don't like wellbeing they were just not interested in it.' - Learner Coach A

'They didn't get it I think.' - Learner Coach C talking about mindfulness

Unfortunately, without having access to the students it is difficult to access their level of understanding from the programme. It had been hoped that the student voice would have partly been gathered by the reflective jigsaw handouts at the end of each session. However, the Learner Coaches had not collected this information from the students. It was also indicated by one of the Learner Coaches that time was restrictive (see comment under 7.4.1.10). This could well have meant that the students did not always complete this reflective exercise.

7.4.2.5 Immaturity

An unexpected theme that emerged from the analysis of the focus group research was that the Learner Coaches viewed their students as *'not mature enough to be able to identify with content'* (anonymous feedback). All but one of the Learner Coaches and the Pastoral Manager made comments that linked to a lack of maturity (see examples above in session nine). In fact, one Learner Coach went as far as recommending that the resources were made *'age appropriate'* on the anonymous feedback form.

This rather negative perception of the students could be seen as an example of a lack of empathy from the Learner Coaches. Research by Bullock and Fertig (2003) investigated the characteristics that distinguished a 'good' tutor. Most tutors questioned believed that empathy with students was an essential attribute. Without this attribute Cooper (2004) argues that the level of empathy demonstrated by the teacher will affect the amount of

empathy demonstrated by students. 'Therefore empathic teachers model and facilitate an empathic ambience for learning and development' (Cooper, 2004, p.12). Cooper (2011) also highlights that alongside empathy classroom management is seen as a highly important skill of successful tutors. It could be argued that in the following examples of immature behaviour by the students a stronger grasp of classroom management could have prevented the comments from affecting the outcome of the sessions.

However, despite this argument, it is also worthwhile to highlight that the Learner Coaches' observation of the immaturity of the students could well be right in theory. In fact, the inclusion of knowledge of the teenage brain was deliberately chosen in the intervention to emphasise this point. Steinberg (2014) argues that in today's society adolescence 'isn't what it used to be' (p.15). He believes that research indicates that this development phase begins and ends much later than it used to and warns that the current view of adolescents could be harmful and outdated. As information on brain development improves through the use of scanning techniques on human subjects, rather than reliance on animal studies (Casey, Jones and Hare, 2008), more is being learnt about the immaturity of the adolescent brain. Studies have demonstrated that logical reasoning abilities in adolescents are not that different from adults (Hale, 1990; Kail, 1997; Keating, 2004; Overton, 1990). However, in contrast it appears to be psychosocial characteristics that show continued development beyond adolescence (Scott, Reppucci, and Woolard, 1995; Steinberg and Cauffman, 1996). Consequently, as the intervention attempted to focus on psychosocial elements, such as relationships, this could explain the 'immature' response from the students that the Learner Coaches observed. Pedlow and Carey (2004) highlighted the importance of considering developmental factors in designing adolescent interventions. Although 'Resource-Full' had

attempted to do this in terms of content, the effectiveness of the intervention could have been increased if the consideration of the possible reactions of students had been contemplated further.

Linked to the theme of immaturity, there was also some discussion in the focus group around the iconography used in the programme that seemed to lead to inappropriate and immature responses from the students. It was suggested by some of the Learner Coaches that the figure below from session one, linked to synaptic pruning, was suggestive:

Figure 7.4 Session one iconography for synaptic pruning



The following figure also evoked inappropriate comments because *'the pig is in front of him. Some students pointed out that might look a bit inappropriate. It looks like he's'* (Learner Coach A):

Figure 7.5 Session one iconography for personal resource bank



Reflecting on their reaction Learner Coach A explained that *'they're (the students) great but what I think we forget is that these are teenagers and they notice one thing and that's it, they're off.'* The figures had been selected to give each session a sense of identity and to provide visual stimulus for the students. However, as noted before, discussing the resources with the target audience before the pilot programme had run would have been beneficial.

7.5 Conclusion

This chapter has demonstrated how the Learner Coaches viewed the success of the intervention from their own viewpoint and that of their students. Despite the concern regarding the lack of access to students the focus group has provided useful feedback on the effectiveness of the intervention programme with some examples of how the sessions impacted on learners. Although the focus group discussion was dominated by two main Learner Coaches which produced a slightly biased negative response, the individual anonymous feedback allowed all Learner Coaches to reflect and this resulted in a mainly positive response (50.34% coverage).

A gratifying result of the intervention has been the impact that the pilot study had on the wellbeing of the Learner Coaches themselves. There was a suggestion that by teaching the intervention the Learner Coaches gained a more positive relationship with their students, alongside building their own resource bank. Consequently, the comments made by the Learner Coaches indicated that the intervention had started to have an impact on their own wellbeing (Roffey, 2012; Axford *et al.*, 2010; Goldstein and Lake, 2000).

It is unfortunate that the same feedback mechanism was not undertaken with the students who had taken part in the intervention. Subsequently, any conclusions about what the

students gained from the programme can only be inferred by the results of the focus group. However, all students undertook the WFESS prior to and after the intervention. Therefore, the following chapter will explore the results gained from this survey.

7.6 Summary

- The session on 'Knowledge of the teenage brain' was overall perceived in a positive manner. The Learner coaches noted that this session had also been beneficial to their own learning.
- Session 2 on building the resource bank was seen as too much to cover in one hour and the Learner Coaches noted that students found this challenging.
- The session on individual thought patterns received the most positive comments from the Learner Coaches. It was reported that the students found the envelope task rewording and that the Learner Coaches saw their students in a different light.
- The session on confidence was not discussed within the focus group. However, three Learner Coaches highlighted this session as one that had worked the best on their anonymous feedback forms.
- The session on relationships received mixed responses. Although three Learner coaches highlighted this as a successful session on their anonymous feedback form, the discussion in the focus group focused on the difficulty that both student and staff had with this session.
- Positive communication received very little attention in both the focus group and the feedback forms.
- Session seven on healthy lifestyle appeared to have stimulated the students the most, according to the learner coaches. This session resulted in the sharing of good

practice among students as well as evidence of trying new techniques away from the classroom.

- It was surprising that the session on stress was not discussed in more detail during this evaluation considering the strong emphasis that had been put on this challenge by students in the previous focus group research. However, this reflects the missing student voice in this evaluation.
- Session nine on flow and mindfulness received the most negative feedback from the Learner Coaches. The suggestion from the Learner Coaches that mindfulness can be termed as reflection could further highlight that the Learner Coaches did not fully understand mindfulness themselves. This highlights the need for specialist training for the successful delivery of the intervention.
- The discussion around reflection in session ten highlighted how difficult the students found this skill. This illustrates the need for this to be a skill that is developed over time rather than specifically for an intervention.
- Some key themes emerged throughout the discussion of each of the sessions. The Learner Coaches emphasised that the variety within the programme was an important aspect that received a positive response. They also noted the benefit of the fact that each of the sessions prompted discussion within the classroom. In terms of negative responses, the Learner Coaches highlighted the need for the intervention to be earlier in the year. They also highlighted that a lack of understanding of the psychological concepts within the programme could well have reduced the effectiveness of the programme. This highlights the need for a bespoke training course to be implemented before the intervention is taught. Finally, a

number of Learner Coaches commented on the immaturity of students in dealing with the themes and iconography within the programme.

Chapter Eight - Results of the 'Resource-Full' Pastoral Intervention

8.1 Introduction

The overall aim of the current research was to enhance the wellbeing of Further Education students. The literature review led to an hypothesis that by providing strategies to enable students to access their resources FE students would be more able to face the challenges they perceived affected their age group, which it was proposed would result in enhanced wellbeing. It was acknowledged that a pastoral intervention programme would not be able to reduce the number or intensity of these challenges but an increase in resources could help to reduce the impact of the challenges on the individual. This would enable the individual to gain a greater sense of balance or equilibrium in terms of their wellbeing.

In order to assess the effectiveness of the 'Resource-Full' pastoral intervention both quantitative and qualitative methods were employed. From a quantitative perspective the 'Wellbeing in Further Education Students Survey' (WFESS) was undertaken by participants prior to and following the ten-week period of the intervention study. A total of 224 participants completed both. The number of participants reflects a problem with the fact that not all students attended both sessions one and ten where the questionnaires were administered. The drop in numbers also reflects the fact that no questionnaires were gathered from 16 of the 41 tutor groups. This analysis was in addition to the focus group qualitative research discussed in Chapter Seven.

8.2 Quantitative analysis

8.2.1 Parametric Vs Non-parametric testing

Statistical analysis of the pre and post results of the WFESS was necessary to determine whether the pastoral intervention had led to an increase in the participants' perceived level of resources. Many researchers have shown a preference for the use of parametric testing

due to the belief that the tests provide evidence of 'real differences' (Coolican, 2009, p.72) in data. However, the use of parametric testing is not always possible in all research situations and Coolican (2009) urges researchers not to feel that the use of non-parametric tests are in any way an inferior approach even 'though many statisticians would make you think so' (p.542) as non-parametric tests are estimated to be 95% as power efficient as parametric testing. There are a number of conditions, or assumptions, that need to be fully considered to ensure that the inferential statistics are appropriate. If the assumptions are violated, then the statistical analysis that is undertaken would be inaccurate and could lead to the wrong conclusions being drawn from the test statics. Consequently, before deciding which type of statistical analysis was to be undertaken on the pastoral intervention data it was important to consider a number of key areas; normality, data type and outliers.

8.2.2 Normality

The first step is to test whether the data set under analysis has a normal distribution of data before deciding between parametric and non-parametric testing. This is critical as parametric statistical tests are based on the assumption of a normal distribution. Graphical and statistical methods were used to evaluate the normality of the data in the three sections of the WFESS.

The histograms and P-Plots for each section seemed to indicate a slight skew of data for each of the sections (see Appendix T). A common way of deciding whether a distribution can be seen as 'normal' is to consider skewness and kurtosis values. Coolican (2009) suggests that if the skewness and kurtosis statistics are greater than twice the value of their respective standard error then the data are skewed.

Table 8.1 Skewness and Kurtosis compared to twice the value of standard error

	T1 "How resourceful I feel" (mean)	T1 "How challenged I feel" (mean)	T1 Impact (Q5-7)	T1 Reaction (Q4, Q8-Q11)
Skewness	-.686	.050	.286	-.267
Std. Error x 2	.318	.318	.318	.318
Kurtosis	.810	-.341	-.241	-.463
Std. Error x 2	.632	.636	.634	.634

By using this formula, the above table would indicate that it is only 'How Resourceful I feel' which has skewed data. However, Field (2013) suggests converting skewness and kurtosis into Z-scores where 1.96 is significant at $p < .05$.

Table 8.2 Z Scores for Skewness and Kurtosis

	T1 "How resourceful I feel" (mean)	T1 "How challenged I feel" (mean)	T1 Impact (Q5-7)	T1 Reaction (Q4, Q8-Q11)
Z Score Skewness	-46.077*	-32.582*	-15.245*	-40.773*
Z Score Kurtosis	-18.45*	-15.376*	-7.788*	-19.832*

*sig at 0.05

This further analysis indicates that all four sections of the WFESS have data that deviates from a normal distribution.

Conversely, Razali and Wah (2011) argue that the Shapiro-Wilk test is 'the most powerful test of normality' (p.21):

Table 8.3 Shapiro-Wilk Test

	T1 "How resourceful I feel" (mean)	T1 "How challenged I feel" (mean)	T1 Impact (Q5-7)	T1 Approach (Q4, Q8-Q11)
Shapiro-Wilk Sig.	0.000	0.482	0.10	0.17

With the Shapiro-Wilk test if the Sig. value is greater than 0.05 then the data are normally distributed. Interestingly the only section of the WFESS that seems to deviate from a normal distribution is 'How resourceful I feel'.

The data analysis into normality has produced a mixed response in terms of whether the data have a normal distribution. Fortunately, Field (2013) argues that as sample sizes increase the assumption of normality matters less. He goes on to state that 'in large samples ... we don't need to worry about normality' (p.184). However, at no point does he state what a large sample is! In fact, in his own blog (Fields 2012) he admits that 'the question of how large is large enough is a complex issue'. Therefore, with a sample size of 244, it could be argued that the assumption of normality would not take the lead on deciding what statistical analysis is most appropriate.

8.2.3 Data type

The WFESS was designed specifically for the current research. The first section of the survey assessed the participants' subjective view of how resourceful and challenged they felt across the ten life areas derived from the first focus group study with the target population. This question was seen as the main outcome measure of the research as it determined each participant's subjective view of their level of resources. Participants responded to the question on a 1-10 scale. The familiarity with numbers could lead us to assume that this was an interval scale. However, the intervals along the scale are not necessarily equal. The data are not true interval data because the difference between a rating and 1 and 2 is not necessarily the same as the difference between 2 and 3. As the response is subjective it is also difficult to compare the responses of participants. A participant scoring an 8 in resourcefulness is not necessarily twice as resourced as a participant scoring a 4.

Wright (1976) coined the term Plastic Interval Scale for this kind of data as the intervals between units are numerically equal but they are not in reality the same size. Coolican (2009) highlights that many psychological measures fall into this category and advises that data gathered on an unstandardised, devised measure of human judgement, such as the WFESS, would be best treated as ordinal data. This leads to the first indication that non-parametric testing is going to be most appropriate for this data set as parametric tests are used on interval and ratio data.

8.2.4 Outliers

A final aspect of the data set that needs to be considered is the possible presence of outliers (data that deviates from the rest of the data set). Not only can outliers have an impact on mean scores, maybe more significantly, they have an effect on the sum of squared error. This is computed by looking at the deviance from the mean for each score, which is then squared. The sum of these squared deviances produces the sum of squared error. This is important to consider when analysing a data set as the Sum of Squares is used to compute standard deviation and standard error. Therefore, if bias exists with the Sum of Squares, due to an outlier, there will be bias within these calculations. As parametric statistics are also based on the Sum of Squares there is the potential for any analysis to be biased by the presence of outliers.

The use of graphs can make it easier to identify the presence of outliers. The histograms alluded to the presence of outliers but this is much easier to see via the use of box plots (see pages 210 onwards).

In summary the discussions so far have pointed to the fact that the dataset for the current research:

- Has issues with normality;
- Contains ordinal data;
- Has evidence of outliers.

As more than one of the assumptions has been violated the possibility of using parametric statistics in a useful manner has been reduced. Therefore, it would be appropriate to analyse the data using non-parametric tests. This method of testing reduces the impact of outliers by ranking the data. However, a limitation of this method is that we may lose some information about the extent of differences between scores. Also, because the procedures are nonparametric, it can become more difficult to make quantitative statements about the difference between populations due to a lack of parameters.

8.2.5 Internal Reliability

Section A of the survey is made up of ten life areas that participants are asked to rate in terms of how resourced and challenged they feel. The life areas are separate entities and are not intended to link in any way. Consequently, there was no need to investigate the internal reliability of that section. However, as discussed in Chapter Five, two sections of the survey (Impact and Approach) had been based upon existing measures. However, due to the length of the original SDQ and PCI only what were deemed the most relevant questions were selected for inclusion in the WFESS. Consequently, a Cronbach's alpha analysis was undertaken on both sections.

8.2.5.1 Impact

Cronbach's Alpha analysis of the Impact section revealed the most internally reliable version of the measurement is with the following item removed: 'How important is it for you to deal with these life areas?' With the 'importance' item included in analysis, internal consistency was lower (alpha :0.660) compared to an internal consistency above the acceptable cut off

alpha level (Kline, 1993,2000) at alpha 0.744 without the 'importance' item. This result was not entirely surprising as the 'importance' item was the only question taken from the original PCI, rather than the SDQ. Consequently, it can be concluded that this item does not contribute to the measurement of impact of challenge as measured by the other items.

8.2.5.2 Strategy

Due to the discovery that the 'importance' question reduced the internal validity of the Impact section it was decided to undertake the Cronbach Alpha analysis with this question added to the Strategy section. This revealed the most internally reliable version of the measurement was with the 'importance' scale added which resulted in an internal consistency slightly closer to the acceptable cut off alpha level at alpha 0.694 compared to the section without with that item (alpha:0.686). As the 'importance' item was included in the original PCI, it can be concluded that this scale is more relevant to the measurement of the strategies that participants take. As discussed in Chapter Five, another question (Support) had been added to this section due to a reoccurring theme in the focus group research. Analysis showed that the addition of the support scale, not included in the original PCI, did not weaken the internal validity of the WFESS survey. In fact, if the Support question had been removed from the approach measure the alpha score would have decreased to 0.666.

8.2.6 Nonparametric testing of the WFESS

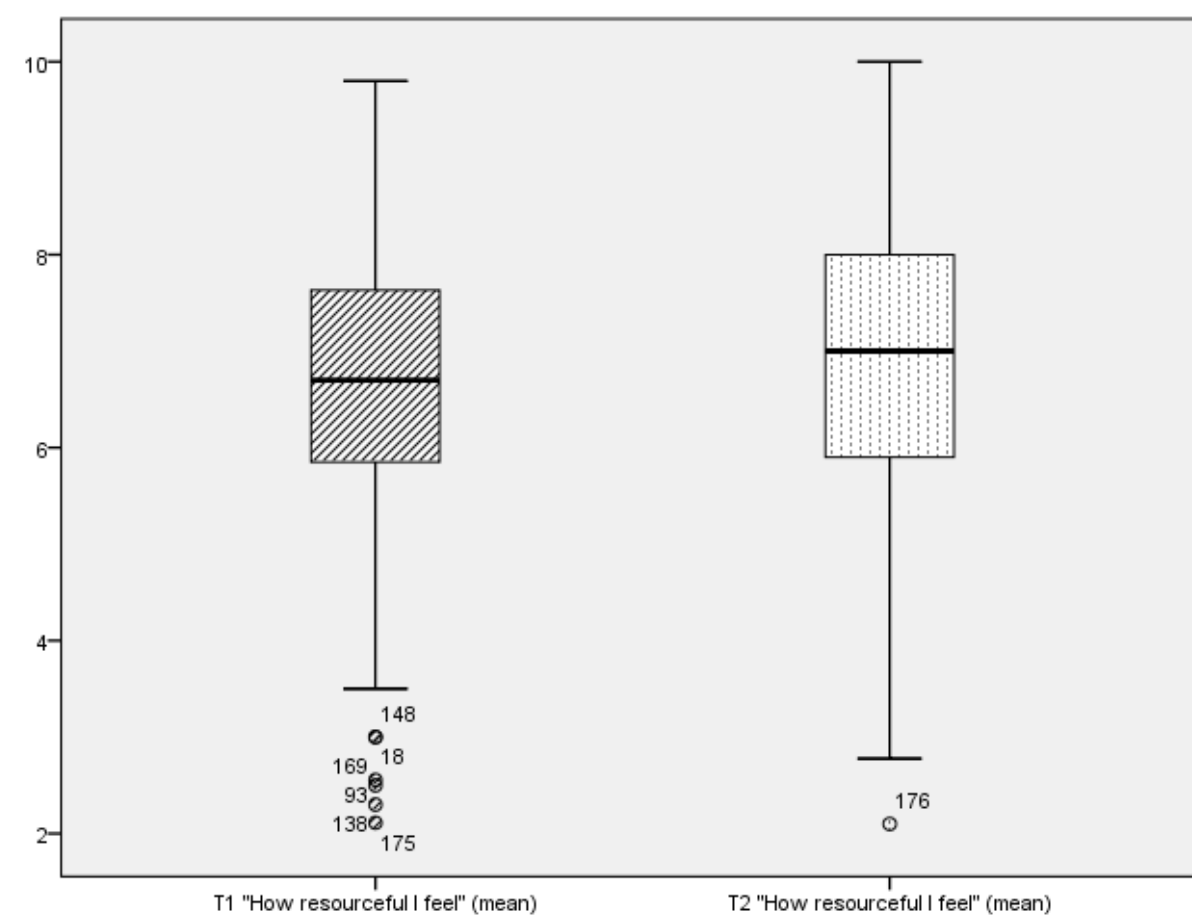
In summary, the cautious decision to use non-parametric testing was undertaken due to the lack of interval data, issues with normality testing and the presence of outliers. This ruled out a factorial design thus the participants needed to be considered using a repeated measures analysis, in this instance, the Wilcoxon Sign Test. This test was chosen as it is a

non-parametric statistic that tests the difference between two repeated measurements from a single sample.

8.2.6.1 'How resourceful I feel'

Figure 8.1 shows a visual summary of the difference between the Time One – pre intervention (T1) and Time Two - post-intervention (T2) data.

Figure 8.1 'How resourceful I feel'



The above box-plot shows that there was an increase in the perception of how resourceful the participants felt after the ten-week intervention that started at the end of March 2014.

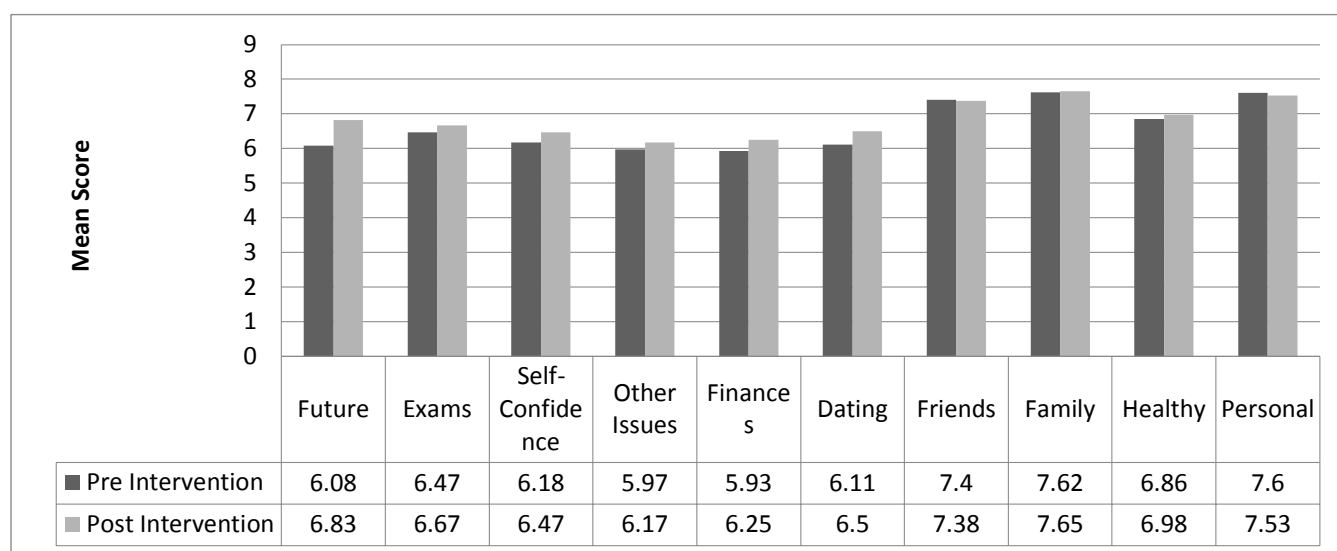
The perception of feeling resourced was higher after the intervention (Mdn = 7) than before the intervention (Mdn = 6.7). The results revealed a statistically significant increase in the perception of feeling resourced following the intervention programme, $z = -2.662$, $p = 0.008$, with a small effect size ($r = 0.122$). Consequently, it can be argued from this analysis that the participants perceived themselves to feel more resourced following the intervention.

This result is in line with what would be expected if the intervention was successful.

However, it is still imperative to consider the level of challenges experienced by the participants as, according to the model of wellbeing (Dodge *et al.*, 2012) a change in level of challenge could affect how resourceful an individual would feel.

Analysis of these data by Life Area showed an increase in all areas apart from Friends (which features a minor 0.02 decrease) and personal safety (a 0.07 decrease) following the intervention. (Although it is customary to use the median when analysing ordinal data in these data sets the medians remained unchanged between T1 and T2 thus it is not a sensitive enough measure to demonstrate the direction of difference).

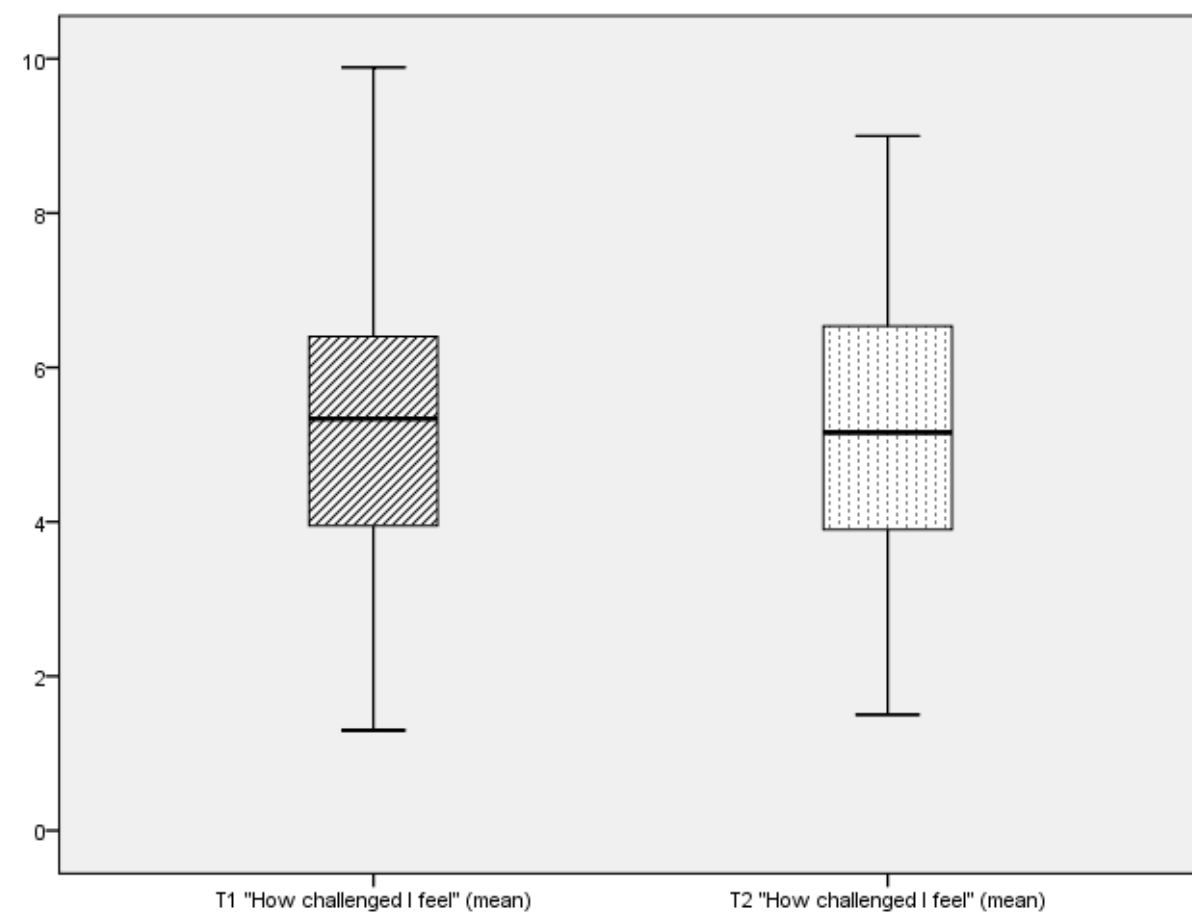
Figure 8.2 Resources score over time



One reason for this pattern could be that the intervention sessions did not specifically focus on these key areas.

8.2.6.2 'How challenged I feel'

Figure 8.3 'How challenged I feel' over time

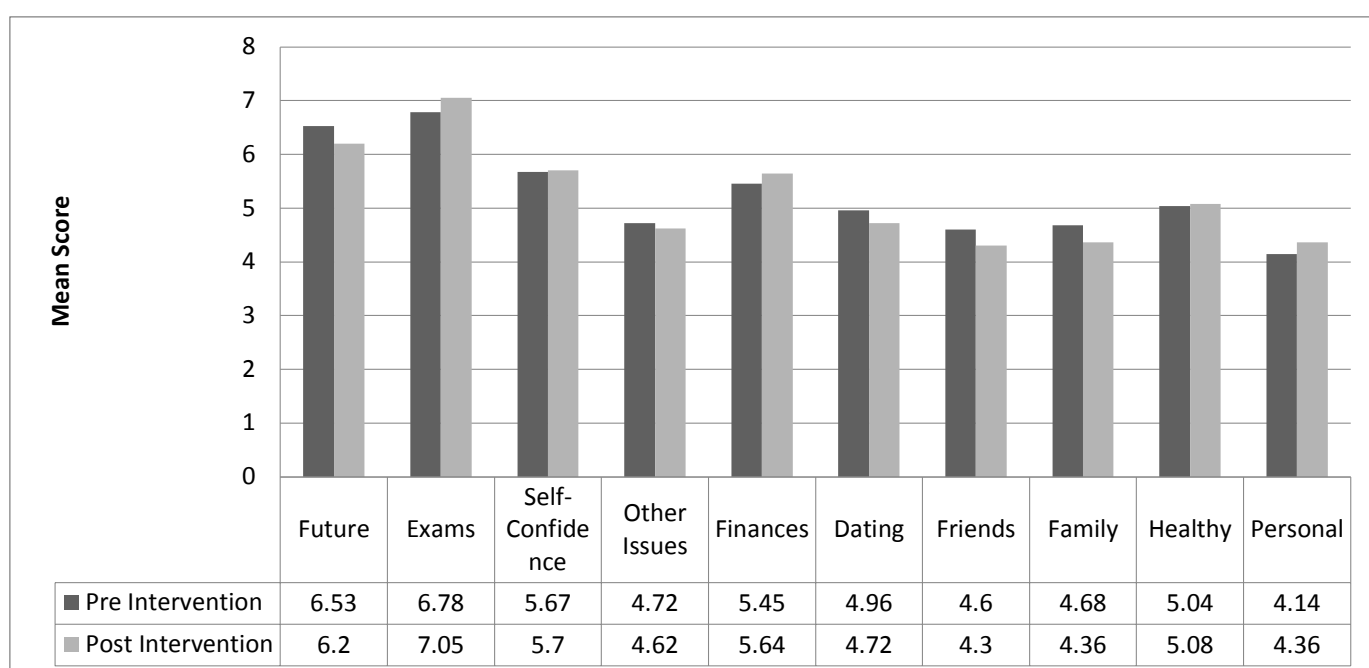


In the above figure is evident that the participants were reporting no real change after the intervention in their perception of how challenged they feel. This is reflected in the difference in median scores; there is a minimal decrease in the feeling of being challenged after the intervention (Mdn T1: 5.33; Mdn T2: 5.155). However, this difference in scores was not statistically significant ($z = -0.176$, $p = 0.86$, with no effect size ($r = 0.008$)). Therefore,

this analysis suggests that there was no significant change at T2 in the perception of how challenged the participants felt by the ten life areas assessed by the survey. This suggests that it was not a change in level of challenge that produced the change in the resource score.

When looking at the responses to the different challenge areas a mixed pattern emerges :

Figure 8.4 Mean scores for challenges

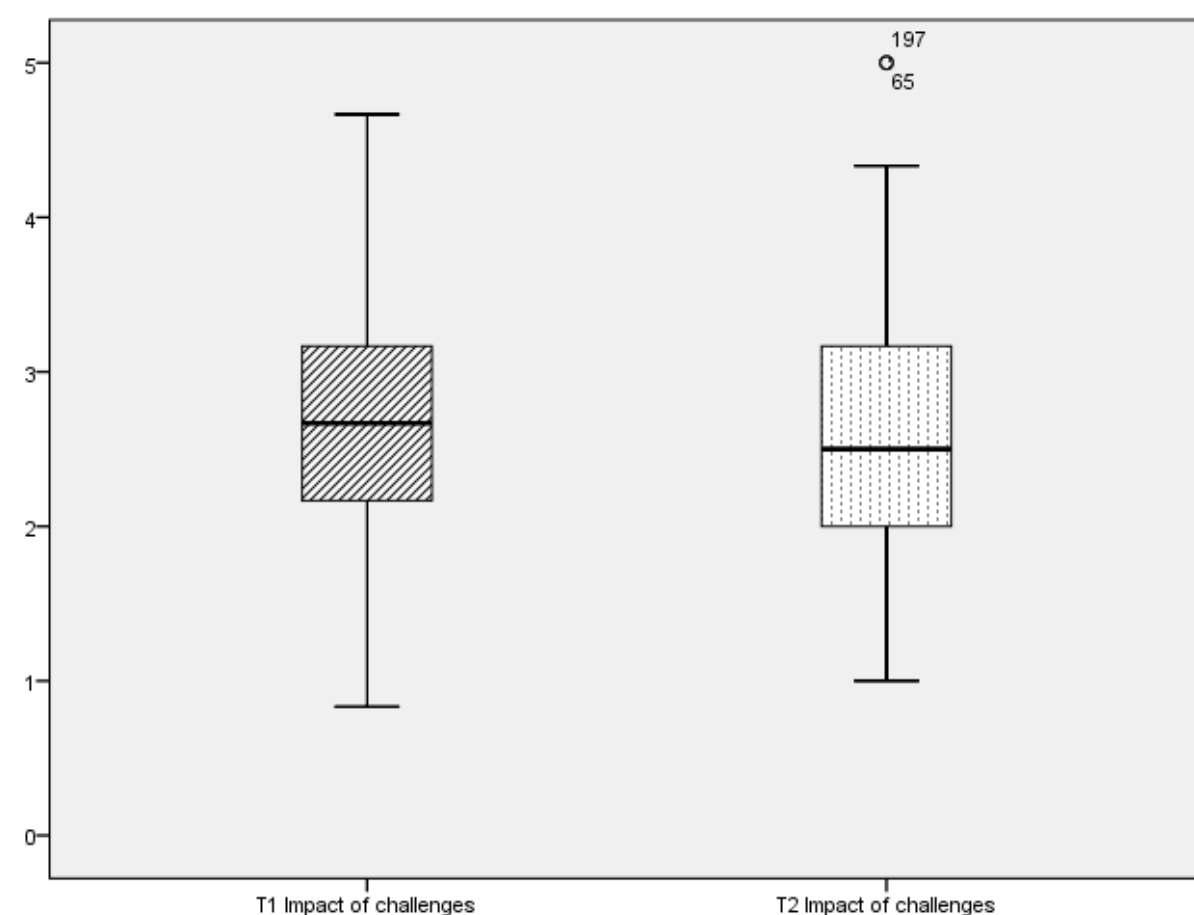


The graph demonstrates that five of the life areas have decreased in terms of challenge with five demonstrating an increase. However, the Life Area with the biggest increase was exams, reflecting the timing of the second data collection point when examinations were due to be held.

8.2.6.3 Impact of challenges

For the impact of the challenges the participants appear to have reported a slight decrease after the intervention:

Figure 8.5 Impact of challenges over time



A Wilcoxon Signed Rank Test also revealed a statistically significant decrease in the impact that the challenges were having on the participants following the intervention programme ($z = -2.630$, $p = 0.009$, with a small effect size of $r = 0.124$). Consequently, it can be argued from this analysis that participants perceived less impact on their daily life from the challenges they were facing following the intervention.

As there are a number of separate items that contribute towards the overall score for impact of challenges, it is useful to look at the difference in scores between T1 and T2 for each:

Table 8.4: Items on the Impact of challenges scale over time

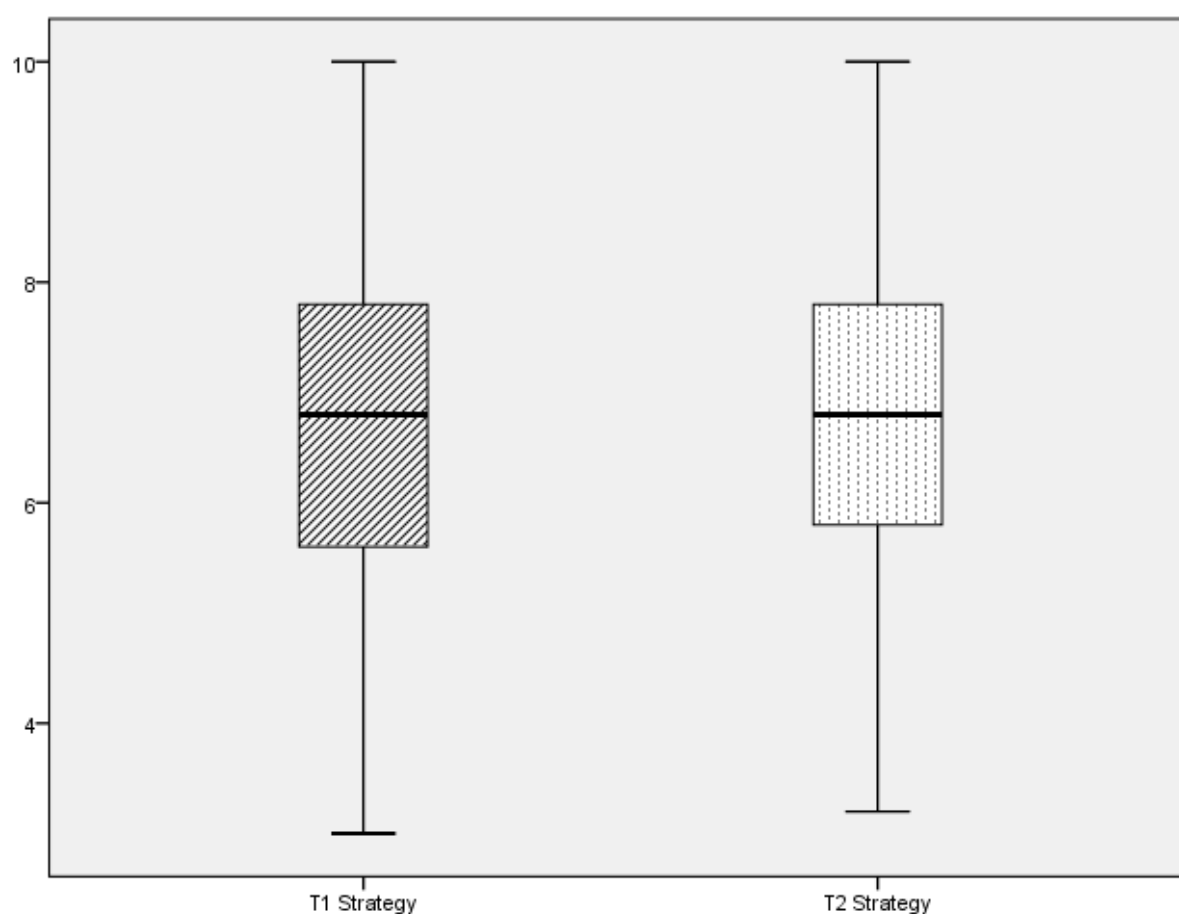
Impact of challenge Scale	Means		Medians	
	T1	T2	T1	T2
How long have these been challenging?	3.66	3.32	4.00	4.00
How much do these worry/distress you?	2.92	2.87	3.00	3.00
How much do these interfere with your home life?	2.37	2.28	2.00	2.00
How much do these interfere with your friendships?	2.29	2.21	2.00	2.00
How much do these interfere with your learning?	2.95	2.83	3.00	3.00
How much do these interfere with leisure activities?	2.20	2.18	2.00	2.00

It is usually conventional to apply the median when analysing ordinal data, in these data sets the medians remained unchanged between T1 and T2 thus it was not seen as a sensitive enough measure to demonstrate the direction of difference. However, the above table indicates that there has been a mean decrease in reported impact on all the individual items following the intervention. The greatest change was shown in responses to the item ‘On average how long have these life areas been challenging?’. This may well be a result of the intervention focusing on more positive thought patterns. Research has demonstrated that depression may well result in the perception of individuals that time is passing more slowly (Bschor *et al.*, 2004; Kuhs *et al.*, 1991; Tysk, 1984; Gil and Droit-Volet, 2009). Consequently, it could be argued that an increase in positive thinking would result in time passing more quickly. It can be concluded from these descriptive statistics that the intervention led to participants perceiving less of an impact on their daily lives from the challenges they faced.

8.2.6.4 Strategy

Finally, there appears to be little difference in the strategies the participants have to help them with the challenges they face. The median scores demonstrate no change and the difference in scores was not statistically significant ($z = -0.416$, $p = 0.678$, with no effect size ($r = 0.009$)). Therefore, this analysis suggests that there was no difference between T1 and T2 in the strategies the participants have to deal with the challenges they faced.

Figure 8.6 Boxplot for Strategy Scores



However, when this is analysed on an individual item basis no clear pattern:

Table 8.5: Strategies over time

Strategies Scale	Mean T1	Mean T2
How important is it for you to deal with these life areas?	7.6	7.42
How likely is it that you will deal these life areas?	6.35	6.30
How much control do you have in dealing with these life areas?	6.24	6.42
How committed are you to solving these life areas?	7.08	6.83
How much support do you have to deal with these life areas?	6.31	6.68

(For median scores please see appendix U)

The table above indicates that the participants experienced an increase in terms of control and support

8.3 Conclusion

The analysis undertaken in this chapter has highlighted a significant change in the participants with an increased perception of feeling resourced following the intervention. Consequently, the hypothesis of increasing the resources of FE students in order for them to face the challenges they perceived affected their age group is closer to being accepted. In turn it is proposed that this would result in enhanced wellbeing.

8.4 Summary

- The aim of the 'Resource-Full' pastoral intervention was to increase participants' perceived levels of resources as the model suggests that would decrease the impact of the challenges faced by FE students.
- The descriptive and inferential statistics indicate that the participants did indeed experience an increase in their perceived levels of resources.

- The analysis also indicates that the participants experienced less impact on their daily lives from the challenges they faced. However, the picture is less clear when it comes to the strategies that participants employ to face challenges in their lives.
- The overall analysis of the strategy section of the WFESS revealed no change,.

Chapter nine – Discussion

9.1 Introduction

This chapter will synthesise the findings from each stage of the research presented in the previous chapters, highlighting the unique contribution of the work, implications for theory and practice, as well as limitations of the research and future directions. The chapter will start by looking at the main purpose of the research – the pastoral intervention – by considering the positive results and unpicking the possible mechanisms behind them. It will then move on to discuss the development of the WFESS that was applied to assess the effectiveness of the intervention, before exploring the definition of wellbeing that informed both the intervention and the measure. The chapter will then explore the strengths and limitations of undertaking research in a real world setting before exploring the practical implications of the research and possible directions for future research.

The key aim of the research was to develop and evaluate a pastoral intervention programme to enhance wellbeing in Further Education (FE) students. In order to fulfil this aim the research followed four distinct research stages:

- The development of a theoretical definition of wellbeing;
- The development of a measure of wellbeing;
- The development of a ten-week pastoral intervention programme;
- The evaluation of the effectiveness of the programme.

Prior to these development stages, the lack of a shared definition of the concept of wellbeing had become evident, and the initial task of developing a new definition was viewed as a critical first step. Silverman (2006) describes the ‘partisan researcher’ as a

radical researcher who seeks evidence for practice, and it could be argued that this describes researcher positionality at the start of this research project. Indeed, a paper outlining the newly developed definition arising out of this research was accepted for publication in 2012. Whilst this was an encouraging outcome, it is important to consider that there was always a danger that the achievement might affect the ability to retain a critically analytical lens through which to view the definition as the research progressed. Silverman (2012) cautions against bringing too many preconceptions to the research arena. Taking this on board, discussions with the supervisory team were key to sustaining criticality, and the definition remained the topic of continued critically analytical debate as the research progressed. It was essential for the researcher and supervision team to facilitate genuine reflexivity as the research progressed, in order to take account of how publication of the paper might influence 'the collection, selection and interpretation of data' (Finlay, 2002, p.531).

Consideration was also taken of the researcher's prior experience as a teacher and pastoral manager. This experience was at the heart of the motivation and passion with which this research project was developed, and made a major contribution to the comprehensive and enthusiastic approach with which the research process was undertaken. However, such experience and enthusiasm can also be the source of subjectivity and potential bias on the part of the researcher, so a consistent engagement with reflexive processes became crucial in allowing for an examination of positionality and how this might have shaped the research process (Roulston and Shelton, 2015).

9.2 Review of findings

This section will consider in turn each aspect of the findings from this study starting with the data from the questionnaire.

9.2.1 WFESS Findings

Chapter Eight explored the findings of the WFESS using both descriptive and inferential statistics. The participants demonstrated a significant increase in the perception of feeling resourced following the ten-week intervention programme. Although participants did not show a significant decrease in the perception of feeling challenged, they did demonstrate a significant decrease in the impact that the challenges were having on them. This result could well suggest that the increase in the feeling of being resourced demonstrated an ability to cope with the challenges that they were experiencing. This clearly links back to the proposed model of wellbeing (Dodge *et al.*, 2012).

9.2.2 Learner Coach Focus Group

In order to set the above findings in context it is useful to consider how the intervention was viewed by those who were responsible for delivering it; the Learner Coaches. Aspects of the programme (such as individual thought patterns and healthy living) received a higher level of positive responses, compared to other areas (such as living for the moment and reflection).

Away from discussing individual sessions some key themes emerged about the effectiveness of the programme. The Learner Coaches felt that the variety of the programme ensured that students were engaged as *'there was something there for everyone'* (Learner Coach B). This had been a key consideration when designing the programme as the literature review had placed great emphasis on variety being a factor in the success of interventions. The Learner Coaches also highlighted how the programme had stimulated discussion between students which allowed them to feel part of the sessions alongside developing higher level cognitive skills. One unexpected positive outcome was the reported impact that delivering the programme had on the Learner Coaches themselves. This observed increase in their

own wellbeing has important implications for future use of interventions in education.

Briner and Dewberry (2007) found that increased teacher wellbeing leads to increased value added scores of students and an increase in job stimulation and enjoyment.

From a negative standpoint, the focus group revealed that the timing of the programme should be reconsidered. Although this was something out of the control of the research, again this reflected the findings of the literature review around successful interventions.

The Learner Coaches also reflected on their lack of understanding with certain psychological concepts within the programme, highlighting the need for further training of staff before an intervention is delivered. This links to the last theme that emerged; the immaturity of the students. Further piloting of the resources, alongside helping the staff delivering the programme to pre-empt some of the comments would have been beneficial in the research.

The analysis of the positive and negative comments from the Learner Coaches revealed a potential bias in the results of the focus group. This was further highlighted by a difference in the response to the anonymous survey. This could be because of the potential of peer pressure within the focus group alongside the presence of the pastoral manager. It could be concluded that the addition of the anonymous survey allowed the Learner Coaches to be more candid in their response.

From a reflexivity viewpoint the Learner Coach focus group highlights different issue regarding the previous experience of the researcher at the FE institution. Chapter Six has outlined how the change in employment was seen as ethically judicious. However, it is important not to underestimate how the background of the researcher may well have affected both the Learner Coaches as participants and the analysis of the data gathered.

As previously explained, all the Learner Coaches were new to their role. None of them had worked directly with the researcher on pastoral issues when she was the pastoral manager at the college. However, due to her previous position there may well have been an element of soft coercion for the college to sign up to the project. As the new pastoral manager had signed the college agreement (see appendix O) the Learner Coaches themselves had no choice but to be involved in the research.

After the researcher had left the institution the college had changed the way that pastoral sessions were delivered. Previously, under the guidance of the researcher, tutors, all of which were also qualified teachers, had delivered the pastoral programme to students. The new structure of using Learner Coaches for this delivery was an undisputable departure from what had happened previously. Knowing that the Learner Coaches were not required to have a teaching qualification could well have affected the way the researcher approached them in the first training session. It is also possible that the Learner Coaches might have felt reluctant to suggest improvements or changes to the programme initially because the researcher, as the former pastoral manager at the college, had clearly invested time and effort in developing the resource.

During the focus group research the session itself felt a little slow to get started. Goffman (1967) introduced the concept of 'face' in research in natural settings. Despite the initial training session with the Learner Coaches there seemed to be some uncertainty about how to behave at the outset. This continued until the more dominant Learner Coaches took the lead and may have been due to a fear from the Learner Coaches of being judged by a more experienced educationalist. As the rapport was built with the group more of the Learner

Coaches started to contribute to the discussion. This also resulted in some honest feedback being gathered via the anonymous survey.

When undertaking the analysis of the focus group data it is highly likely that as an experienced and qualified teacher, the researcher's professional status affected her opinion of the capabilities of the Learner Coaches. The researcher's opinion of the Learner Coaches might also have been affected by the significant changes to the structure of the pastoral programme.

A number of the comments made about the immaturity of the students too easily led the researcher to believe that the Learner Coaches lacked classroom management techniques. This was likely to be an assumption based on the researcher's prior experience as a school teacher and pastoral manager. Such assumptions might have affected the lens through which the data were viewed, which might sometimes have meant that whilst analysing the focus group data the researcher questioned the delivery of the programme rather than the content of the intervention, in terms of its effectiveness.

9.2.3 The Development of the WFESS

The development of a measure of wellbeing in this research enabled the pastoral intervention to be evaluated. Without this measure the research would have only been able to analyse the focus group with the Learner Coaches that presents a potentially one-sided view of the intervention. The four stage approach to the development of the survey allowed for important aspects of the measure to be considered. Stage one of the survey revealed that it was not appropriate to ask students to respond to only some of the life areas that had been established in the previous focus group research with FE students. The pilot also established the need to rename some of the life areas alongside adding an extra life area of

dating/personal relationships as it was felt that the two previous relationship categories were too broad.

Stage two allowed for two validity measures (stress and happiness) to be included in the survey. The results of this stage revealed that overall as the level of impact of challenges increases, individuals experience higher levels of stress and lower levels of happiness. These results were in line with the prediction of how the measure should work. However, a negative aspect of including the validity measures, alongside the decision at stage three to ask students to respond to all the ten life areas, was the fact that the survey became too long. This caused concerns around fatigue effects and consequently led to the removal of the validity measures at stage three.

Stage three of the survey development enabled data to be analysed for all life areas for each participant. However, feedback from staff and participants was that the survey remained too long. Consequently, the final stage of development (stage four) saw a shortened version of the survey that was only two sides of A4. It was also decided that the survey had not allowed for participants to reflect on how resourced they felt. Therefore, an extra question was added to Section A ('How resourced I feel') to more fully reflect the model of wellbeing the questionnaire was based on.

9.3 Developing a pastoral intervention for enhancing wellbeing

The overarching purpose of this research was to develop an effective pastoral intervention that enhanced the wellbeing of FE students and the results gained in this study indicate that this was achieved. The literature review undertaken for Chapter Three explored the benefits of interventions within education to enhance the wellbeing of students. The review highlighted the need for the intervention to be skill-based for this age group as students in

FE are in a vulnerable period of development; at greater risk of mental health problems and at an age where wellbeing is in a state of flux. When developing the content of the intervention, a number of key frameworks were used as a theoretical foundation to ensure the efficiency of the intervention; Human Givens Theory (Griffen and Tyrell, 2003); Noble and McGrath's PEP framework (2008) and Abraham and Michie's taxonomy of behaviour change (2008).

9.3.1 Focus on resources

As previously discussed, the intervention focused on encouraging the awareness and development of a personal resource bank in order for students to combat the challenges they face in their lives. The content of the intervention introduced students to strategies to maximise their own personal resource bank. Hobfoll *et al.* (2003) explain that personal resources are aspects of the self that are linked to levels of resilience that allow individuals to have a sense of control over their environment. A number of research studies have shown that the accumulation of resources can lead to enhanced wellbeing (Chen *et al.*, 2001; Pierce *et al.*, 1989; Scheier and Carver, 1992; Kuykendall and Tay, 2015). This can be explained by a number of different mechanisms. Some research has highlighted that this occurs because individuals who possess these resources seem to engage in more effective coping strategies (Fontaine *et al.*, 1993; Scheier *et al.*, 1986; Snyder *et al.*, 1991) whilst Cummins *et al.* (2005) believe that resources strengthen an individual's defence against negative experiences. There is also evidence that the increase in personal resources can lead to a lasting enhancement of wellbeing. Garland *et al.* (2010) proposed a bi-directional nature of the relationship between resources and wellbeing. They believe that a focus on developing resources can lead to a self-perpetuating system that continues to underpin the development of further resources and long lasting wellbeing. This could be explained by

the fact that once resources are obtained people are motivated to protect them (Hobfoll, 2002).

However, there has been criticism that interventions that focus on the individual's personal ability to control their wellbeing are providing a sticking plaster policy that ignores the impact of current political decisions that affect the economy in which people exist (Furedi, 2008). Although, the impact of economic decisions is beyond the reach of this research there is a danger that too much emphasis has been placed on the individual to take control of their own wellbeing. It would be naive to believe that external variables, beyond the intervention, would not have had an impact on the students involved in the research. However, it is possible that the apparent increase in students feeling more resourced following the intervention could result in increased positive emotions that could protect wellbeing by 'undoing the effects of negative emotions' (Kuykendall and Tay, 2015, p.5). Furthermore, Sen (1980) believes that equality in what people are able to do is a more valuable measure of wellbeing than equality of rights and welfare. This capability approach focuses on the potential within an individual rather than outcomes. Although intuitively appealing as an approach, questions can be raised as to how potential can be measured (Gasper, 2007). The intervention itself encouraged students to fulfil their potential by developing personal resources but the research has no evidence to suggest that students engaged with these activities beyond the classroom. However, the whole premise of the programme was to introduce students to the idea that they had all had resources they could use to tackle life's challenges. The participants demonstrated an increase in the perception of how resourced they felt, suggesting that the intervention programme did indeed raise

this awareness. Consequently, any further engagement with these ideas away from the programme could only help to boost this perception further.

9.3.2 Theoretical frameworks

The use of the theoretical frameworks to inform the content of the intervention was intended to ensure that the research followed a systematic approach. Each of the frameworks was used to understand the factors that might have influenced the predicted change in wellbeing of the students. Further analysis of the successful aspects of the intervention could help to inform the research as to which of the potential behaviour change techniques and modes of delivery were effective. However, without a detailed understanding of the student experience of the intervention, this analysis was not possible.

A criticism of using the frameworks could also be that too much was attempted within the intervention. This resulted in sessions that were very content driven:

‘Some of the lessons ran over and in total took longer to deliver than I thought.’ – Anonymous feedback

‘There was rather a lot of materials to deliver in the time available.’ – Anonymous feedback

Also, the reason behind the content was not shared with the Learner Coaches who delivered the intervention. This could have added to the lack of understanding experienced by some of the delivery team:

‘I felt a bit apprehensive as to what was expected of me and what the outcome should have been.’ – Anonymous feedback

9.4 Limitations

9.4.1 Access

One of the greatest limitations of the study was the access to the sample. The change in employment of the researcher, although pragmatic, meant that the research moved from

an insider project (conducted by a teacher) to a joint project (conducted by a researcher within an educational setting). Trist (1976) stresses the contention that access in real world research only becomes possible when some kind of service is offered. The fact that the college was able to access a free ten-week programme for students may well have been the main motivation for agreeing for the research to take place.

Although the change of employment was advantageous in ethical terms it became much harder to have direct access to the student participants. This unfortunately meant that the students becoming 'passive recipients' (Blank *et al.* 2009, p.72) of the intervention as a number of aspects of the research, such as lesson observations and focus group research with the students, did not take place. This also resulted in an absence of understanding of the impact of the programme from a student perspective which goes against the key theme of the thesis that the research should reflect the student voice. Without the feedback from the students, following the intervention, the results do not provide a full picture of the true impact of the intervention upon the participants.

9.4.2 Fidelity of implementation

Schanzenbach (2012) makes a very valid point that in educational research:

it is possible that a program, like a medical treatment, could be effective if implemented properly but is not effective on average when it is implemented in practice (p.220).

The delays in the delivery of the programme, discussed in Chapter Six, affected the planned once weekly delivery which meant that in reality the Learner Coaches delivered more than one session a week. The delivery of the sessions also varied between Learner Coaches and not all of them were able to finish the delivery of the course. The change in the planned delivery schedule may well have prevented the students from reflecting on what they had

learned within each session as well as not having the 'opportunity to convert the positive activities they are learning into habits' (Sin and Lyubomirsky, 2009, p.483).

Bywater and Sharpes (2012) make it clear that programme developers should have a framework in place to provide professional development, 'such as onsite observation and provision of objective feedback on delivery and skills, and ongoing training or supervision' (p.401). Although this had been planned, it had been possible to provide only one training session with the Learner Coaches before they delivered the intervention. Chapter Seven has highlighted the fact that this resulted in the Learner Coaches feeling under prepared and lacking in confidence. In their meta-analysis of wellbeing programmes in secondary schools Blank *et al.* (2009) found that no papers focused directly on the involvement of teachers, but several had some element of this within their research. The meta-analysis highlighted that teacher involvement tended to be in the delivery of the programme but it was often unclear whether there had been an element of teacher training for the programme. They concluded that 'the lack of focus on their training and preparation may result in poorer outcomes than could otherwise be achieved' (p.71). This criticism can be easily applied to the current research and reflects Bywater and Sharpes' (2012) conclusion that:

choosing a programme 'that works' is not enough to guarantee success; implementing the programme with fidelity takes time and resources, but is necessary to achieve the desired, proven outcomes (p.404).

Another possible inconsistency in the delivery by the Learner Coaches, discussed in Chapters Three, Six and Seven, was their attitude towards presenting the programme. Analysis of positive and negative attitudes within the focus group research demonstrated that all the Learner Coaches had some negative comments to make about the programme. These could well have impacted on the effectiveness of the delivery of the intervention programme.

Indeed, Wilkins (2008) concluded that teachers' beliefs and attitudes have more impact on their delivery than their level of content knowledge. Consequently, even if the planned extended training had taken place the attitude of the Learner Coach could well have had more effect on the delivery of the intervention than the understanding of the programme as a whole. However, the addition of a training programme would have given the Learner Coaches the opportunity to feedback about the programme before delivering it to the students. This could have resulted in a more positive attitude towards the delivery.

All of these points could suggest that the current intervention may not be a good candidate for widespread adoption in the real world, even if its impacts would be large with ideal implementation. Issues raised by the Learner Coaches, with regards to the resources would need to be addressed, alongside a much greater level of training to ensure that presenters of the intervention had a full knowledge of the content that they had the responsibility to deliver.

9.4.3 Duration of study

Although ideally the long-term impact of the intervention should be assessed, it was only practical to investigate short-term measures, via the WFESS, in the anticipation that it would be an indication of longer-term outcomes. However, this would only be the case if the WFESS was a good predictor of long-term outcomes – something that the current research was unable to establish in the time frame.

Another factor that was not considered in the research is that the evaluation of the intervention may only have uncovered partial equilibrium effects on both the students and the Learner Coaches. Schanzenbach (2012) explains that once participants have had a chance to optimise their behaviour in light of the intervention, the impact of results can be

quite different. Therefore, the results that were gathered may not show the full effect due to the time scale of when the data was gathered. This reflects research that has also indicated that the positive impact of training is often only significant when individuals practise it outside of the classroom (Huppert and Johnson, 2010). Unfortunately, the timescale of the research did not allow for this testing at a later date. However, it could be supposed that if the students reflected on what they had learnt from the programme, and started to apply the strategies in their own lives, the positive change in feeling resourced could well improve further.

9.5 Overall Strengths of the research

Despite the limitations discussed, there are several strengths of this body of research worth acknowledging. Firstly, this large scale study within a FE institution allowed for the enhancement of wellbeing to be explored in an ecologically valid setting. Chapter Three underlined that FE is an under-researched area of education in general, but more so in the area of wellbeing. This is despite the fact that adolescence is an especially vulnerable period of development and that research has indicated that learners in FE learners are statistically more likely to experience poor wellbeing (LSIS, 2009). Consequently, the current research addressed this gap in empirical evidence by designing an intervention specifically for this age group.

In order to explore whether wellbeing could be enhanced, a mixed methods approach was utilised which allowed the application of relevant research methodology to achieving the aims and objectives set out at the start of the research. For example, where the WFESS provided restricted data for quantitative analyses, some of the findings were further explored using qualitative data collection and analysis techniques which complemented the existing findings. This ensured that central variables related specifically to the delivery and

experience of the intervention, were not overlooked. Plano Clark and Ivankova (2016) also believe that integrating both quantitative and qualitative methods may help researchers achieve more complete and justifiable conclusions. This is because different methods have different strengths and weaknesses so by combining methods ‘the limitations of one method can be offset by the strengths of the other method’ (Cresswell and Clark, 2011, p.8).

Although it was regrettable that the voice of the students was not captured at the end of the research, the fact that the measure of wellbeing and the contents of the intervention were strongly influenced by the view of students from the phase one focus group, ensured age-appropriate research. This answers concerns raised by a number of researchers that previous wellbeing research had not taken the views of young people into account (Fattore *et al.*, 2007; Axford, 2008; Watson *et al.* 2012). Although the participants of the intervention had no input into the design of the intervention, the content was greatly influenced by their peers. However, whilst student voice was absent from the evaluation of the intervention, an unintended but positive outcome has been the information regarding personal tutoring and how the intervention should be used. By focusing so strongly on this, the research was able to gather valuable data analysis that may have been missed if access to the students had been possible.

9.6 Developing a measure of wellbeing

The positive results from the intervention were only possible to measure because the research incorporated a measure of wellbeing before and after the intervention. However, before exploring the effectiveness of this measure it is important to explore the reasoning behind its development. Gray (2013) states that any research methodology is influenced by whether the researcher believes that there is an ‘objective truth’ (p.34) to measure or whether concept under investigation cannot be measured. The literature review

undertaken before the research took place placed a great emphasis on the fact that wellbeing exists as a concept which consequently means that it can be measured.

9.6.1 Can wellbeing be measured?

A key theme still remains surrounding the questions of the possibility of measuring and enhancing wellbeing. The WFESS was designed to measure the impact of the intervention study on the wellbeing of FE students. The survey was undertaken by 224 participants before and after the 'Resource-full' intervention. The results demonstrate a statistically significant increase in the perception of feeling resourced following the intervention programme. This was coupled with a statistically significant decrease in the impact that the challenges were having on the participants following the intervention programme. This is noteworthy as the T2 measure was taken just before the start of the examination season when students may tend to feel more challenged. This would suggest that the programme was able to help students build the strategies to use their resources effectively to meet the stronger sense of challenge at this difficult time.

However, it is important to note that the results of the WFESS can only stand true if there is agreement that wellbeing is indeed the 'balance point between an individual's resource pool and the challenges faced'. As this definition is only a theory it could be argued that there is not enough evidence from the current research that the concept of wellbeing has truly been measured, or that it has been enhanced through the intervention. However, before evaluating the theory in more detail, it is worth considering the results from the research. The participants demonstrated an increase in the perception of feeling resourced. Irrespective of the validity of the proposed model of wellbeing, it could be argued that an increase in this perception could only have a positive effect on an individual's wellbeing by

enabling the individual to feel more able to face the challenges they experience. In fact, it is almost impossible to argue this in the opposite way.

9.6.2 The stages of survey development

The development of the WFESS has been fully discussed in Chapter Five. However, there is a need to consider whether the decisions made in this process enabled the questionnaire to have construct validity; did the questionnaire actually measure wellbeing as a construct?

As previously discussed the questionnaire consisted of three sections: Self-assessment of level of resources and challenge; Impact of challenges and Strategies for challenges. In order to assess the overall validity of the measure it is beneficial to evaluate each of the sections in turn.

9.6.2.1 Self-assessment

In order to reflect the proposed model of wellbeing (Dodge *et al.*, 2012) the first section of the new questionnaire was designed to gain a subjective measure of how resourced and challenged the participants felt they were in each of the ten life areas identified by the student focus group. This decision aimed to ensure that the research allowed for the fact that there are important differences between individuals (Robeyns 2003) and permitted the research to reflect an individual's account of their own wellbeing.

The results of this section of the questionnaire were fundamental to measuring the outcome of the intervention programme. Results demonstrated a significant increase in the perception of participants feeling resourced following the intervention. However, analysis of the challenges aspect of the model implied that there was no difference in their perception of how challenged they felt by the ten life areas after the intervention had taken place. This consequently indicated that it was not a change in level of challenge that

produced the change in the resource score, which in turn could point towards the intervention as being the catalyst of change.

However, other factors may account for this change in response. The results from this section of the survey could well have been open to social desirability bias; the tendency for respondents to present a favourable view of themselves (Johnson and Fendrich, 2005). This may happen due to self-deception, where the participant believes the information that they report, or through conforming to what they believe to be a socially accepted value to avoid criticism or to gain approval from others (King and Brunner, 2000).

To assess the level of social desirability responding (SDR) psychologists have developed scales to detect this within self-report research. A criticism of the WFESS is that it did not feature a SDR scale. An example where a SDR was applied in wellbeing research can be seen in the work of Carstensen and Cone (1983). They raised the need for assessing social desirability in wellbeing research when they reported strong correlations between two measures of wellbeing and the Edwards Social Desirability Scale (Edwards, 1957). This led to a conclusion that wellbeing measures were purely measuring a participant's 'tendency to present him/herself in a favourable light' (p.714). In response to these claims McCrae (1986) presented opposing data and concluded that 'wellbeing measures are not contaminated by social desirability responding' (p.391-2). This view is echoed by Diener (1994) who stated that 'current social desirability scales do not... tap personality content which is actually related to SWB' (p.114).

In a review of over 14,000 questionnaire-based studies between 2004 and 2005 listed on the CINAHL database, Van De Mortel (2008) found that only 0.2% used a Social Desirability scale. Out of these studies it was found that respondents were most likely to be affected by

social desirability bias if the self-report questions related to their level of competence or socially sensitive issues. In terms of the current research it could be argued that asking an individual to assess how resourceful they feel could link to a perception of personal competence. However, the life areas were intended to be generic enough that they would not been seen as socially sensitive issues.

Due to the different opinions surrounding the use of SDR scales Diener (1994) suggested an alternative way of assessing the effects of social desirability. He proposed that half the data could be collected in anonymous or quasi-anonymous group settings and the other half in face-to-face interviews. This would have been a useful way to validate the results of the survey and could have been considered as part of the methodology. However, due to the issues faced with accessibility to the sample this proved to be impossible.

Another factor that needs to be considered for this section of the survey, is whether the participants fully understood the wording of the question. In developing the survey, it proved more difficult to devise the wording of the question related to resources compared to the question for challenges. This could be due to the fact that the perception of feeling challenged is much more common than a feeling of being resourced. This was reflected by a response of one of the Learner Coaches who stated that:

'I found the question we had at the beginning they didn't understand that at all. And to be honest I didn't either so if I couldn't get I don't know how they would either ... they just did not get it. So trying to explain it took longer than actually taking the questionnaire.' - Learner Coach C

Although a pilot had been undertaken to try to ensure that the questionnaire could be understood by the students, this issue could be viewed as a weakness of this section of the questionnaire. However, even with the possible ambiguity of the wording of the question it

is essential to remember that the intervention was not about giving the students the resources they needed to face the challenges in life, as they were already intrinsic to the students. The programme was devised to give the students strategies to access their own resources. Therefore, after completing the programme the participants should have had a better understanding of how to use these strategies to feel more resourced. Indeed, this section of the survey demonstrated that the programme had been successful as the participants demonstrated an increased perception of feeling more resourced. When returning to the question of whether the questionnaire had construct validity it would be hard to argue that an increased perception of feeling resourced could not be linked to enhanced wellbeing due to the positive nature of the conscious response to the programme.

9.6.2.2 Impact of challenges

As outlined in Chapter Five this section of the survey was influenced by the Strengths and Difficulties Questionnaire (SDQ, Goodman, 1997). Despite a wide range of justifications for using the SDQ as a basis for measurement it has to be accepted that at the time of developing the WFESS the SDQ had not been applied to the assessment of wellbeing in previous research. However, more recent research has seen the expanded use of the SDQ as a means of assessing interventions including a parenting programme in Glasgow - Triple P (Marryat *et al.*, 2014), as well as the University of Glasgow applying it in the evaluation of population level interventions designed to improve the wellbeing of children (SEED project – Henderson *et al.*, 2014). The Office of National Statistics (2014) has also considered the use of the measure for the wellbeing of children. Conversely, the consideration by ONS to use the measure is on the basis that they want to assess the percentage of children with mental health disorders. Although a credible reason, this does not fit with the purpose of the

research in viewing wellbeing as a broader concept that can be used for all young people – not just those with mental health issues. It is also important to consider that the SDQ scale was not used in its entirety. Questions were selected from the original measure and the wordings of the questions were adjusted to suit the needs of the research.

9.6.2.3 Strategies for dealing with challenges

As outlined in Chapter Five, this final section of the survey was influenced by the Personal Concerns Inventory (PCI, Cox and Klinger, 2002). The PCI was developed to assess the motivation to change in people with addictive behaviours. Although the current research was not looking at motivation in a clinical setting the motivation to attain everyday life goals has been associated with higher levels of wellbeing in the general population (Emmons and Diener, 1986). Succeeding or failing to achieve one's goals has crucial consequences for an individual's wellbeing (Ryan, 2012) so if concrete plans, or strategies, are in place it is more likely that a goal is going to be attained (Emmons, 1999).

As with the SDQ, the PCI was not used in its entirety within the WFESS, which could be a potential problem with the use of the scale within this research. The PCI was already an abridged version of the Motivational Structure Questionnaire (SDQ, Klinger, Cox and Blount, 1995). However, there is support for the questions that were selected to be included in the WFESS. Cox and Klinger (2004) noted that in non-clinical samples the most stable scales from the PCI were commitment, joy and chances of success. These questions were selected for use in the WFESS, apart from the joy scale as happiness was measured via the Oxford Happiness Scale in the pilot of the survey. These scales appear to be positively related to adaptive motivation which has also been found to be positively related to wellbeing

(Schroer, Fuhrmann and de Jong-Meyer, 2004). Further research has indicated that adaptive motivation is also measured by scales that identify the perceived achievability of importance and control over goals (Cox, Pothos and Hosier, 2007; Fadardi, 2003; Fadardi and Cox, 2002; Hosier, 2002; Hosier and Cox, 2002). Importance and control questions were also included in the WFESS.

9.6.2.4 The WFESS as a whole

Although there is evidence to support the structure of the WFESS, consideration should be given to whether the survey as a whole is able to measure the concept of wellbeing. This is imperative as Flavin *et al.* (2011) warns researchers not to attribute 'explanatory power' to surveys 'beyond what they represent' (p.253). Before the measure was developed Chapter Five raised the question of whether wellbeing, as a concept, could in fact be measured. Although the review of literature indicated a strong feeling towards the acceptance of the ability to measure wellbeing, it is still important to note that wellbeing measurement could still be seen as 'an emerging science' (Huppert *et al.*, 2009, p.305). Therefore, as researchers we are still learning about the best way to undertake the measurement of the concept.

It has also been argued, that wellbeing is a dynamic concept. Therefore, levels of wellbeing are naturally open to change. Due to the contingent nature of wellbeing the WFESS could only ever aim to measure the wellbeing of that individual at that point in time. Therefore, the WFESS could never be seen as a consistent measure of an individual's wellbeing. This could be seen as comparable to measuring a 'state' rather than a 'trait', where a 'state' is unlikely to be fixed. Neither could the measure be seen as a tool that produces predictive

validity. It is also important to consider that the repetition of the measure within the research could well account for the positive change in behaviour rather than the effectiveness of the intervention programme.

There could also be criticism of the fact that the survey was completely reliant on the self-report from the students. The issue of social desirability within the survey has already been discussed but it is also necessary to highlight that self-report data may only assess the cognitive response of the participants. Research has indicated that this may yield an incomplete picture as the response may be influenced by denial which could result in an adaptive or distorted view (Diener, 1994; Scott, 2012). However, as the concept is sensitive to both cultural and individual interpretation it could be argued that wellbeing is nearly impossible to measure in any other way than self-report.

A final point to consider with the WFESS survey as a whole is whether its purpose was appropriate. Analysis of the results from the survey were undertaken on a sample basis to determine the success of the 'Resource-Full' intervention programme. It could be argued that it would have been more appropriate to analyse the results of the survey on an individual basis. This could have led to the identification of wellbeing issues specific to each student which could have enabled the development of a personalised programme. Sin and Lyubomirsky (2009) state that their meta-analysis indicated that individual therapy was most effective at enhancing wellbeing. However, they state that group-administered positive psychology interventions (PPIs) were more successful than self-administered PPIs. The purpose of this research was to evaluate an intervention programme that could be applied in an educational setting. Due to the number of students within FE settings, and the lack of psychological experience and knowledge of the staff involved in supporting the

students, it could be concluded that the group approach was far more practical. Also, for future applications of the research the use of a whole-cohort approach is far more practical in educational settings rather than bespoke individualised programmes.

9.7 The theoretical definition of wellbeing

This thesis has already highlighted a number of problems with undertaking wellbeing research. As a concept, wellbeing is inherently ambiguous (Gasper 2009) which leads to it meaning different things to different people (Scott, 2012). Arneat's (1958) philosophy states that because we are human, we are all the same, however 'nobody is ever the same as anyone else who ever lived, lives or will live' (p.7-8). This highlights an underlying problem within psychology that the results gained from any research may only be, at best, generalisable to the group that was studied. This also raised concerns about proposing a new definition of wellbeing that could be applied to a wide population.

The need for a definition of wellbeing to be established before it was possible for the concept to become the basis for an intervention has been a key theme of the thesis.

However, very early on in the current study it became apparent that there was a lack of appropriate and usable definitions within wellbeing research. Too many definitions focused on dimensions of the concept rather than clear, workable definitions. Therefore, the thesis proposed a new theory of wellbeing that considered the dynamic interaction of resources and challenges.

Scott (2012) makes it clear that any theory of wellbeing needs to consider the assumptions it makes about human nature and what it suggests. The theoretical background of the Dodge *et al.* model (2012) points to the idea that individuals have:

- a need for balance/equilibrium;

- the power to change their level of wellbeing;
- a sense of control over their wellbeing (Bircher, 2005).

Following on from these assumptions the definition proposes that resources will strengthen an individual's defence against challenges (Cummins *et al.* 2005). Based on these assumptions it was also anticipated that the definition would encompass a number of strengths: simplicity, universal application, optimism and basis for measurement.

9.7.1 Simplicity

One problem that has been previously discussed is that the preceding research that influenced the new definition of wellbeing had been rather complex and difficult to follow at first glance. Due to the fact that wellbeing has become a term used by the lay person, one of the aims of the definition was to communicate what wellbeing is, in a clear and effective manner. It was hoped that the simple pictorial definition, that encompassed the easily recognised image of a see-saw, would ensure that the concept of wellbeing was easily understood by the participants involved at each of the research stages.

In the first phase of the research (student focus groups) each of the four sessions ended with a discussion around the proposed definition of wellbeing. A number of the responses pointed towards the fact that the simplicity of the definition aided understanding:

'Yeah I think it could work because most of the things we've looked at, like mental health and things, fit under either one of the challenges or resources, which makes it easier to explain.' - (Mitch)

'It definitely works because so many other ideas, but literally in everyone's life at some point you will be facing that sort of thing. I mean looking at it in that way it is true – it is basically that see-saw.' - (Joshua)

However, a criticism of the methodology was that the definition along with the idea of simplicity was not revisited at the end of the research. Discussion of the definition should have featured in the final phase of the research (the focus group with the Learner Coaches).

Despite the time restriction of the session being one hour it would have been beneficial to refocus on the simplicity of the definition. This was especially important as the first session of the intervention had introduced the definition as a basis for the programme.

9.7.2 Universal Application

Chapter Two proposed that the definition could ‘be applied to all individuals regardless of age, culture and gender.’ It was also envisaged that the definition could be applied in a number of different research contexts. The definition was published in the paper ‘The Challenge of Defining Wellbeing’ (Dodge *et al.*, 2012). As of 16th December 2015 the paper has received 126 citations (Google Scholar, 2015). It has been encouraging to see that in terms of universality the citations cover a number of different research applications as well as research from a number of different countries (see appendix V). However, it is necessary to note that a large number of the citations do not quote the definition. Instead they focus on other key arguments made within the paper (e.g. the need for a definition, the difficulty of defining the concept etc.).

In terms of application the definition has been used directly as a basis for measuring wellbeing in a number of research papers (Spiers, 2015; Wilckens and Hall, 2015; Duran *et al.* 2015; Wosinski *et al.* 2015; Director of Public Health, 2015; Gibson, 2015; Ray-Sannerud *et al.*, 2015; Castel. *et al.*, 2015; Townshend *et al.*, 2014; Golparvar and Abedini, 2014; Lemma *et al.*, 2014; Yaremtchuk, 2014; Hlatshwayo, 2014; La Placa, and Knight, 2014; Low, 2014; Lyman and Luthar, 2014; Radcliffe, 2013; Bakara *et al.*, 2013). Unfortunately, none of the papers discuss the effectiveness of the definition as a basis for their research. This fact could weaken the use of the definition within the current research as it is important to have a widespread discussion of new theories in order to determine whether they are useful (Bircher, 2005). The reaction to the definition reflects Robson’s (1995) view that if theories

‘strike the right chord; [they] seem almost to be accepted because they’ve been stated’ (p.432). Therefore, the level of citations could well be demonstrating a universal appeal opposed to a universal application.

9.7.3 Optimism

The optimistic view of the definition was that the application of the model would allow individuals to act as ‘decision makers’ of their own wellbeing (Seligman, 2002b). This links to Hobfoll’s belief that individuals seeking to create a better existence for themselves has been a long-standing view and aim of psychology. He notes a number of key psychologists (Freud, 1900/1913; Maslow, 1968; Bandura, 1977) who believed that individuals actively seek a world that gives them ‘pleasure and success’ (1989, p.516). However, it would only be fair to acknowledge that there are circumstances when an individual may face more challenges than they could be expected to resource. Consequently, no matter how optimistic the definition is it will not be able to have positive effect in all situations.

One key hope for the definition is that it would be received in a positive manner, allowing individuals to feel that they had a sense of control over their own wellbeing. Within the current research the sense of personal control was reflected by a number of participants within the phase 1 research group:

‘I think it will also help you look into a bit more so you can figure out what could help.’ - (Rebecca)

‘I think it’s really good. It shows you need balance and it shows that if you are tipping towards the challenges side you can make yourself feel better by confidence and something.’ - (Hannah)

‘I think it’s good because if you get a challenge you can use your resources... It could be things like physical, or anything, but you could find out what the problem is and help each other out.’ - (Melanie)

This facet of the definition became the basis for the intervention which focused on the developing of resources in order for the students to build strategies to deal with the challenges they faced. The sense of control was directly measured within the WFESS, which resulted in the participants revealing an increase in mean score following the intervention. Support for allowing individuals to achieve a sense of control of their wellbeing has also been externally endorsed by Pinfold *et al.* (2015) who state that by using the definition within their research it allowed 'for individuals with significant psychiatric 'disorders' to achieve a sense of well-being'(p.5).

9.7.4 Basis for Measurement

As already discussed, the intervention programme itself was based on the model of wellbeing proposed at the start of the thesis, alongside four key influencers. In order to enhance the wellbeing of FE students it was deemed necessary to provide them with strategies to optimise their existing resources. This was particularly important as the level of challenges varies between individuals and it would not be within the realms of any educational intervention to tackle the challenges themselves. Consequently, as resources and their impact on challenges was the basis of the intervention it was inevitable that any measurement used to assess the effectiveness of the programme focused on these two variables. The need for a new survey in this research, rather than relying on established measures, links to the fact that in the five years of the current research Braubach *et al.* (2015) have highlighted that although a number of varied wellbeing measurement tools have been suggested 'a consensus on the best tool for well-being assessment has yet to emerge' (p.5794). Therefore, the definition provided a theoretical basis for the development of the WFFES.

The first section of the questionnaire clearly reflects the proposed definition. It was designed to gain a subjective measure of both resources and challenges in each of the ten life areas produced by the focus group in phase one of the research. Once the participant had reflected on how each of these life areas was affecting them at that time the next aim of the survey was to discover what impact these challenges had on them and what resources/strategies they employed to approach the challenges. To ensure that the questionnaire was user friendly a number of pilots resulted in a measure that was two sides of A4 in length, which was able to be undertaken online or on paper if there was no access to computers.

At the start of the research it was envisaged that the results of the survey would enable an individual to apply their results to the see-saw analogy. The survey was designed to get a numerical score for both impact of challenges and strategies participants employed to approach the challenges. The numerical scores enabled participants to have a visual representation of the sense of balance they were experiencing in terms of their wellbeing. The idea of balance from the definition has been recognised by a number of researchers (Blum, 2016; e della Comunicazione, 2015; Chung *et al.*, 2015; Xavier *et al.*, 2015; Umphrey and Sherblom, 2014).

However, a possible limitation in the methodology was that the results of the survey were not shared with the participants. This was due to two factors; ethical considerations and practicalities. Firstly, from an ethical viewpoint it had been decided that the survey would be anonymised (with participants only placing their student number on the form for the sake of analysis) and placed in an envelope following completion. This was decided to help the participants feel more able to be honest in their responses, knowing that their Learner

Coach, who acted as their personal tutor, would not be able to access their results.

Secondly, it was decided that the delivery of the intervention was a big enough responsibility for the Learner Coaches, without giving them the job of scoring the surveys for each of the students. This would have gone beyond their normal responsibilities.

Therefore, the scoring was undertaken away from the research setting by an individual who did not have any knowledge of the individual participants.

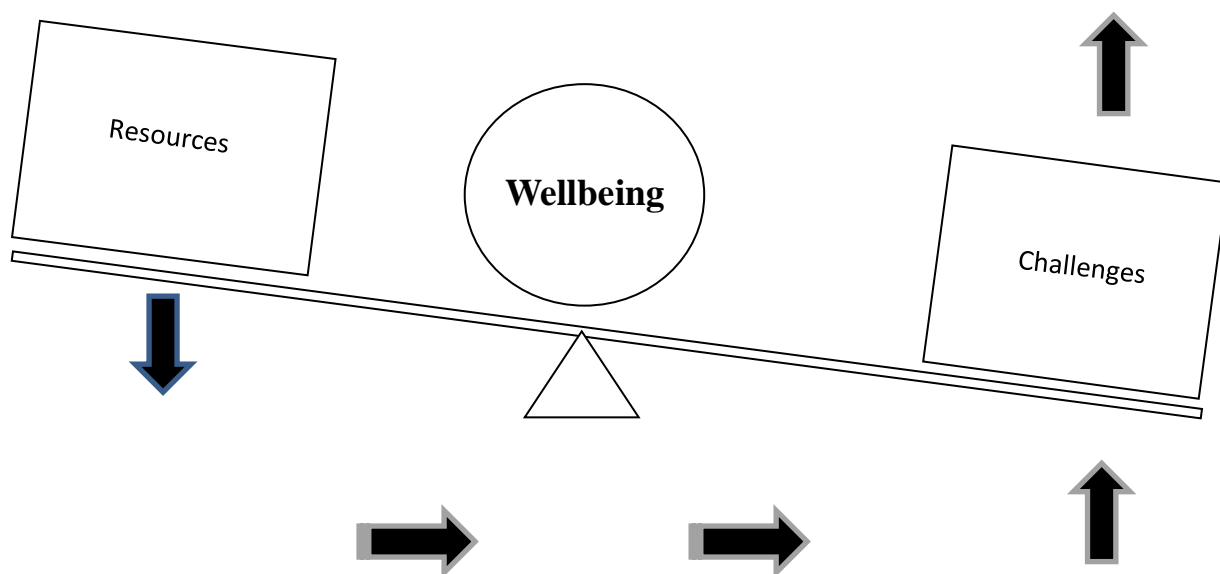
However, this procedure meant that the students were unable to reflect on whether the results were a true measure of their subjective wellbeing. This lack of a feedback loop could undermine the results as there was no confirmation that the survey results reflected their personal view of their wellbeing. This could be seen as going against the subjective wellbeing approach to the research and may weaken the overall results. This also goes against the theoretical idea that the research was encouraging individuals to take control of their own wellbeing. Although the participants had been introduced to the definition without the results of the first survey they had no idea what their level of resources was before the programme. Therefore, they would have had no mechanism to establish how much they had to increase their level of resources throughout the programme to maintain a sense of balance. However, despite this lack of knowledge of their base line measure of resources and challenges, the results still demonstrate an increase in the perception of feeling resourced following the intervention programme. This could demonstrate that the lack of knowledge of their results from the WFESS did not fully affect their overall feeling of being resourced. Alternatively, it may reflect the fact that the lack of knowledge of their results from the survey did not prevent the students from reporting improved scores.

9.7.5 The definition as a whole

There is something intuitively pleasing about a definition that is so simple and easy to understand. However, in practice the research undertaken for this thesis has concentrated more on one side of the model (resources) than the other (challenges). This does not fully encompass Hendry and Kloep's (2002) lifespan model of development upon which the definition had been partially based. Hendry and Kloep (2002) acknowledge that when an individual has increased their resource pool 'a feeling of security is reached' (p.31). However, if the individual is not challenged this can lead to feelings of boredom. Their lifespan model suggests that a life without challenges would lead to 'unhappy stagnation' (p.33) and a poorer quality of life. This aspect of the theory was beyond the purpose of the intervention but would be interesting to explore further. This could result in an extension of the 'Resource-Full' intervention that could be employed when individuals get to the stage of feeling more resourced than challenged.

The aim of the intervention programme was to increase an individual's personal resource bank so they were more able to deal with the challenges they faced. At no point has the research aimed to alter the level of challenge that the participants were experiencing. Because of this the definition may need to be slightly altered to focus more on the change in resources rather than any change in challenge:

Figure 9.1 Diagram to demonstrate newly proposed definition of wellbeing



The greater (or heavier) the resources become the impact of challenges on wellbeing is reduced.

However, even if the definition is adapted, it is still necessary to question whether the dynamic between resources and challenges is really a predictor of an individual's wellbeing.

9.7.6 Resources Vs Challenges

The dynamic relationship between challenges and resources is not a new concept in psychology. Chapter Two introduced three key theories that support the notion of an interaction between the two variables; Cognitive-relational theory (Lazarus and Folkman, 1984); Conservation of resources theory (Hobfoll, 1989); and the Broaden and Build theory (Fredrickson, 1998). However, it is important to establish whether these theories can be applied to the study of wellbeing.

9.7.7 Cognitive-relational theory (Lazarus and Folkman, 1984)

In terms of the proposed definition of wellbeing utilised in this research, the cognitive-relational theory appears to provide support for the interaction of resources and challenges being linked to an individual's level of wellbeing. However, Folkman *et al.* (1986) recommended that any further understanding of coping processes needs to investigate both 'intraindividual and interindividual approaches' (p.1002) in order to comprehend the processes that affect an individual's long-term wellbeing. Unfortunately, it could be argued that the proposed definition is only applicable for looking at the impact of the variables on the individual rather how levels can have an effect between individuals.

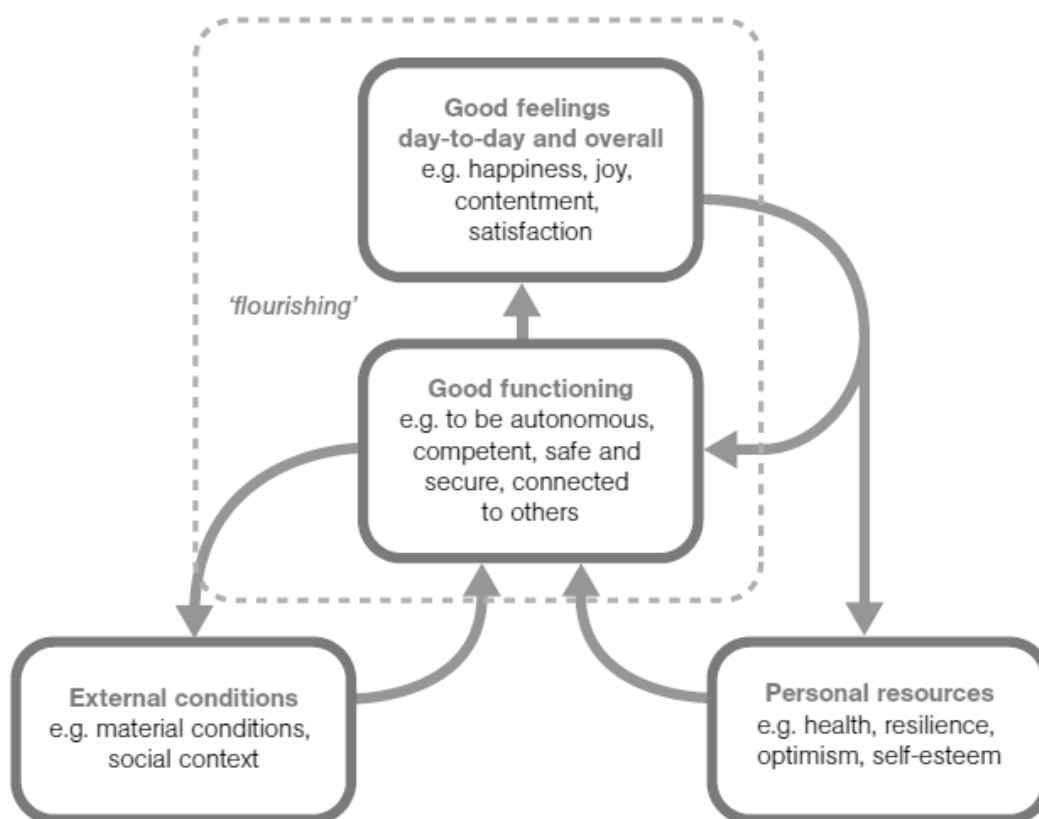
9.7.8 Conservation of resources theory (Hobfoll, 1989)

This theory features the idea that an individual can increase their resource pool. This directly links to the lifespan model of development (Hendry and Kloep, 2002) to which the definition was heavily indebted. It also links to the purpose of the intervention to increase the resources of FE students to enhance their wellbeing. Therefore, it gives support to the inclusion of both variables within the research.

9.7.9 Broaden and Build theory (Fredrickson, 1998)

This theory seems to suggest that the definition used in this research should not feature challenge as a variable. Instead, it could be argued that the main variable that impacts on wellbeing is that of resources. However, a widely accepted wellbeing model within policy circles does seem to allude to the two variables of challenge and resource:

Figure 9.2 The dynamic model of wellbeing (adapted from Thomson and Marks (2008) and the Centre for Wellbeing (2011))



(Nef, 2014, p.10)

This model proposes that both external conditions (which can be translated as challenges) alongside personal resources are both drivers of wellbeing.

By looking at these three theories it could be concluded that both variables of challenge and resource link directly to wellbeing. However, it is the variable of resources that appears to be more dominant in the dynamic nature of the concept. Conversely, it is interesting to note that the initial focus group research with FE students (discussed fully in Chapter Four) featured a greater emphasis of discussion on the challenges that the students faced rather than the resources they felt they had. This may well be due to a primacy bias in the way the

sessions were structured, as students were asked to discuss their perceived challenges first, but it may also reflect the belief that strategies need to be taught to individuals in order for them to tap into the resources they already have. This is because individuals are aware of their challenges but are not always aware of the resources they have to deal with them.

9.8 Applications and future directions

An overarching theme that has emerged from the research is the complexity of undertaking research in a real world setting. Robson (1995) highlighted that the challenge of researching within a real world setting is the ability to say something meaningful about ‘a complex, relatively poorly controlled and generally ‘messy’ situation’ (p.3). This statement goes some way to explaining past criticisms of educational research that it has lacked impact because of its ‘underdeveloped state’ and that this has often led to ‘fragmentary and contradictory conclusions’ (Nisbet and Broadfoot, 1980, p.45). This has been coupled with the frustration of knowing how to devise educational programmes that ‘work in practice’ (Fullan, 1982, p.ix). Therefore, the research explored in this thesis could appear to have been condemned to fail even before it started. However, O’ Leary (2005) believes that if the researcher is able to recognise and grapple with the multidimensional and messy nature of the context, the results are much more likely to be realistic, reliable and usable.

9.8.1 Impact on policy

Before a methodological approach was decided it had been important to determine the purpose of the research. Early discussions within the thesis have highlighted the important link to policy when considering the possibility of enhancing wellbeing in FE students (see Chapter One). A number of researchers have highlighted the fact that evaluation research in the real world has become an underpinning of contemporary public policy within the public sector (Rossi, Lipsey and Freeman, 2003; Weiss, 1997). The current research aimed

to gain practical evidence from a real life situation that could be used to inform policy direction within Welsh education and beyond. In effect a key question from a policy perspective would be to consider the potential wellbeing outcome for the students if they had not taken part in the intervention. As already highlighted the results of the intervention suggest that the participants experienced an increase in their perception of feeling resourced. These results could suggest that the intervention taught the students strategies to tap into their resource-pool enabling them to feel more able to cope with the challenges that they were facing.

However, any research that aims to inform policy is highly contingent on time and context. Consequently, if the results demonstrate an issue with generalisability, then it can be questioned how much of a true impact they can have on driving a policy forward. This may explain why one of the conclusions of a report into policy-making in the UK was that ‘most attempts to improve policy-making have failed to reflect the real world’ (Hallsworth, Parker and Rutter 2011). They recommend that at all stages of policy-making decisions are made based on evidence sources.

Another consideration for determining whether the evidence from this research is relevant to current policy is the time the research has taken to come to fruition. In the five years of the research, has the policy debate moved forward meaning that the results of the research now lack direct policy interest? The introduction of the ‘Well-being of Future Generations (Wales) Act’ (2015) which requires public bodies to demonstrate that their work is in ‘pursuit of the economic, social, environmental and cultural well-being of Wales’ (p.1), demonstrates that the research undertaken here is indeed still relevant to the policy direction of the National Assembly for Wales.

9.8.2 Building bridges between researchers and practitioners

The purpose of this research could be viewed as the need to solve a problem – that of how do we enhance the wellbeing of FE students? Heller (1986) proposed that in research in the real world there is evidence in favour of an approach that builds a bridge between the researcher and the user (which in this context is the educational establishment that was willing to permit the research). Heller argues that the first stage in this interaction is that the researcher believes that the research has practical implications that should be utilised in the setting. As outlined in Chapter One the introduction of the measurement of wellbeing within the ESTYN framework had not been accompanied by guidance on how to ensure the wellbeing of students was enhanced. The purpose of the programme was to meet this need. A strength of undertaking the research in a real life situation was the fact that the educational institution was keen to implement the intervention because it offered the solution to this problem. The aim of the programme also reflected what the Learner Coaches saw as the purpose of pastoral sessions:

- To equip students with skills that they would not learn through their curriculum studies (e.g., emotional literacy);
- To provide an opportunity for students to seek extra support and guidance;
- To help students develop as individuals;
- To ensure that students are able to fulfil their full potential;
- To ensure they have a more holistic experience of education.

Unfortunately, it was the second stage of Heller's interaction, obtaining collaboration on the project, which became a problem with the research. As outlined in the procedures of Chapter Six, all the Learner Coaches were given the opportunity to contribute to the development the resources for the intervention. However, despite this opportunity no

suggestions were made by the pastoral team to improve or adapt any of the resources within the programme. There could be a number of reasons for this reaction. Firstly, it has been highlighted that the Learner Coaches were relatively new to their role at the FE College and that they did not necessarily have educational experience prior to their appointment. This may have resulted in a lack of confidence in commenting on resources that had been developed by an individual with 18 years teaching experience. Coupled with this could also be the perceived status of the researcher. Ladner (1971) described the role of researcher as one of the oppressor due to the fact that the researcher 'defines the problem, the nature of the research, and to some extent, the quality of the interaction between him and his subjects' (p.6). Although this may appear a rather strong analogy Wagner (1997) highlights that teachers can often feel like research subjects themselves rather than collaborators in a process. This view could well have been demonstrated by one of the Learner Coaches, later in the study, who said that the students did not enjoy the reflective process at the end of each of the 'Resource-full' sessions because:

'some of the students felt uneasy about saying what didn't work, because they think that we are going to say 'What do you mean it doesn't work?' They're quite afraid of putting something hypercritical down because they think it's going to come back to them.' -
Learner Coach A

Considering how the initial training session went, it is reasonable to assume that this also reflects how the Learner Coaches were feeling when asked what they would change about the content of the intervention. At the session the Learner Coaches appeared both excited but overwhelmed by the extent of the resources shown to them. The session was quite brief because of the timetable demands of the Learner Coaches, which meant that there was a lot to cover in the time. However, no questions were raised by the Learner Coaches in relation to the resources. Each of the Learner Coaches was provided with the email address

of the researcher in case they had further questions, but on reflection, it would have been useful to arrange a further meeting with the group to allow them to ask questions when they had time to familiarise themselves with the materials.

Despite the problems at the collaborative stage it is encouraging that Heller's next stage of the process, the client being influenced by the research outcomes, has resulted in some positive evidence from the research. Whilst the main aim of the intervention was to enhance the wellbeing of students a pleasing outcome was the impact that the intervention had on the Learner Coaches' own wellbeing. Some of the Learner Coaches explained that they had implemented some of the strategies into their own life, such as taking baby steps and reassessing their own sleep patterns. It also had an effect on the way they perceived their students. One Learner Coach explained that the session on the brain had helped her to have a better understanding of how adolescents develop. This led to her stating that she had learned to 'appreciate them a bit more' (Learner Coach B). Another Learner Coach accepted that the envelope task within session three on individual thought patterns, 'made me realise I don't praise enough' (anonymous feedback form). These findings reflect previous research which has emphasised that teaching an intervention programme designed to enhance wellbeing can also contribute to teacher wellbeing and job satisfaction (Axford *et al.* 2010; Goldstein and Lake 2000; Roffey, 2012).

A final stage in building bridges between the research and the Learner Coaches delivering the programme is the lack of training. The development of a full training programme would address the lack of understanding of the content that the Learner Coaches expressed. A training programme would also enable trainee deliverers to ask questions about the content to be delivered to ensure that they had a full understanding before they delivered the

course. As the Learner Coaches involved in the delivery of the intervention did not necessarily have teaching qualifications, the introduction of an accredited course would have resulted in an upskilling of the workforce. This reflects the findings of the UK Resilience programme (Challen *et al.*, 2010) who also found that there was a drift in some schools towards their programme being delivered by non-teachers. It could be concluded that the more non-specialists that are involved in pastoral provision the greater the need for a training programme to ensure that interventions are delivered in an appropriate and consistent manner.

9.8.3 Methodological Approach

A feature of the current research was that it focused on subjective wellbeing. This allowed for the collection of data that reflected the participants' experiences and perceptions, which in turn mirrored the real world aspect of the investigation. This led to factors being picked up that were not part of the original research focus (Gray, 2013), such as the impact on the Learner Coaches' own wellbeing. However, a shortcoming of this approach is that concerns may be raised about the generalisability of the findings due to the responses being specific to the research situation. An important question to consider is whether the estimated impact would be similar if the intervention were replicated in another location, at a different time or targeting a different group of students.

In order to establish rigour in the research the methodology went beyond a mixed methods evaluation. As it aimed to involve collaboration with the practitioners it was hoped that the the Learner Coaches would be able to feel part of the research via a democratic principle (Wakeman, 1986). By doing so it was hoped that the Learner Coaches would feel some ownership of the programme. It is also important to note that the young people were also

collaborators in the beginning of the process and that comes through in the focus group data used for developing the intervention.

The mixed methods methodology allowed for multiple methods to be used within the research (focus groups, quantitative and qualitative survey data). This allowed for the collection of data across different times and sources (Easterby-Smith *et al.*, 2002), helping balance out any potential weaknesses in each data collection (Gray, 2013) and also allowing for the capture of a more holistic and complete representation of the variables being studied (Jick, 1979). The combination of quantitative and qualitative data also allowed for a demonstration of the connection between the intervention and the student outcomes, with the focus groups adding further insight into why this was the case.

9.9 Practical implications of the research

The research presented in this thesis adds to the growing body of evidence which demonstrates that intervention programmes within education can lead to an enhancement in student wellbeing. However, the understanding and extent of how this enhancement occurs has only just begun to be examined and still requires further research.

The findings reported in this research make a step towards confirming that the delivery of the pilot 'Resource-Full' intervention programme within FE can lead to participants feeling more resourced, which, in turn, reduces the impact of challenges on their daily life. If similar strategies were implemented across FE there could be a chance that FE students could feel more equipped to face life's challenges which in turn would enhance their wellbeing. The programme is based on the premise that the skills developed by the intervention would lead to life-long strategies that would be beneficial to the students as they progress through life.

However, the current research was not able to establish this predictive validity due to the time scale.

Research has also argued that enhanced wellbeing is linked to academic success (El Ansari and Stock, 2010). For example, students who establish a growth mindset (a theory featured in 'Resource-full') have shown an improvement both in their wellbeing and learning outcomes (Dweck, 2006) whilst students who use their strengths (another feature of the intervention) report being more engaged with their learning and have higher intrinsic motivation to learn (Louis, 2009). Consequently, at a time where Welsh education is under the spotlight for underachieving (The Programme for International Student Assessment (PISA) rankings demonstrate that Wales has seen a decline in maths and science since 2007), the implementation of a wellbeing intervention may help to change the direction of this trend, by increasing students' use of strategies to face the challenge of examinations.

The findings reported here may help to address some of the key priorities of local government policy such as the Wellbeing of Future Generations (Wales) Act 2015 which aims to improve the 'social, economic, environmental and cultural well-being of Wales' (p.3). In particular, the research links specifically to two of the wellbeing goals set out by the Act:

- A Healthier Wales - A society in which people's physical and mental wellbeing is maximised and in which choices and behaviours that benefit future health are understood.
- A More Equal Wales – A society that enables people to fulfil their potential no matter what their background or circumstances (including their socio economic background and circumstances). (p.6).

The research also links specifically to the Donaldson Review of Welsh education (Donaldson, 2015). Welsh Government has accepted the findings and aim to implement the recommendations of Professor Donaldson's review in full by 2021. A continuing theme in the evidence gathered for the review was the importance of wellbeing. The review goes on to state that educational institutions need to care for:

young people's physical and emotional needs and help them to take responsibility for their own lives, understanding the importance of, for example, diet and fitness and being confident in managing their own affairs. Independence, self-reliance and respect for others should be fostered throughout the teaching and learning process (p.28).

Donaldson proposes six 'Areas of Learning and Experience'; one of which is health and wellbeing. The review suggests that by teaching young people to develop habits that will encourage their own and others' wellbeing it 'will make a contribution to reducing health inequalities and improving well-being more widely' (p.45). Therefore, it could be argued that the current research has come at a timely juncture in Welsh education. However, for the intervention to feature in any discussions linked to the Donaldson recommendations the limitations around the training of the deliverers would need to be fully addressed.

9.10 Directions for future research

9.10.1 Involvement of parents

Previous research has demonstrated that parents can play a crucial role in enhancing the wellbeing of young people. Therefore, future research could investigate the involvement of parents with the delivery of wellbeing interventions. This is backed up by McCreanor *et al.* (2006) who stated, that families 'remain a crucial site for interventions to enhance the wellbeing of young people' (p.156). Other research appears to support this claim that parental involvement can aid personal and social development of adolescents as well as

their academic success (Silva and Stanton, 1996; Ginsberg and Jablow, 2006; Gecas and Schwalbe, 1986; Harris and Goodall, 2008; Jeynes, 2007; Horny and White, 2010). Cripps and Zyromski (2009) explored the benefits of involving parents in educational institutions and conclude that ‘adolescents determine personal self-worth, self-efficacy, and self-esteem based on perceptions gained from parental involvement’ (p.11). Therefore, it can be implied that parental involvement in the delivery of the interventions could aid the enhancement of an adolescent’s wellbeing. However, it needs to be acknowledged that different parenting styles could have an impact on the effectiveness of any parental involvement within the intervention. Research has demonstrated that differing parental styles can affect the wellbeing of adolescents. For example, Aquilino and Supple (2001) found that coercive parenting style during adolescence was linked to decreased wellbeing. Therefore, parental involvement could possibly act as a confounding variable within the research. It may be more appropriate to widen the potential reach of the research by considering significant others in a young person’s life. This may be more apt when parental involvement might be problematic for some young people.

Parental involvement could also be seen as taking the emphasis away from the fact that the programme is designed for adolescents who are at a development stage where they are attempting to achieve emotional independence from their parents (Cobb, 2010). Eccles and Gottman (2002) believe that adolescents experience the challenge of a shift in the relationship with their parents from one of dependency and subordination to one that reflects the adolescent’s increasing maturity and level of responsibilities. Therefore, the involvement of parents could undermine this crucial development stage.

9.10.2 Self-selection

It would be interesting to extend the research by comparing FE students who had self-selected to be part of the intervention to the use of the programme with a whole cohort of students within FE. Sin and Lyubomirsky (2009) discovered that self-selected individuals benefitted more from interventions possibly because they were more motivated to take part and had a higher expectation of the intervention enhancing their feelings of wellbeing. Sin and Lyubomirsky accredited this greater success to the fact that these individuals had higher levels of motivation, were more positive, showed greater commitment to the intervention and took the assigned tasks more seriously. Lyubomirsky *et al.* (2011) went on to investigate the role of self-selection in the context of a longitudinal wellbeing intervention. Their research found that relative to their non-self-selected colleagues participants who self-selected into the study reported improved overall wellbeing at the end of the intervention. Therefore, a study using a self-selected sample could result in more significant results compared to the current research.

9.10.3 Adolescent valence and engagement

Despite the focus on subjective wellbeing a key aspect that the study under explored was the materials used within the intervention. Although the Learner Coaches indicated that the students reacted positively to the variety of resources within the intervention, no direct evidence was gathered from the students themselves. Future research would benefit from the students being involved in the design of the delivery materials. This could result in the FE students being more willing to practise the strategies advocated within the intervention, which research has demonstrated leads to greater improvement in wellbeing (Sin and Lyubomirsky, 2009; Lyubomirsky *et al.*, 2008; Seligman *et al.*, 2005).

9.10.4 Developing the pilot beyond the thesis

Arnold et al. (2009) state that a pilot study 'can function as a test ... to ensure that future trials are designed optimally and can be implemented in practice' (p.70). Therefore, the findings of this research would need to be taken into consideration when considering how the intervention could be further developed and tested. The research was only undertaken in one FE institution in Wales. As stated in Chapter One there are a further 13 Institutions that could be used to investigate the effectiveness of the programme further. As these institutions cover the whole of Wales, this would enable further research to take into account the wide demographic of FE students across Wales. An extension of the pilot across these institutions would allow the researcher to gain further evaluation of the intervention before any final decisions were made regarding the content of the intervention. This further research would also allow for a training session of delivery staff to be piloted to establish whether further training would lead to greater results following the intervention. It would also allow for the student voice to be gathered which has been highlighted as a weakness of the current research. Research beyond the institution discussed in this thesis would also hopefully help to negate the issues the researcher faced with having worked within the institution previously.

9.11 Conclusions

The aim of this research was to pilot and evaluate a pastoral intervention programme could enhance the wellbeing of FE students. The results of the study suggest that participants did have a greater awareness of the resources they had to face the challenges in their lives, following the intervention programme. Consequently, it has been argued that this increase in the personal perception of feeling more resourced is a demonstration of how the programme may have enhanced the wellbeing of these students. This result was achieved

through focusing on the need for a workable definition of wellbeing, a user-friendly measure of wellbeing and finally a suitable intervention programme for FE students.

This chapter has highlighted a number of limitations within the research. A number of these revolved around the difficulties of undertaking research in a real world situation. However, it was important to undertake the research in the field as the results were gained in the setting for which the intervention was intended. It is unfortunate that access to the sample has been a weakness of the study and moved the research away from its intended focus on gathering subjective accounts.. However, due to a change in employment of the researcher, this became beyond the control of the study. Nevertheless, the findings of the research indicate that this enhancement in FE students feeling more resourced could only be a suggestion of a much larger potential in terms of possible results in the future. If the recommendations of an extended training programme were introduced for practitioners delivering the intervention there is a possibility that the results could be further enhanced.

The potential for this research to be investigated further within FE is a credible proposition. The unique materials that have been developed for the programme, that were based on a solid research foundation, could easily be made accessible to other FE institutions. If this were explored via an online platform, such as the website that was developed for the research, this could also be a relatively low cost solution for enhancing the wellbeing of students within this sector. The training of practitioners to deliver the programme could also aid a paralleled enhancement of staff within the sector which in turn would also benefit the sector as a whole.

This chapter has also made suggestions for the direction of future research. This comes at a time when wellbeing remains high on the education agenda in Wales. The exploration of

parental involvement, self-selected samples and student involvement in the development of future resources would not only benefit FE as a sector but could be implemented in the education system as a whole. Although adolescence was highlighted as a key area of need within wellbeing research there is an argument that starting an awareness of personal resources at an earlier stage could only be beneficial for society as a whole.

This research examined the impact of a newly developed intervention programme that aimed to increase the personal resource bank that a student possesses in order to have strategies to deal with the challenges faced. The results have demonstrated some promising evidence that by increasing personal resources in FE students this in turn starts to reduce the impact of daily challenges on their wellbeing. Therefore, the wellbeing intervention can be seen as a potential programme for enhancing the wellbeing of students within FE.

References

- Abraham, C., and Michie, S. (2008). A taxonomy of behavior change techniques used in interventions. *Health Psychol.* 2008; 27: 379-387.
- Adlai-Gail, W. (1994). *Exploring the Autotelic Personality*. Unpublished doctoral dissertation (University of Chicago).
- Akin-Little, K.A., Little, S.G. and Delligatti, N. (2003). A preventative model of school consultation: Incorporating perspectives from positive psychology. *Psychology in the Schools*, 41(1), 155–162.
- Alberga, A. S., Medd, E. R., Adamo, K. B., Goldfield, G. S., Prud'homme, D., Kenny, G. P., and Sigal, R. J. (2013). Top 10 practical lessons learned from physical activity interventions in overweight and obese children and adolescents. *Applied Physiology, Nutrition, and Metabolism*, 38(3), 249-258.
- Aliaga, F. (2012). *If You've Never Failed, You've Never Lived! (Best motivational video!)* accessed at <https://www.youtube.com/watch?v=q6CaHJwsSE4>
- Alkire, S. (2002). Dimensions of human development. *World Development*, 30, 181-205.
[http://dx.doi.org/10.1016/S0305-750X\(01\)00109-7](http://dx.doi.org/10.1016/S0305-750X(01)00109-7)
- Allen, K. (2011, 16 November). *Youth unemployment hits 1 million*. The Guardian, pp. 2–3.
- Allik, H., Larsson, J. O., and Smedje, H. (2006). Health-related quality of life in parents of school-age children with Asperger syndrome or high-functioning autism. *Health and quality of life outcomes*, 4(1), 1-8.
- Anderso, B. (2000). *Stretching* Bolinas, CA Shelter Publications

Andrews, G., Szabó, M., and Burns, J. (2001). *Avertable risk factors for depression*.

Beyondblue, The Australian National Depression Initiative.

Andrews, G., Szabó, M., and Burns, J. (2002). Preventing major depression in young people.

The British Journal of Psychiatry, 2002 (181), 460–462.

Andrews, W., Twigg, E., Minami, T., & Johnson, G. (2011). Piloting a practice research

network: A 12-month evaluation of the Human Givens approach in primary care at a general medical practice. *Psychology and Psychotherapy: Theory, Research and Practice*, 84(4), 389-405.

Ansari.D., and Coch, D. (2006). Bridges over troubled waters: education and cognitive neuroscience *TRENDS in Cognitive Sciences Vol.10 No.4*

Aquilino, W.S., and Supple, A.J. (2001). Long-term effects of parenting practices during adolescence on well-being outcomes in young adulthood. *Journal of Family Issues*, 22(3), 289-308.

Araújo-Soares, V., McIntyre, T., MacLennan, G., and Sniehotta, F. F. (2009). Development and exploratory cluster-randomised opportunistic trial of a theory-based intervention to enhance physical activity among adolescents. *Psychology and Health*, 24(7), 805-822.

Archer, W., and Davison, J. (2008). *Graduate employability: What do employers think and want?* London: Council for Industry and Higher Education

Argyle, M. (1987). *The Psychology of Happiness*. London: Routledge

Argyle, M., and Lu, L. (1990). The happiness of extraverts. *Personality and Individual Differences*, 11(10), 1011-1017.

Argyle, M., Martin, M., and Crossland, J. (1989). Happiness as a function of personality and social encounters. In J. P. Forgas and J. M. Innes (Eds), *Recent advances in social psychology: An international perspective*, 189-203.

Arnold DM, Burns KE, Adhikari NK, Kho ME, Meade MO, Cook DJ: McMaster (2009) Critical Care Interest Group. The design and interpretation of pilot trials in clinical research in critical care. *Crit Care Med.*, 37 (Suppl 1): S69-74.

Austin, D. (2005). *The effects of a strengths development intervention program upon the self-perception of students' academic abilities*. Dissertation Abstracts International, 66, 1631A.

Axford, N. (2008). *Exploring Concepts of Child Well-Being: Implications for Children's Services*. Bristol: The Policy Press

Axford, S., Blyth, K., and Schepens. R. (2010). *Can we help children learn coping skills for life? A study of the impact of the Bounce Back programme on resilience, connectedness and wellbeing of children and teachers in sixteen primary schools in Perth and Kinross, Scotland*. Perth and Kinross Council accessed at http://www.centreforconfidence.co.uk/docs/Perth_and_Kinross_Council_bounce_back_Report.pdf

Bacon, N., Brophy, M., Mguni, N., Mulgan, G., and Shandro, A. (2010). *The State of Happiness-Can public policy shape people's wellbeing and resilience?* London: The Young Foundation

Bakara, A. A., Osmanb, M. M., Bachokc, S., Ibrahimd, M., and Mohamede, M. Z. (2013). *Modelling Economic Wellbeing and Social Wellbeing for Sustainability: A Theoretical*

Concept. 5th International Conference on Sustainable Future for Human Security, SustainN 2014

Bakker, A. (2005). Flow among music teachers and their students: The crossover of peak experiences *Journal of Vocational Behavior* 66, 26–44

Barbour, R. (2007). *Doing Focus Groups* London: Sage

Barbour, R. and Kitzinger, J. (1999). *Developing Focus Group Research* London: Sage

Baumeister, R. F., Bratslavsky, E., Finkenauer, C., & Vohs, K. D. (2001). Bad is stronger than good. *Review of general psychology*, 5(4), 323-370

BBC (2010). *Managing Stress - Brainsmart* – BBC accessed at

https://www.youtube.com/watch?feature=player_embedded&v=hnpQrMqDoqE

Beaumont, J. (2011). *Measuring national well-being - Discussion chapter on domains and measures*. Newport: Office for National Statistics.

Beaumont, J. (2013). *Measuring National Well-being - Children's well-being, 2013* Newport: ONS

Becker, A., Hagenberg, N., Roessner, V., Woerner, W., and Rothenberger, A. (2004).

Evaluation of the self-reported SDQ in a clinical setting: Do self-reports tell us more than ratings by adult informants? *European Child and Adolescent Psychiatry [Suppl 2]* 13: (2), ii17-ii24.

Beer, J. S. (2002). Implicit self-theories of shyness. *Journal of Personality and Social Psychology* 83.4: 1009.

Benard, B. (1997). How to be a turnaround teacher/mentor. *Reaching Today's Youth*, 2 (3), 31–35.

Benard, B. (2012). *Turning the Corner: From Risk to Resilience* University of Minnesota

accessed at

[http://www.nationalresilienceresource.com/BB Turning the Corner F 9 12.pdf](http://www.nationalresilienceresource.com/BB_Turning_the_Corner_F_9_12.pdf) on

15.08.14

Ben-Arieh, A. (2000). Beyond welfare: Measuring and monitoring the state of children: New trends and domains. *Social Indicators Research*, 52(3), 235-257.

Ben-Arieh, A., and Gross-Manos, D. (2009). *Taxonomy for child wellbeing indicators - The 3rd OECD World Forum on "Statistics, Knowledge and Policy" Charting Progress, Building Visions, Improving Life Busan, Korea - 27-30 October 2009* accessed on 10/6/12 at

<http://www.oecdworldforum2009.org>

Ben-Arieh, A. (2006). *Background paper prepared for the Education for All Global Monitoring Report 2007 Strong foundations: early childhood care and education Measuring and monitoring the well-being of young children around the world* accessed on 12/3/12 at

<http://unesdoc.unesco.org/images/0014/001474/147444e.pdf>

Ben-Zur, H. (2003). Happy adolescents: The link between subjective wellbeing, internal resources and parental factors. *Journal of Youth and Adolescence*, 32 , 67–79.

Bernard, M., and Walton, K. (2011). The effect of You Can Do It! Education in six schools on student perceptions of wellbeing, teaching, learning and relationships. *Journal of Student Wellbeing*, 5, 22–37.

Beyth-Marom, R., and Fischhoff, B. (1997). Adolescents' decisions about risks: A cognitive perspective. Health risks and developmental transitions during adolescence, 110-135. In John Schulenberg, Jennifer L. Maggs, Klaus Hurrelmann *Health Risks and Developmental Transitions During Adolescence* Cambridge University Press

Bircher, J. (2005). Towards a dynamic definition of health and disease. *Medicine, Health Care and Philosophy*, 8(3), 335-341.

Blank, L., Baxter, S., Goyder, E., Guillaume, L., Wilkinson, A., Hummel, S. and Payne, N. (2009). Systematic review of the effectiveness of universal interventions which aim to promote emotional and social wellbeing in secondary schools. *Interventions*, 56(4.5), 1.

Bloom, K., and Johnston, K. M. (2013). Digging into YouTube videos: Using media literacy and participatory culture to promote cross-cultural understanding. *Journal of Media Literacy Education*, 2(2), 3.

Bloomer, M., and Hodkinson, P. (1997). *Moving into FE: The Voice of the Learner* Further Education Development Agency

Blum, S. (In Press) *"I Love Learning; I Hate School": An Anthropology of College* Cornell University Press

Bode, C., De Ridder, D. T., Kuijer, R. G., & Bensing, J. M. (2007). Effects of an intervention promoting proactive coping competencies in middle and late adulthood. *The Gerontologist*, 47(1), 42-51.

Bodenmann, G., Perrez, M., Cina, A. and Widmer, K. (2002). The effectiveness of a coping-focused prevention approach: A two-year longitudinal study. *Swiss Journal of Psychology*, 61, 195-202.

Boehm, J. K., Lyubomirsky, S., and Sheldon, K. M. (2011). A longitudinal experimental study comparing the effectiveness of happiness-enhancing strategies in Anglo Americans and Asian Americans. *Cognition and Emotion*, 25, 1263-1272

Boivin, J., Rice, F., Hay, D., Harold, G., Lewis, A., van den Bree, M. M., and Thapar, A. (2009). Associations between maternal older age, family environment and parent and child wellbeing in families using assisted reproductive techniques to conceive. *Social science and medicine*, 68(11), 1948-1955.

Bolger, N., Zuckerman, A., and Kessler, R. C. (2000). Invisible support and adjustment to stress. *Journal of Personality and Social Psychology*, 79, 953-961.

Boli-Bennett, J., and Meyer J.W. (1978). The ideology of childhood and the state: Rules distinguishing children in national constitutions. *American Sociological Review*, 43(6), 797 – 812

Bolier, L., Haverman, M., Westerhof, G. J., Riper, H., Smit, F. and Bohlmeijer, E. (2013). Positive psychology interventions: A meta-analysis of randomized controlled studies. *BMC Public Health*, 13, 119.

Bond, L., Patton, G., Glover, S., Carlin, J. B., Butler, H., Thomas, L., & Bowes, G. (2004). The Gatehouse Project: can a multilevel school intervention affect emotional wellbeing and health risk behaviours?. *Journal of epidemiology and community health*, 58(12), 997-1003

Bonell, C., Humphrey, N., Fletcher, A., Moore, L., Anderson, R., and Campbell, R. (2014).

Why schools should promote students' health and wellbeing. *BMJ*, 348(7958), p3078.

Bornstein, M. H., Davidson, L., Keyes, C. L. M., and Moore, K. A. (2003). *Well-being positive development across the life course* Mahwah: Lawrence Erlbaum.

Bourdon, K., Bourdon, M., Goodman, R., Rae, M., Simpson, G. and Koretz, D. (2005). The Strengths and Difficulties Questionnaire: U.S. Normative Data and Psychometric Properties *Journal of the American Academy of Child and Adolescent Psychiatry*, 44, 6, pp.557-564

Bowker, S. (2013). *Developing a Healthy Universities network in Wales: Current Policy and Plans in Wales PPT Presentation*. Retrieved 21 September 2014 from

<http://phirn.org.uk/files/2013/01/Sue-Bowker-presentation-Compatibility-Mode.pdf>

Brace, I. (2008). *Questionnaire Design*. Kogan Page. Retrieved 24 January 2013, from

<http://lib.mylibrary.com?ID=177612>

Brdar, I., and Kashdan, T. B. (2010). Character strengths and well-being in Croatia: An empirical investigation of structure and correlates. *Journal of research in personality*, 44(1), 151-154.

Bradburn, N. (1969). *The structure of psychological well-being*. Chicago: Aldine

Bradley, B.J. and Greene, A.C. (2013). Do health and education agencies in the United States share responsibility for academic achievement and health? A review of 25 years of evidence about the relationship of adolescents' academic achievement and health behaviors. *J Adolesc Health*;52:523-32.

Braubach, M., Tobollik, M., Mudu, P., Hiscock, R., Chapizanis, D., Sarigiannis, D. A., and Martuzzi, M. (2015). Development of a Quantitative Methodology to Assess the Impacts of Urban Transport Interventions and Related Noise on Well-Being. *International Journal of Environmental Research and Public Health*, 12(6), 5792-5814.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2), 77-101.

Breuer, J., and Sigmund, F. (1957). *Studies on hysteria*. New York: Basic Books.

Brickman, P., and Campbell, D. T. (1971). Hedonic relativism and planning the good society. In M. H. Appley (Ed.), *Adaptation level theory* (pp. 287–305). New York: Academic Press

Bright Purpose, (2012). *Sports Participation amongst 14-21 year olds – How do we encourage young people to stay involved in sport?* Retrieved 5 September 2013 from <http://www.sportwales.org.uk/research--policy/tools-and-resources/publications.aspx>

Briner, R., and Dewberry, C. (2007). *Staff well-being is key to school success*. London: Worklife Support Ltd/Hamilton House.

British Educational Research Association. (2011). *Ethical Guidelines for Educational Research* London: BERA

Broadhead, W. E., Kaplan, B. H., James, S. A., Wagner, E. H., Schoenbach, V. J., Grimson, R., and Gehlbach, S. H. (1983). The epidemiologic evidence for a relationship between social support and health. *American Journal of epidemiology*, 117(5), 521-537.

Broderick, P., and Metz, S. (2009). Learning to BREATHE: A pilot trial of a mindfulness curriculum for adolescents. *Advances in School Mental Health Promotion*, 2, 35–46

Brooker, R., and Macdonald, D. (1999). Did we hear?: Issues of student voice in curriculum innovation *Journal of Curriculum Studies* 31,1, 83-97

Brookfield, S. D., and Preskill, S. (1999). *Discussion as a way of teaching: Tools and techniques for democratic classrooms*. San Francisco: Jossey-Bass

Brown, J. S., Collins, A., and Duguid, P. (1989a). Situated cognition and the culture of learning. *Educational researcher*, 18(1), 32-42.

Brown, J. S., Collins, A., and Duguid, P. (1989b). Debating the situation: A rejoinder to Palincsar and Wineburg. *Educational Researcher*, 10-62.

Bruce, V. (2015). Introduction to the debate on *Well-being and public policy* British Academy Debate, Senate House, London, Wednesday 4 March 2015, Retrieved 10 December 2015 from http://www.britac.ac.uk/events/2015/Well-being_and_Public_Policy.cfm

Byrne, D. G., Davenport, S. C., and Mazanov, J. (2007). Profiles of adolescent stress: The development of the adolescent stress questionnaire (ASQ). *Journal of adolescence*, 30(3), 393-416.

Bschor, T., Ising, M., Bauer, M., Lewitzka, U., Skerstupeit, M., Müller-Oerlinghausen, B., Baethge, C., 2004. Time experience and time judgment in major depression, mania and healthy subjects. A controlled study of 93 subjects. *Acta Psychiatrica Scandinavia* 109, 222–229.

Buckingham, A., and Saunders, P. (2004). *The Survey Methods Workbook* Cambridge: Polity Press

Bullock, K., and Fertig, M. (2003). Partners in learning or monitors for attendance? views on personal tutorials from further education. *Research in Post-Compulsory Education*, 8(3), 329-344.

Bywater, T., and Sharples, J. (2012). Effective evidence-based interventions for emotional well-being: lessons for policy and practice. *Research papers in education*, 27(4), 389-408.

Cadogan, D. (1990). *How Self-assertive are you?* Retrieved 1 September 2013 from <http://www.oaktreecounseling.com/assrtquz.htm>

Cain, G., and Carnellor, Y. (2008). 'Roots of empathy': A research study on its impact on teachers in Western Australia. *Journal of Student Wellbeing*, 2, 52–73.

Cameron, D. (2010). *Prime Minister Speech on Wellbeing Thursday 25th November 2010* Retrieved 1 November 2011 from <http://www.number10.gov.uk/news/speeches-and-transcripts/2010/11/pm-speech-on-well-being-57569>

Campbell, A. (1981). *The Sense of Well-being in America: Recent Patterns and Trends*. New York: McGraw-Hill

Cantril, H. (1965). *The pattern of human concerns*. New Brunswick, NJ: Rutgers University Press.

Carli, M., Delle Fave., and Massimini, F. (1988). The quality of experience in the flow channels: Comparison of Italian and U.S. students. In M. Csikszentmihalyi and I. Csikszentmihalyi (Eds.), *Optimal experience: Psychological studies of flow in consciousness* (pp.288-306). Cambridge, Cambridge University Press.

Carskadon, M.A., Acebo, C., Richardson, G.S., Tate, B.A., and Seifer, R. (1997). An approach to studying circadian rhythms of adolescent humans. *Journal of Biological Rhythms*, 12(3): 278-289.

Carstensen, L. L., and Cone, J. D. (1983). Social desirability and the measurement of psychological well-being in elderly persons. *Journal of Gerontology*, 38, 713-715.

Casey, B. J., Jones, R. M., and Hare, T. A. (2008). The adolescent brain. *Annals of the New York Academy of Sciences*, 1124(1), 111-126.

Cassen, R. and Kingdon, G., (2007). *Tackling Low Educational Achievement*. York: Joseph Rowntree Foundation

Castel, A., Lluch, C., Ribas, J., Borràs, L., and Moltó, E. (2015). Effects of a cognitive stimulation program on psychological well-being in a sample of elderly long-term care hospital inpatients. *Aging and Mental Health*, 1-7.

Centers for Disease Control and Prevention (1997). Guidelines for school health programs to promote lifelong healthy eating. *J Sch Health* 67, 9–26.

Chafouleas, S.M. and Bray, M.A. (2004). Introducing positive psychology: Finding its place within school psychology. *Psychology in the Schools*, 41, 1–6.

Challen, A., Noden, P., West, A., and Machin, S. (2009). *UK Resilience Programme Evaluation Interim Report* London: London School of Economics

Chang, E. C., and Rand, K. L. (2000). Perfectionism as a predictor of subsequent adjustment: Evidence for a specific diathesis–stress mechanism among college students. *Journal of Counseling Psychology*, 47(1), 129.

Chen, G., Gully, S. M., and Eden, D. (2001). Validation of a new general self-efficacy scale. *Organizational Research Methods*, 4, 62–83.

Cheng, H., & Furnham, A. (2002). Personality, peer relations, and self-confidence as predictors of happiness and loneliness. *Journal of Adolescence*, 25(3), 327-339.

Children in Wales (2010). *Participation* Retrieved on 29 July 2012 from <http://www.childreninwales.org.uk/areasofwork/participation/index.html>

Christopher, J. (1999). Situating psychological well-being: Exploring the cultural roots of its theory and research. *Journal of Counselling and Development*, 77, 141-152.

Chung, H. F., Cooke, L., Fry, J., and Hung, I. H. (2015). Factors affecting knowledge sharing in the virtual organisation: Employees' sense of well-being as a mediating effect. *Computers in Human Behavior*, 44, 70-80.

Ciairano, S., Bonino, S., Kliewer, W., Miceli, R., and Jackson, S. (2006). Dating, sexual activity, and well-being in Italian adolescents. *Clinical Child Adolescent Psychology*; 35(2):275-82.

Clarke, A., Friede, T., Putz, R., Ashdown, J., Martin, S., Blake, A., and Stewart-Brown, S. (2011). Warwick-Edinburgh Mental Well-being Scale (WEMWBS): validated for teenage school students in England and Scotland. A mixed methods assessment. *BMC Public Health*, 11(1), 487.

Clark, L. (2014, December 17). *Morgan's £5m to help pupils develop 'grit': Education Secretary insists expanding children's character should be as important as getting good grades* The Daily Mail Retrieved 5 January 2015 from <http://www.dailymail.co.uk/news/article-2876920/Morgan-s-5m-help-pupils-develop-grit->

[Education-Secretary-insists-expanding-children-s-character-important-getting-good-grades.html?utm_content=buffer8014d&utm_medium=social&utm_source=twitter.co](https://www.bbc.com/news/education-51444444)
[mandutm_campaign=buffer](https://www.bbc.com/news/education-51444444)

Clarke, S. G., and Haworth, J. T. (1994). “Flow” experience in the daily lives of sixth-form college students. *British Journal of Psychology*, 85, 511–523.

Clonan, S., Chafoulea, S., McDougal, J., and Riley-Tillman, T. (2004). Positive psychology goes to school: Are we there yet? *Psychology in the Schools*, 41, 101–110.

Cobb, N. (2010). *Adolescence – Seventh edition* Sunderland : Sinuar Associates Inc.

Cohen, J. (2006). Social, emotional, ethical, and academic education: Creating a climate for learning, participation in democracy, and well-being. *Harvard educational Review*, 76(2), 201-237.

Cohen, S., Kessler, R. C., and Underwood Gordon, L. (Eds.) (1995). *Measuring stress: A guide for health and social scientists*. New York: Oxford.

Cohen, S., Kamarck, T., and Mermelstein, R. (1983). A global measure of perceived stress. *Journal of Health and Social Behavior*, 24, 386-396

Cohen, G. L., Garcia, J., Purdie-Vaughns, V., Apfel, N., and Brzustoski, P. (2009). Recursive processes in self-affirmation: Intervening to close the minority achievement gap. *Science*, 324, 400–403

Cohen. L., Manion. L., and Morrison. K (2000). *Research methods in education – 5th edition* London: Routledge Falmer

Cohn, M. A., Fredrickson, B. L., Brown, S. L., Mikels, J. A., and Conway, A. M. (2009).

"Happiness unpacked: Positive emotions increase life satisfaction by building resilience"

Emotion vol.9 no.3 p.361.

Cole, D. A., et al., (2006). Stress exposure and stress generation in child and adolescent

depression: a latent trait-state-error approach to longitudinal analysis. *Journal of abnormal psychology*, 115, 4051.

Compas, B. E., and Wagner, B. M. (1991). Psychosocial stress during adolescence:

Intrapersonal and interpersonal processes. *Adolescent stress: Causes and consequences*, 67-85.

Cook, J., Purdie-Vaughns, V., Garcia, J., and Cohen, G. (2011, April). *Longitudinal impact of a values affirmation and its timing on minority students' belonging and performance in middle school*. Presentation at the biennial meeting for the Society for Research in Child

Development, Montreal, Canada.

Cooley, C. H. (1902). Human nature and the social order. New York: Scribner. Cohen, G. L.,

Garcia, J., Apfel, N., and Master, A. (2006). Reducing the racial achievement gap: A social-psychological intervention. *Science*, 313, 1307–1310.

Coolican, H. (2009). *Research Methods and Statistics in Psychology – 5th Edition* London:

Hodder Education

Cooper, P. J. (1995). *Communication for the classroom teacher (5th ed.)*. Scottsdale, AZ:

Forsuch Scarisbrick, Publishers

Cooper, B. (2011). *Empathy in Education: Engagement Values and Achievement* London: Bloomsbury Publishing.

Cooper, B. (2004). Empathy, Interaction and Caring: Teachers' Roles in a Constrained Environment *Pastoral Care in Education*, 22(3), 12-21.

Conservative Party (2010). Invitation to Join the Government of Britain – The Conservative Manifesto 2010 Retrieved 14 June 2013 from <https://www.conservatives.com/~media/files/activist%20centre/press%20and%20policy/manifestos/manifesto2010>

Corden, A., and Sainsbury, R. (2006). *Using verbatim quotations in reporting qualitative social research: the view of research users*. University of York: Social Policy Research Unit

Corp, N., Tsaroucha, A., and Kingston, P. (2008). Human givens therapy: The evidence base. *Mental Health Review Journal*, 13, 44–52.

Couper, M. P., and B. Rowe. (1996). Evaluation of a Computer-Assisted Self-Interview Component in a Computer-Assisted Personal Interview Survey. *Public Opinion Quarterly* 60:89–107.

Couper, M. , Traugott, M., and Lamias, M. (2001). Web Survey Design and Administration *Public Opinion Quarterly*, vol 65, pp.230-253

Cove, E., Eiseman, M., and Popkin, S. J. (2005). *Resilient children: literature review and evidence from the HOPE VI panel study*. Urban Institute.

http://www.urban.org/uploadedpdf/411255_resilient_children.pdf Accessed June, 3, 2010

Covey, S. (2007). *The 7 Habits of Highly Effective Teens Workbook* London: FranklinCovey

Covey, S. (2004). *The 7 Habits of Highly Effective Teenagers* London: Simon and Schuster

Cox, T. (1978). *Stress* London, Macmillan

Cox, W. M., Pothos, E. M., and Hosier, S. G. (2007). Cognitive-motivational predictors of excessive drinkers' success in changing. *Psychopharmacology*, 192(4), 499-510.

Cox, W.M., and Klinger, E. (2002). Motivational structure: Relationships with substance abuse and processes of change. *Addictive Behaviors*, 27, 925-940.

Cox, M., and Klinger, E. (Eds) (2004). *Handbook of Motivational Counseling – Concepts, approaches and assessment* Chichester: John Wiley and Sons Ltd.

Coyle, L. D., and Vera, E. M. (2013). Uncontrollable stress, coping, and subjective well-being in urban adolescents. *Journal of Youth Studies*, 16(3), 391-403.

Creswell, J. W. and Plano Clark, V. P., (2011). *Designing and conducting mixed methods research – 2nd Edition* London: Sage

Cripps, K., and Zyromski, B. (2009). Adolescents' Psychological Well-Being and Perceived Parental Involvement: Implications for Parental Involvement in Middle Schools. RMLE Online: *Research in Middle Level Education*, 33(4), n4.

Crisp, R. (2008), "Well-Being", *The Stanford Encyclopedia of Philosophy* (Winter 2008 Edition), Edward N. Zalta (ed.), Retrieved 16 January 2011 from <http://plato.stanford.edu/archives/win2008/entries/well-being/>

Cruise, S., Lewis, C, and McGuckin, C (2006). "Internal consistency, reliability, and temporal stability of the Oxford Happiness Questionnaire short-form: Test-retest data over two weeks." *Social Behavior and Personality: an international journal* 34.2: 123-126.

Csikszentmihalyi, M. (1975). *Beyond boredom and anxiety*. San Francisco. Jossey-Bass.

Csikszentmihalyi, M. (1997). *Finding flow: The psychology of engagement with everyday life*. New York: Basic Books.

Csikszentmihalyi, M. (2002). *Flow: The Classic work on how to achieve happiness*. London: Rider Books

Csikszentmihalyi, M., and Hunter, J. (2003). Happiness in everyday life: The uses of experience sampling. *Journal of Happiness Studies*, 4, 185–199.

Csikszentmihalyi, M., Rathunde, K., and Whalen, S. (1993). *Talented teenagers: A longitudinal study of their development*. New York: Cambridge University Press

Cummins, R. (1995). On the trail of the gold standard for life satisfaction. *Social Indicators Research*, 35, 179–200.

Cummins, R. (1998). The second approximation to an international standard of life satisfaction. *Social Indicators Research*, 43, 307–334.

Cummins, R. (2010). Subjective wellbeing, homeostatically protected mood and depression: A Synthesis. *Journal of Happiness Studies*, 11, 1–17

Cummins, R. A., Knapp, T. M., Woerner, J., Walter, J., and Page, K. (2005). *Australian Unity Wellbeing Index: Report 13.1: The personal wellbeing of Australians living within federal electoral divisions*. Australian Unity Limited.

Cushman, P., Clelland, T., and Hornby, G. (2011). Health-promoting schools and mental health issues: a survey of New Zealand schools Pastoral Care in Education *An International Journal of Personal, Social and Emotional Development*, 29:4, 247-260

Davey, C. G., Yücel, M., & Allen, N. B. (2008). The emergence of depression in adolescence: Development of the prefrontal cortex and the representation of reward. *Neuroscience & Biobehavioral Reviews*, 32(1), 1-19.

Davies, P. (2001). *Closing the achievement gap colleges making a difference*. London: LSDA

Day, E. (2012). *On the trail of the Free Hugs founder* Retrieved 7 February 2013

<http://www.theguardian.com/lifeandstyle/2012/sep/02/free-hug-movement-founder>

de Zeeuw, G. (2003). Helping others: Projects or research? *Journal of Community and Applied Social Psychology*, 13, 496–503

Deci, E. L., and Ryan, R. M. (2000). The “what” and “why” of goal pursuits: Human needs and the self-determination of behavior. *Psychological Inquiry*, 4, 227-268.

Deckro, G. R., Ballinger, K. M., Hoyt, M., Wilcher, M., Dusek, J., Myers, P., and Benson, H. (2002). The evaluation of a mind/body intervention to reduce psychological distress and perceived stress in college students. *Journal of American College Health*, 50(6), 281-287.

Delaney, E. (1991). Applying geography in the classroom through structured discussions. *Journal of Geography*, 90, 129–133.

Department for Children, Education, Lifelong Learning and Skills (2008). *Personal and social education framework for 7 to 19-year-olds in Wales* Cardiff: Welsh Assembly Government

Department for Children, schools and families (2007) *Children and Young People Today - Evidence to support the development of the Children’s Plan* Retrieved 17 March 2012 from https://www.education.gov.uk/publications/eOrderingDownload/Childrenandyoung_people_today.pdf

Department for Communities and Local Government (2006). *Strong and prosperous Communities - The Local Government White Paper* Norwich: HMSO

Department for Environment, Food and Rural Affairs (2007). *Sustainable development indicators in your pocket 2007* London: DEFRA

Department of Health (2004). *Choosing Health – making healthier choices easier* Norwich: The Stationary Office

Department of Health (2009). *Healthy Further Education Programme* London: Department of Health

Dewey, J. (1933). *How we think: A restatement of the reflective thinking to the educative process*. Heath.

Diener, E. (1984). Subjective well-being. *Psychological Bulletin*, 95, 542-75.

Diener, E. (1994). Assessing subjective well-being: Progress and opportunities. *Social indicators research*, 31(2), 103-157.

Diener, E. (2006). Guidelines for national indicators of subjective well-being and ill-being. *Applied Research in Quality of Life*, 10, 1-7.

Diener, E. (2009). Subjective Well-Being. In E. Diener (Ed.), *The Science of Well-Being* (Vol. 37, pp. 11-58). New York: Springer.

Diener, E., Helliwell, J. F., and Kahneman, D. K. (2010). Introduction. In E. Diener, J. F. Helliwell, and D. K. Kahneman (Eds.), *International Differences in Well-Being* (pp. ixvii). Oxford: Oxford University Press.

Diener, E., and Lucas, R. E. and Oishi, S. (2002). Subjective well-being: The science of happiness and life satisfaction. In C.R. Snyder and S.J. Lopez (Ed.), *Handbook of Positive Psychology*. Oxford and New York : Oxford University Press.

Diener, E. and Seligman, M. (2004) *Beyond Money – Toward an economy of well-being*
Psychological Science in the Public Interest Vol5. No.1 p.1-31

Diener, E. and Suh, E. (1997). Measuring quality of life: Economic, social, and subjective indicators. *Social Indicators Research*, 40 (1-2), 189-216.

Diener, E., Suh, E. M., Lucas, R. E., and Smith, H. L. (1999). Subjective well-being: Three decades of progress. *Psychological Bulletin*, 125, 276–302.

DiMatteo, M. R. (2004). Social support and patient adherence to medical treatment: A meta-analysis. *Health Psychology*, 23, 207-218.

Director of Public Health (2015). *Positive choices for better health in a growing city* Plymouth City Council

Dodge, R., Daly, A., Huyton, J., Sanders, L. (2012). The challenge of defining wellbeing. *International Journal of Wellbeing*, 2(3), 222-235.

Doidge, N. (2007) *The Brain that Changes Itself* London: Penguin

Donaldson, G. (2015). *Successful Futures Independent Review of Curriculum and Assessment Arrangements in Wales* Cardiff: OGL

Draper, C. E., Micklesfield, L. K., Kahn, K., Tollman, S. M., Pettifor, J. M., Dunger, D. B., and Norris, S. A. (2014). Application of Intervention Mapping to develop a community-based

health promotion pre-pregnancy intervention for adolescent girls in rural South Africa:

Project Ntshembo (Hope). *BMC public health*, 14(Suppl 2), S5.

Duckworth, A. L., Steen, T. A., and Seligman, M. E. P. (2005). Positive psychology in clinical practice. *Annual Review of Clinical Psychology*, 629–651.

Duhigg, C. (2012). *The Power of Habit: Why We Do What We Do in Life and Business* London: Random House

Dunsmuir, S. and Iyadurai, S. (2006). Cognitive Behaviour Therapy: Effectiveness, Expertise and Ethics? *DECP Debate*, 122, 15-20.

Duran, C., Lavega, P., Salas, C., Tamarit, M., and Invernó, J. (2015). Educación Física emocional en adolescentes. Identificación de variables predictivas de la vivencia emocional.(Emotional Physical Education in adolescents. Identifying predictors of emotional experience). *CCD. Cultura_Ciencia_Deporte*. 文化-科技-体育 doi: 10.12800/ccd, 10(28), 5-18.

Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., and Schellinger, K. D., (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development*, 82 (1), 405–432.

Dweck, C. (2006a). *Mindset: The new psychology of success*. London, England: Random House.

Dweck, C (2006b) *Mindset – How you can fulfil your potential* London: Constable and Robinson

Dweck, C. S. (2008). Can personality be changed? The role of beliefs in personality and change. *Current Directions in Psychological Science*, 17(6), 391-394.

Easton, M. (2005). *Britain's Happiness in Decline* Retrieved 15 April 2014 from

http://news.bbc.co.uk/1/hi/programmes/happiness_formula/4771908.stm

e della Comunicazione, S. D. F. (2015). *The ecological well-being and job satisfaction in Primary Schools Teachers: a comparative study between the Arab-Israeli Teachers and the Palestinian (West Bank and Gaza strip).*- PhD Thesis

Eccles, J. S., and Barber, B. L. (1999). Student council, volunteering, basketball, or marching band: What kind of extracurricular involvement matters? *Journal of Adolescent Research*, 14, 10–43;

Eccles, J. S., and Gootman, J. A. (Eds.). (2002). *Community Programs to Promote Youth Development/Committee on Community-Level Programs for Youth*. Washington, DC: National Academy Press

Education and Inspections Act 2006. (c.40). London: OPSI

Edwards, A. L. (1957). *The social desirability variable in personality assessment and research*. Dryden. New York.

Eisenhart, M., and DeHaan, R.L. (2005). Doctoral preparation of scientifically based educational researchers. *Educational Researcher*, 34(4): 3-13.

El Ansari, W., and Stock, C. (2010). Is the health and wellbeing of university students associated with their academic performance? Cross sectional findings from the United Kingdom. *International Journal of Environmental Research and Public Health*, 7, 509–527.

Elkind, D. (1967). Egocentrism in adolescence. *Child Dev* 38(4):1025–1034

Ellis, A. (1997). *Stress counselling: A rational emotive behaviour approach* . London: Cassell.

Ellis, A., and Dryden, W. A. (1987). *The practice of rational emotive therapy* . New York: Springer

Emerson, E. (1985). Evaluating the impact of deinstitutionalization on the lives of mentally retarded people. *American Journal of Mental Deficiency*, 90(3), 277-288.

Emmons, R. A. (1999). *The psychology of ultimate concerns: Motivation and spirituality in personality*. Guilford Press.

Emmons, R.A., and Diener, E. (1986). A goal-affect analysis of everyday situational choices. *Journal of Research in Personality*, 20, 309–326.

ESTYN (2009). *Common Inspection Framework from September 2010* Cardiff: ESTYN

ESTYN (2010). *Guidance for the inspection of further education institutions from September 2010* Retrieved 11 December 2011

<http://www.estyn.gov.uk/publications/Guidance%20for%20the%20inspection%20of%20further%20education%20institutions%20September%202010.pdf>

Escolme, R., James, K., and Aylward, N. (2002). *Healthy Colleges, A study and report into how Further Education Colleges can promote health and well-being*. Leicester: NIACE.

Etchinson, C. (1988). *Literature without lectures: An approach that works*. East Lansing, MI: National Center for Research on Teacher Learning. (ERIC Document Reproduction Service No.ED300830)

European Commission (2005). *Green Paper- Improving the mental health of the population: Towards a strategy on mental health for the European Union* Brussels: European Commission

Ewens, W. (2000). Teaching using discussion. In R. Neff and M. Weimer (Eds.), *Classroom communication: Collected readings for effective discussion and questioning* (pp. 21–26). Madison WI: Atwood Publishing

Fadardi, J. S., and Cox, W. M. (2009). Reversing the sequence: reducing alcohol consumption by overcoming alcohol attentional bias. *Drug and alcohol dependence, 101*(3), 137-145.

Fattore, T., Mason, J., and Watson, E. (2006). Children's conceptualisations of their wellbeing, *Social Indicators Research, 80, 5, 29*

Fegter, S., Machold, C., and Richter, M. (2010). Children and the Good Life: Theoretical Challenges. In S. Andresen, I. Diehm, U. Sander, and H. Ziegler (Eds.), *Children and the Good Life: New Challenges for Research on Children*. Dordrecht Heidelberg London New York: Springer

Felce, D. and Perry, J. (1995). Quality of life: Its definition and measurement. *Research in Developmental Disabilities, 16*(1), 51-74.

Field, J. (2009). *Wellbeing and Happiness: IFLL Thematic Paper 4*, NIACE

Field, A. (2012). *Assumptions Part 1: Normality* accessed at <http://discoveringstatistics.blogspot.co.uk/2012/08/assumptions-part-1-normality.html>

Field, A. (2013). *Discovering Statistics Using IBM SPSS Statistics – 4th Edition* London: Sage

Field, S., and Hoffman, A. (1994). Development of a Model for Self-Determination. *Career development for exceptional individuals*, 17(2), 159-69.

Finlay, L. (2002). "Outing" the researcher: The provenance, process, and practice of reflexivity. *Qualitative health research*, 12(4), 531-545.

Finlay, L., & Gough, B. (Eds.). (2003). *Reflexivity: A practical guide for researchers in health and social sciences*. John Wiley & Sons.

Fischer, K. (2009). Mind, Brain, and Education: Building a Scientific Groundwork for Learning and Teaching Mind, *Brain and Education* 3,1, 3-16

Flavin, P., Pacek, A. C., and Radcliff, B. (2011). State Intervention and Subjective Well-Being in Advanced Industrial Democracies. *Politics and Policy*, 39(2), 251-269.

Folkman, S., Lazarus, R. S., Dunkel-Schetter, C., DeLongis, A., and Gruen, R. J. (1986). Dynamics of a stressful encounter: cognitive appraisal, coping, and encounter outcomes. *Journal of personality and social psychology*, 50(5), 992.

Fontaine, K.R., Manstead, A.S., and Wagner, H. (1993). Optimism, perceived control over stress, and coping. *European Journal of Personality* 7(4): 267–281

Fordyce, M. W. (1977). Development of a program to increase personal happiness. *Journal of Counseling Psychology*, 24, 511–520.

Fordyce, M. W. (1983). A program to increase happiness: Further studies. *Journal of Counseling Psychology*, 30, 483–498.

Foresight Mental Capital and Wellbeing Project (2008). *Final Project report*. The Government Office for Science, London.

Forgeard, M. J. C., Jayawickreme, E., Kern, M. and Seligman, M. E. P. (2011). Doing the right thing: Measuring wellbeing for public policy. *International Journal of Wellbeing*, 1(1), 79-106.

Foster, A. (2005). *Realising the potential: A review of the future role of further education colleges*. Annesley: DfES Publications Retrieved 10 July 2014 from <http://www.dfes.gov.uk/furthereducation/uploads/documents/REALISING06.pdf>

Fraillon, J. (2005). *Measuring student wellbeing in the context of Australian schooling* . <http://www.mceetya.edu.au/verve/resources> Accessed February 6, 2010.

Francis, L. J., Brown, L. B., Lester, D., and Philipchalk, R., (1998). Happiness as stable extraversion: A cross-cultural examination of the reliability and validity of the Oxford happiness inventory among students in the UK, USA, Australia, and Canada. *Personality and Individual Differences*, 24, 167-171.

Frazer, S. (2008). *A wellbeing framework for Scotland: A better way for measuring society's progress in the 21st Century* Stirling: Forward Scotland

Fredrickson, B. and Joiner, T. (2002). Positive emotions trigger upward spirals toward emotional wellbeing. *Psychological Science*, 13, 172–175.

Fredrickson, B. L. (1998). What good are positive emotions? *Review of General Psychology*, 2, 300–319.

Fredrickson, B. L., Tugade, M. M., Waugh, C. E., and Larkin, G. (2003). What good are positive emotions in crises? A prospective study of resilience and emotions following the terrorist

attacks on the United States on September 11th, 2001. *Journal of Personality and Social Psychology*, 84, 365–376.

Fredrickson, B. L., Cohn, M. A., Coffey, K. A., Pek, J., & Finkel, S. M. (2008). Open hearts build lives: positive emotions, induced through loving-kindness meditation, build consequential personal resources. *Journal of personality and social psychology*, 95(5), 1045.

Friedli, L. (2009). *Mental health, resilience and inequalities* Copenhagen: World Health Organization

Froh, J., Sefick, W., and Emmons, R. A. (2008). Counting blessings in early adolescents: An experimental study of gratitude and subjective well-being. *Journal of School Psychology*, 46, 213–233.

Froh, J., Yurkewicz, C., and Kashdan, T. (2009). Gratitude and subjective well-being in early adolescence: examining mechanisms and gender differences. *Journal of Adolescence*, 32, 633–650.

Fullan, M. (1982) *The Meaning of Educational Change* New York: Columbia University Press

Furedi, F. (2008) *Pursuit of happiness is personal* The Australian, 7 August Retrieved 15 May 2013 from <http://www.frankfuredi.com/site/P449>

Furnham, A., and Brewin, C. R. (1990). Personality and happiness. *Personality and Individual Differences*, 11, 1093-1096.

Gabhainn, N. and Sixsmith, J. (2005). *Children's Understandings of Wellbeing* (Centre for Health Promotion Studies, Department of Health Promotion, National University of Ireland).

Gable, S. L., and Haidt, J. (2005). What (and why) is positive psychology? *Review of General Psychology, 9*, 103–110.

Gable, S. L., Gonzaga, G. C., and Strachman, A. (2006). Will you be there for me when things go right? Supportive responses to positive event disclosures. *Journal of Personality and Social Psychology, 91*, 904–917.

Gall, M. D., Gall, J. P., & Borg, W. R. (2003). *Action research. Educational Research: An Introduction*, Pearson Education, Inc., Boston, 578-597.

Gander, F., Proyer, R. T., Ruch, W., and Wyss, T. (2013). Strength-based positive interventions: further evidence for their potential in enhancing well-being and alleviating depression. *Journal of Happiness Studies, 14*(4), 1241-1259.

Garaulet, M., Ortega, F. B., Ruiz, J. R., Rey-Lopez, J. P., Beghin, L., Manios, Y., and Moreno, L. A. (2011). Short sleep duration is associated with increased obesity markers in European adolescents: effect of physical activity and dietary habits. The HELENA study. *International journal of obesity, 35*(10), 1308-1317.

Garland, E. L., Fredrickson, B., Kring, A. M., Johnson, D. P., Meyer, P. S., & Penn, D. L. (2010). Upward spirals of positive emotions counter downward spirals of negativity: Insights from the broaden-and-build theory and affective neuroscience on the treatment of emotion dysfunctions and deficits in psychopathology. *Clinical psychology review, 30*(7), 849-864.

Gaspar, D (2004) *Discussion Paper No. 2004/06 Human Well-being: Concepts and Conceptualizations* April 2004 Retrieved 21 July 2013 from http://www.wider.unu.edu/publications/working-papers/discussion-papers/2004/en_GB/dp2004-006/files/78091738193724471/default/dp2004-006.pdf

Gaspar, D. (2007). Uncounted or illusory blessings? Competing responses to the Easterlin, Easterbrook and Schwartz paradoxes of well-being. *Journal of International Development*, 19(4), 473-492.

Gecas, V., and Schwalbe, M. L. (1986). Parental behavior and adolescent self-esteem. *Journal of Marriage and the Family*, 37-46.

Gibbs, A. (1997). Focus groups. *Social research update*, 19(8), 1-8.

Gibson, A. (2015). *A Mind for Business* London: Pearson

Gil, S., and Droit-Volet, S. (2009). Time perception, depression and sadness. *Behavioural Processes*, 80(2), 169-176.

Gillham, J., Adams-Deutsch, Z., Werner, J., Reivich, K., Coulter-Heindl, V., Linkins, M., ... and Seligman, M. E. (2011). Character strengths predict subjective well-being during adolescence. *The Journal of Positive Psychology*, 6(1), 31-44

Gillham, J., and Reivich, K. (2004). *Cultivating optimism in childhood and adolescence*. The Annals

Gilman, R. (2001). The relationship between life satisfaction, social interest and frequency of extracurricular activities among adolescent students. *Journal of Youth and Adolescence*, 20, 749-767

Gilmore, T. N., and Schall, E. (1996). Staying alive to learning: Integrating enactments with case teaching to develop leaders. *Journal of Policy Analysis and Management*, 15(3), 444–457.

Ginsberg, K. and Jablow, M. (2006). *A parent's guide to building resilience in children and teens: giving your child roots and wings* Elk Grove, CA,: American Academy of Pediatrics

Ginsburg. K and Jablow. M (2011) *Building Resilience in Children and Teens – Giving kids roots and wings* IL: American Academy of Pediatrics

Glenmullen, J. (2001). *Prozac backlash: Overcoming the dangers of Prozac, Zoloft, Paxil, and other antidepressants with safe, effective alternatives*. Simon and Schuster.

Goldstein, L., and Lake, V. (2000). Love, love, and more love for children: Exploring preservice teachers' understandings of caring. *Teaching and Teacher Education*, 16 (8), 861–872.

Golparvar, M., and Abedini, H. (2014). The Relationship between Spirituality and Meaning at Work and the Job Happiness and Psychological Well-Being: A Spiritual-Affective Approach to the Psychological Well-Being. *International Journal of Management and Sustainability*, 3(3), 160-175.

Goodman, R. (1997). The Strengths and Difficulties Questionnaire: A research note. *Journal of Child Psychology and Psychiatry*, 38, 581–586.

Goodman, R. (1999). The extended version of the Strengths and Difficulties Questionnaire as a guide to child psychiatric caseness and consequent burden. *Journal of Child Psychology and Psychiatry*, 40, 791-801.

Goodman, R. (2001). Psychometric properties of the Strengths and Difficulties Questionnaire. *Journal of American Academy Child and Adolescent Psychiatry* 40:1337–1345

Goodman, R., Meltzer, H., and Bailey, V. (1998). The strengths and difficulties questionnaire: A pilot study on the validity of the self-report version. *Europ Child and Adolesc Psychiatry* 7:125–130

Goodman, T. A. (2005). Working with children: Beginner's mind. In C. K. Germer, R. D. Siegel, and P.R. Fulton (Eds.), *Mindfulness and psychotherapy*. New York: Guilford.

Google Scholar (2015). *My citations* Retrieved 15 December 2015 from <https://scholar.google.co.uk/citations?user=TTOKdL8AAAAJandhl=en>

Google Trends (2015) Data for the term 'wellbeing' Retrieved 2 February 2016 from <https://www.google.co.uk/trends/explore#q=wellbeinganddate=1%2F2004%20145mandcmpt=qandtz=Etc%2FGMT>

Gosling, S, Vazire, S, Srivastava, S and John, P (2004). Should We Trust Web-Based Studies? A Comparative Analysis of Six Preconceptions About Internet Questionnaires *American Psychologist* Vol. 59, No. 2, 93–104

Grant, K.E., Compas, B.E., Stuhlmacher, A.F., Thurm, A.E., McMahon, S.D., and Halpert, J.A. (2003). Stressors and child and adolescent psychopathology: Moving from markers to mechanisms of risk. *Psychological Bulletin*, 129, 447-466.

Gray, D. E. (2013). *Doing research in the real world*. Sage.

Green, J. (2000). The role of theory in evidence-based health promotion practice. *Health Education Research*, 15(2), 125-129.

Green, S., Anthony, T., and Rynsaardt, J. (2007). Evidence-based life coaching for senior high school students: Building hardiness and hope. *International Coaching Psychology Review*, 2, 24–32.

Green, S., Oades, L., and Robinson, P. (2011). Positive education: Creating flourishing students, staff and schools. *InPysch*, 16-17, April.

Greenberg, M., Weissberg, R., O'Brien, M. U., Zins, J. E., Fredericks, L., Resnik, H., and Elias, M. (2003). Enhancing school-based prevention and youth development through coordinated social, emotional, and academic learning. *American Psychologist*, 58, 466–474.

Griffin, J. (1986). *Well-Being: Its meaning, measurement and moral importance*. Oxford: Clarendon Press.

Griffin, J., and Tyrrell, I. (2003). *Human givens: A new approach to emotional health and clear thinking*. Chalvington: Human Givens Publishing Ltd.

Griffin, J., and Tyrrell, I. (2007). *An idea in practice: Using the human givens approach*. Chalvington: Human Givens Publishing Ltd.

Gustafson, K., and Bennett, W. (1999). Issues and difficulties in promoting learner reflection: Results from a three-year study. <http://it.coe.uga.edu/~kgustafs/document/promoting.html>

Gutman, L. M., Brown, J., Akerman, R., and Obolenskaya, P. (2010). *Change in Wellbeing from Childhood to Adolescence: Risk and Resilience*. London: Centre for Research on the Wider Benefits of Learning, Institute of Education.

Haglund, M. E. M., Nestadt, P. S., Cooper, N. S., Southwick, S. M., and Charney, D. S. (2007). Psychobiological mechanisms of resilience: Relevance to prevention and treatment of stress related psychopathy. *Development and Psychopathology*, 19 (3), 889–920.

Hale, S. (1990). A global developmental trend in cognitive processing speed. *Child Development*, 61, 653–663.

Hallsworth, M., Parker, S. and Rutter, J. (2011). *Policy-making in the Real World : Evidence and Analysis* London: Institute for government

Hamilton, S. (1980). Experiential Learning Programs for Youth *American Journal of Education*, Vol. 88, No. 2 pp. 179-215

Hanafin, S., Brooks, A.M., Carroll, E., Fitzgerald, E., Gabhainn, S.N., and Sixsmith, J. (2007). Achieving consensus in developing a national set of child well-being indicators *Social Indicators Research* 80, 79-104

Harden, A., R. Rees, J. Shepherd, G. Brunton, S. Oliver, and A. Oakley. (2001). *Young people and mental health: A systematic review of research on barriers and facilitators*. London: EPPI-Centre. Retrieved 12 August 2014 from http://eppi.ioe.ac.uk/EPPIWebContent/hp/reports/mental_health/mental_health.pdf

Harris, A., and Goodall, J. (2008). Do parents know they matter? Engaging all parents in learning. *Educational Research*, 50(3), 277-289.

Hart, A. and Heaver, B. (2013). Evaluating resilience-based programs for schools using a systematic consultative review. *Journal of Child and Youth Development*, 1(1), 27–53.

Harter, S, (1987), The determinants and mediational role of global self-worth in children in Eisenberg. N (ed.) *Contemporary issues in Developmental Psychology* New York: Wiley

Hatton, N., Smith, D. (1995). *Reflection in Teacher Education: Towards Definition and Implementation. The University of Sydney: School of Teaching and Curriculum Studies*

Retrieved 16 June 2012 from

<http://www2.edfac.usyd.edu.au/LocalResource/Study1/hattonart.html>

Hayter, N,, Robertson Cooper Ltd and Shutler-Jones, K. (2011). *Designing and evaluating interventions – ‘how to guide’* Retrieved 11 February 2014 from

<http://www.ucea.ac.uk/download.cfm/docid/32B9E0BB-1AC3-4731-9040F8F4427EF06F>.

Headey, B. (2006). Happiness: Revising set point theory and dynamic equilibrium theory to account for long term change. Berlin: DIW German Institute for Economic Research.

Headey, B.W. and Wearing, A.J. (1989). Personality, life events and subjective well-being: Toward a dynamic equilibrium model. *Journal of Personality and Social Psychology*, 57, 731-39.

Headey, B.W. and Wearing, A.J. (1991). Subjective well-being: a stocks and flows framework. In Strack.F., Argyle.M., and Schwarz.N. (1991) *Subjective Wellbeing – An interdisciplinary perspective* (pp.49-76) Oxford: Pergamon Press.

Headey, B.W. and Wearing, A.J. (1992). *Understanding happiness: A theory of subjective well-being*. Melbourne: Longman Cheshire.

Headey,B., Holmstrom, E., and Wearing, A. (1984a). The impact of life events and changes in domain satisfactions on well-being. *Social Indicators Research*, 15, 203-227.

Headey, B. W., Holmstrom, E., and Wearing, A. J. (1984b). Well-being and ill-being: Different dimensions? *Social Indicators Research*, 14, 115–139

Hektner, J.M. and Csikszentmihalyi, M. (1996). *A longitudinal exploration of flow an intrinsic motivation in adolescents. Paper presented at the annual meeting of the American education research association*, New York. Alfred Sloan Foundation.

Heller, F. (ed) (1986). *The Use and Abuse of Social Science*. Newbury Park and London: Sage

Henderson, M., Tweedie, S., Smillie, S., and Wight, D. (2014). Social and Emotional Education and Development (SEED): a stratified, cluster randomised trial of a multi-component primary school intervention in Scotland. *The European Journal of Public Health*, 24(suppl 2), cku163-048.

Hendry, L. B., and Kloep, M. (2002). *Lifespan development: Resources, challenges and risks*. London: Thomson Learning.

Hendry, L.B., and Reid, M. (2000). Social relationships and health: the meaning of social “connectedness” and how it relates to health concerns for rural Scottish adolescents. *Journal of Adolescence*, 23: 705-719.

Hertenstein, J. H. (1991). Patterns of participation. In C. R. Christensen, D. A. Garvin, and A. Sweet (Eds.), *Education for judgment: The artistry of discussion leadership* (pp. 175–191). Boston: Harvard Business School Press.

Herzlich, C. (1973). *Health and Illness – A social psychological analysis*. London: Academic Press.

Hibzta, S. (2009). *Supersize Me in 7 mins: How too much of McDonald's will make you feel!*

Retrieved 18 November 2013 from

https://www.youtube.com/watch?feature=player_embedded&v=N2diPZOtty0

Hicks, S., Newton, J., Haynes, J., and Evans, J. (2011). *Measuring Children's and Young People's Well-being* Newport: ONS

Hills, P., and Argyle, M. (2001). Emotional stability as a major dimension of happiness. *Personality and Individual Differences*, 31, 1357-1364.

Hills, P., and Argyle, M. (2002). The Oxford Happiness Questionnaire: a compact scale for the measurement of psychological well-being *Personality and Individual Differences* 33 (2002) 1073–1082

Hitchcock, G., and Hughes, D. (2001). *Research and the Teacher – A Qualitative Introduction to School-based Research* London: Routledge Falmer

Hlatshwayo, P. (2014). *Relationship of healthcare assistants working hours, job tenure to job satisfaction and job-related affective well-being.* – Thesis

HM Government (2000). *Local Government Act 2000* Norwich: HMSO

HM Government (2005). *Securing the future delivering UK sustainable development strategy* Norwich: HMSO

HM Government (2010a). *Confident Communities, Brighter Futures - A framework for developing well-being* London: Department of Health

HM Government (2010b). *The Coalition: our programme for government* London: The Cabinet Office

HM Treasury (2008). *Developments in the economics of well-being* Richmond: Office of Public Sector Information

HM Treasury (2010). *Budget Report* London: The Stationary Office

HMSO (2003). *Every Child Matters* HMSO

Hobfoll, S. E. (1989). Conservation of resources: A new attempt at conceptualizing stress. *American Psychologist*, 44, 513–524.

Hobfoll, S. E. (2002). Social and psychological resources and adaptation. *Review of General Psychology*, 6, 307–324.

Hodgson, D. (2006). *The Buzz – a practical confidence builder for teenagers* Carmarthen: Crown House

Hoechsmann, M. (2008). Audience Incorporated (Inc.) Youth Cultural Production and the New Media *Journal of Curriculum Theorizing*, Volume 24, Number 1, 60-70

Honkala, S. (2014). World Health Organization approaches for surveys of health behaviour among schoolchildren and for health-promoting schools. *Medical Principles and Practice*, 23(Suppl. 1), 24-31.

Horne, J. A. (1981). The effects of exercise upon sleep: a critical review. *Biological psychology*, 12(4), 241-290.

Hosier, S. G. (2002). *Results of briefly intervening with students to reduce their excessive alcohol consumption*. Unpublished doctoral dissertation, University of Wales, Bangor, UK.

Hosier, S. G., and Cox, W. M. (2002). *Factors predicting heavy alcohol use and alcohol-related problems among university students.*

Howard-Jones, P. (2007). *Neuroscience and Education: Issues and Opportunities - A Commentary by the Teaching and Learning Research Programme* London: Teaching and Learning Research Programme

Huebner, E.S. (1994). Preliminary development and validation of a multidimensional life satisfaction scale for children *Psychological Assessment* 6(2): 149-158

Huebner, S. (2010). Feelings Count: Conceptualizing and measuring students' happiness in schools. Communiqué: *The Newspaper of the National Association of School Psychologists*, 39, 1

Huebner, S., Gilman, R., Reschly, A. J., and Hall, R. W. (2009). Positive schools. In S. J. Lopez and C. R. Snyder (Eds.), *Oxford handbook of positive psychology (2nd ed.)* (pp. 651–658). Oxford, England: Oxford University Press.

Hughes, C., Taylor, P., and Tight, M. (1996). The Ever-changing World of Further Education: a case for research, *Research in Post-Compulsory Education*, 1:1, 7-18

Huppert, F. A., and Johnson, D. M. (2010). A controlled trial of mindfulness training in schools: The importance of practice for an impact on well-being. *The Journal of Positive Psychology*, 5(4), 264-274.

Huppert, F., and So, T. (2009). *What percentage of people in Europe are flourishing and what characterises them?* Working paper prepared for the OECD/ISQOLS meeting 'Measuring subjective well-being: an opportunity for NSOs?', Florence, July 23/24 2009.

Hurry, J., Aggleton, P., and Warwick, I. (2000) Introduction. In *Young people and mental health*, ed. P. Aggleton, J. Hurry and I. Warwick, 1–10. Chichester: John Wiley and Sons.

Hursthouse, R. (1999). *On virtue Ethics*. Oxford: Oxford University Press.

Ingoldsby, E. M., Kohl, G. O., McMahon, R. J., Lengua, L., and Conduct Problems Prevention Research Group. (2006). Conduct problems, depressive symptomatology and their co-occurring presentation in childhood as predictors of adjustment in early adolescence. *Journal of abnormal child psychology*, 34(5), 602-620.

IPOS (2012). *Young People Omnibus Survey (2011/2012)* The Sutton Trust

Irvine, B. (2012). *Evolution, philosophy and well-being: A beginners' guide - A talk by Dr Ben Irvine*, given at the Butler Day at St John's College on Saturday 17th March 2012. Retrieved 13 January 2013 from <http://www.sms.cam.ac.uk/media/1230675>

Jacobs Bao, K., and Lyubomirsky, S. (2014). Making happiness last: Using the Hedonic Adaptation Model to extend the success of positive interventions. In Parks, A. (Ed.), *The handbook of positive interventions*. New York: Wiley-Interscience. Bao.

Jacobson, L. (2002). Identifying students' mental health problems in primary care settings. In *Students' mental health needs: problems and responses*, ed. N. Stanley and J. Manthorpe, 121–43. London: Jessica Kingsley Publishers

James, W. (1988). *Writings 1902–1910*. New York: Library of America.

Jephcote, M., Salisbury, J., Rees, G., and Roberts, J. (2008). *Inside Further Education: the social context of learning Teaching and Learning Research Briefing September 2008 No.52* Retrieved 3 July 2014 from <http://www.tlrp.org/pub/documents/JephcoteRB52final.pdf>

Jick, T. D. (1979). Mixing qualitative and quantitative methods: Triangulation in action.

Administrative science quarterly, 602-611.

Jin, B., and Pena, J. F. (2010). Mobile communication in romantic relationships: Mobile phone use, relational uncertainty, love, commitment, and attachment styles.

Communication Reports, 23(1), 39-51.

Johnson, T. and Fendrich, M. (2002). *A validation of the Crowne-Marlowe Social Desirability Scale*. Retrieved 15 May 2015 from

<http://www.srl.uic.edu/publist/Conference/crownemarlowe.pdf>

Jones, C. and Duckett, L. (2004). *Tutorials and target-setting in the effective delivery of vocational A-levels* London: Learning and Skills Development Agency

Joseph, S. and Lewis, C. A. (1998). The Depression-Happiness Scale: Reliability and validity of a bipolar self-report scale. *Journal of Clinical Psychology*, 54, 537-544.

Joseph, S. and Wood, A. (2010). Assessment of positive functioning in clinical psychology: Theoretical and practical issues. *Clinical Psychology Review*, 30, 830–838.

Judge, T., and Kammeyer-Mueller, J. (2011). Happiness as a societal value. *Academy of Management Perspectives*, February, 30–41

Kabat-Zinn, J. (1990). *Full catastrophe living: Using the wisdom of your body and mind to face stress, pain, and illness*. New York: Delacorte

Kabat-Zinn, J. (2005). *Coming to Our Senses: Healing Ourselves and the World Through Mindfulness* New York: Hyperion

Kahneman, D. (1999). Objective happiness. In D. Kahneman, E. Diener, and N. Schwarz (Eds.), *Well-being: The foundations of hedonic psychology* (pp. 3–25). New York: Russell Sage Foundation.

Kahneman, D., Diener, E. and Schwarz, N. (1991). *Foundations of hedonic psychology: Scientific perspectives on enjoyment and suffering* New York: Russell Sage Foundation.

Kahneman, D., Diener, E., and Schwarz, N. (Eds.) (1999) *Well-being: Foundations of hedonic psychology*. New York: Russell Sage Foundation Press.

Kail, R. (1997). Processing time, imagery, and spatial memory. *Journal of Experimental Child Psychology*, 64, 67–78.

Kalra, S., Einarson, A., Karaskov, T., Van Uum, S., and Koren, G. (2007). The relationship between stress and hair cortisol in healthy pregnant women. *Clinical and Investigative Medicine*, 30(2), E103-E107.

Karwoski, L., Garratt, G. M., and Ilardi, S. S. (2006). On the integration of cognitive-behavioral therapy for depression and positive psychology. *Journal of Cognitive Psychotherapy*, 20(2), 159-170.

Keating, D. (2004). Cognitive and brain development. In R. Lerner and L. Steinberg (Eds.), *Handbook of adolescent psychology (2nd ed.)*. New York: Wiley.

Keating, D. P. (1990). Adolescent thinking. In S. S. Feldman and G. R. Elliot (Eds.), *At the threshold: The developing adolescent* (pp. 54–89). Cambridge, MA: Harvard University Press

Kelty Mental Health (2013). *Mindfulness: Youth Voices* Retrieved 11 March 2013 from https://www.youtube.com/watch?feature=player_embedded&v=kk7IBwuhXWM

Kennedy, R. (1968). *Address, University of Kansas, Lawrence, Kansas, March 18, 1968*

Retrieved 1 November 2011 from

<http://www.mcombs.utexas.edu/faculty/michael.brandl/main%20page%20items/Kennedy%20on%20GNP.htm>

Keyes, C. (2002). The mental health continuum: From languishing to flourishing in life.

Journal of Health and Behaviour Research, 43, 207–222.

Keyes, C. (2005). Mental illness and/or mental health? Investigating axioms of the complete state model of health. *Journal of Consulting and Clinical Psychology*, 73(3), 539-48.

Keyes, C. (2009). The nature and importance of positive mental health in America's adolescents. In Gilman, R., Huebner, E., and Furlong, M. (eds) (2009) *Handbook of positive psychology in schools*. New York: Routledge.

Keyes, C. L. M., Shmotkin, D., and Ryff, C. D. (2002). Optimizing well-being: The empirical encounter of two traditions. *Journal of Personality and Social Psychology*, 82, 1007–1022.

KidsHelpPhone (2014). *Are you getting enough sleep?* Retrieved 2 October 2013 from

<http://www.kidshelpphone.ca/Teens/InfoBooth/Physical-Health/Sleep/Are-you-getting-enough-sleep.aspx>

Kim, K.J., et al., (2003). Reciprocal influences between stressful life events and adolescent internalizing and externalizing problems. *Child development*, 74 (1), 127-143.

King, E., De Silva, M., Stein, A., Patel, V. (2009). Interventions for improving the psychosocial well-being of children affected by HIV and AIDS.. *Cochrane Database of Systematic Reviews* 2009, Issue 2. Art. No.: CD006733.

King, M. and Bruner, G. (2000) Social desirability bias: a neglected aspect of validity testing. *Psychology and Marketing*, 17(2):79–103.

King, P. M., and Kitchener, K. S. (1994). *Developing Reflective Judgment: Understanding and Promoting Intellectual Growth and Critical Thinking in Adolescents and Adults*. Jossey-Bass Higher and Adult Education Series and Jossey-Bass Social and Behavioral Science Series. Jossey-Bass, 350 Sansome Street, San Francisco, CA 94104-1310.

Kirby, D., and Coyle, K. (1997). Youth development programs. *Children and Youth Services Review*, 19(5/6), 437–454

Klasen, H., Woerner, W., Wolke, D., Meyer, R., Overmeyer, S., Kasnitz, W., Rothenberger, A., Goodman, R. (2000). Comparing the German versions of the Strengths and Difficulties Questionnaire (SDQ-Deu) and the Child Behavior Checklist. *Europ Child Adolesc Psychiatry* 9:271–276

Kline, P. (1993). *Personality: The psychometric view*. New York: Routledge.

Kline, P. (2000). *Handbook of Psychological Testing 2nd Edition* New York: Routledge

Klinger, E., Cox, W. M., Blount, J. P., Allen, J. P., and Columbus, M. (1995). *Motivational structure questionnaire (MSQ)*.

Kloep, M., Hendry, L., and Saunders, D. (2009). A new perspective on human development. *Conference of the International Journal of Arts and Sciences*, 1(6), 332-343

Kobus, K., and Reyes, O. (2000). A Descriptive Study of Urban Mexican American Adolescents' Perceived Stress and Coping *Hispanic Journal of Behavioral Sciences*, Vol. 22 No. 2, 163-178

Kolb, D. (1984). *Experiential learning as the science of learning and development*. Englewood Cliffs NPH

Konu, A., Lintonen, T., Rimpela, M.K. (2002). Factors associated with schoolchildren's general subjective wellbeing. *Health Education Research*, 17(2): 155-165.

Koskelainen, M., Sourander, A., Kaljonen, A. (2000). The Strengths and Difficulties Questionnaire among Finnish schoolaged children and adolescents. *Europ Child Adolesc Psychiatry* 9:277–284

Krueger, R.A., (1994). *Focus Groups: A Practical Guide for Applied Research*. California: SAGE

Krueger. R and Casey. M (2000). *Focus Groups – A practical guide for applied research – Third Edition* California: Sage

Kuhs, H., Hermann, W., Kammer, K., Tolle, R., (1991). Time estimation and the experience of time in endogenous depression (Melancholia): an experimental investigation. *Psychopathology* 24, 7–11.

Kumar, K and Kadiravan, S (2012) ENHANCING STRESS COPING SKILLS AMONG COLLEGE STUDENTS *International Refereed Research Journal Vol.– III, Issue–4(1),49-55*

Kuykendall, L., and Tay, L. (2015). Employee subjective well-being and physiological functioning: An integrative model. *Health Psychology Open*, 2(1)

La Placa, V., and Knight, A. (2014). Well-being: its influence and local impact on public health. *Public health*, 128(1), 38-42.

La Placa, V., McNaught, A., and Knight, A. (2013). Discourse on wellbeing in research and practice. *International Journal of Wellbeing*, 3(1).

Ladner, J. A. (1971). *Tomorrow's tomorrow: The Black woman*. Garden City, NY: Doubleday.

Land, K.C., Lamb, V.L., and Mustillo, S.K. (2001). Child and youth well-being in the United States, 1975 - 1998: some findings from a new index *Social Indicators Research*, 56: 241-320.

Landers, D. M. (1997). *The influence of exercise on mental health. President's Council on Physical Fitness and Sports*.

Lang, P. L. F. (2003). Affective education in schools: a personal response, in: M. Yuen, P. S. Y.

Lau, T. K. M. Leung, P. M. K. Shea, R. M. C. Chan, E. K. P. Hui and N. C. Gysbers (Eds) *Life skills development and comprehensive guidance program: theories and practices* (Hong Kong: Life Skills Development Project, Faculty of Education, University of Hong Kong), 36–45.

Langston, C. A. (1994). Capitalizing on and coping with daily-life events: Expressive responses to positive events. *Journal of Personality and Social Psychology*, 67, 1112–1125.

Layard, R., and Dunn, J. (2009). *A good childhood* London: Penguin

Layard, R. (2011). *Government's role should be to increase happiness and reduce misery. Policy analysis must be recast to reflect outcomes in terms of changes to happiness. British Politics and Policy at LSE (17 Oct 2011) Blog Entry* Retrieved June 2012 from <http://eprints.lse.ac.uk/39343/>

Layous, K., and Lyubomirsky, S. (2014). The how, who, what, when, and why of happiness: Mechanisms underlying the success of positive interventions. In J. Gruber and J. Moskowitz (Eds.), *The light and dark side of positive emotions*. New York: Oxford University Press.

Layous, K., Lee, H., Choi, I., and Lyubomirsky, S. (2013). Culture matters when designing a successful happiness-increasing activity: A comparison of the United States and South Korea. *Journal of Cross-Cultural Psychology*, 44, 1294-1303.

Lazarus, R. S., and Foikman, S. (1984). *Stress, appraisal and coping*. New York: Springer.

Lécuyer, R. (1975). Space dimensions, the climate of discussion and group decisions
European Journal of Social Psychology Volume 5, Issue 4, 509–514

Lee, A., Cheng, F. F., Fung, Y., & St Leger, L. (2006). Can Health Promoting Schools contribute to the better health and wellbeing of young people? The Hong Kong experience. *Journal of epidemiology and community health*, 60(6), 530-536.

Lee, W., and Oguzoglu, O. (2007). *Well-being and ill-being: A bivariate panel data analysis. Discussion chapter* - Institute for the Study of Labor.

Leeds, M., Stull, W., and Westbrook, J. (1998). Do changes in classroom techniques matter? Teaching strategies and their effects on teaching evaluations. *Journal of Education for Business*, 74, 75–78.

Lefcourt, H. M. (2001). *Humor: The psychology of living buoyantly* . New York: Plenum.

Lefevre, F. (1988). Flow and the quality of experience during work and leisure. In M. Csikszentmihalyi, and I.S. Csikszentmihalyi, (Eds.), *Optimal Experience Psychological studies of flow in consciousness* (pp.307-318).Cambridge University Press.

Le Fevre, M., Matheny, J., and Kolt, G. S. (2003). Eustress, distress, and interpretation in occupational stress. *Journal of Managerial Psychology*, 18(7), 726-744.

Lemma, P., Borraccino, A., Berchialla, P., Dalmasso, P., Charrier, L., Vieno, A., and Cavallo, F. (2014). Well-being in 15-year-old adolescents: a matter of relationship with school. *Journal of Public Health, fdu095*.

Lent, R. W. (2004). Toward a Unifying Theoretical and Practical Perspective on Well-Being and Psychosocial Research. *Journal of Counseling Psychology, 51*(4), 482-509.

Lerner, R. M., Almerigi, J. B., Theokas, C., and Lerner, J. V. (2005). Positive youth development. *Journal of early adolescence, 25*(1), 10-16.

Leventhal, A. M., Martin, R. L., Seals, R. W., Tapia, E., and Rehm, L. P. (2007). Investigating the dynamics of affect: Psychological mechanisms of affective habituation to pleasurable stimuli. *Motivation and Emotion, 31*(2), 145-157.

Levesque, R.J.R. (1993). The romantic experience of adolescents in satisfying love relationships. *Journal of Youth and Adolescence, 22*, 219–251

Levin, B. (2000). Putting students at the centre in education reform *Journal of Educational Change 1,2*, 155-172

Liaghatdar, M., Jafari, E., Abedi, M., and Samiee, F. (2008). Reliability and Validity of the Oxford Happiness Inventory among University Students in Iran *The Spanish Journal of Psychology Vol. 11, No. 1*, 310-313

Lilienfeld, S. O. (2011, June 13). Public skepticism of psychology: Why many people perceive the study of human behavior as unscientific. *American Psychologist. Advance online publication*.

Linley, P. A., and Joseph, S. (Eds.) (2004). *Positive psychology in practice*. Hoboken, NJ: John Wiley and Sons, Inc.

Linley, P. A., Joseph, S., Harrington, S., and Wood, A. M. (2006). Positive psychology: Past, present, and (possible) future. *Journal of Positive Psychology*, 1, 3–16.

Litosseliti, L. (2003). *Using Focus groups in research* London: Continuum

Louis, M. C. (2009). *A summary and critique of existing strengths-based educational research. Utilizing the Clifton StrengthsFinder*. Retrieved 14 February 2013 from

<http://api.ning.com/files/Q34AeAopxJRIK3Rg-wyeKRbhQsr6vMqHag3Ak-AKTQJD7nuw9fOPB4rvpCgkrYhjSy5XiUoHiIMNwG3lwgUyloX8XNSfXqW/Louisresearchreview09.pdf>

Low, R. G. (2014). *Flourish in Sport: Exploring the lived experiences of track and field Olympic Medalists* (Doctoral dissertation, University of Missouri--Columbia).

LSIS (2009). *Supporting learners to succeed - Guidance for pastoral provision – key messages* London: LSIS

Lubans, D. R., Morgan, P. J., Dewar, D., Collins, C. E., Plotnikoff, R. C., Okely, A. D., ... and Callister, R. (2010). The Nutrition and Enjoyable Activity for Teen Girls (NEAT girls) randomized controlled trial for adolescent girls from disadvantaged secondary schools: rationale, study protocol, and baseline results. *BMC Public Health*, 10(1), 652.

Luzzi, A.F., and James, W.P.T. (2001). European diet and public health: the continuing challenge. *Public Health Nutr* 4, 275–292

Lykken, D., and Tellegen, A. (1996). Happiness is a stochastic phenomenon. *Psychological Science*, 7, 186–189.

Lyman, E. L., and Luthar, S. S. (2014). FURTHER EVIDENCE ON THE “COSTS OF PRIVILEGE”: PERFECTIONISM IN HIGH-ACHIEVING YOUTH AT SOCIOECONOMIC EXTREMES. *Psychology in the Schools*, 51(9), 913-930.

Lytle, L.A., and Kubik, M.Y. (2003). Nutritional issues for adolescents. *Best Pract Res Clin Endocrinol Metab* 17, 177–189.

Lyubomirsky, S. (2012). *The How of Happiness – A practical guide to getting the life you want* London: Sphere

Lyubomirsky, S. and Della Porta, M.D. (2010). Boosting happiness, buttressing resilience: Results from cognitive and behavioral interventions. In J.W. Reich, A.J. Zautra, and J.S. Hall (Eds.). *Handbook of adult resilience*. (pp. 450-464). New York: Guilford Press.

Lyubomirsky, S., and Layous, K. (2013). How do simple positive activities increase well-being? *Current Directions in Psychological Science*, 22, 57-62.

Lyubomirsky, S., and Lepper, H. S. (1999). A measure of subjective happiness: Preliminary reliability and construct validation. *Social Indicators Research*, 46, 137–155.

Lyubomirsky, S., Dickerhoof, R., Boehm, J. K., and Sheldon, K. M. (2011). Becoming happier takes both a will and a proper way: An experimental longitudinal intervention to boost well-being. *Emotion*, 11, 391–402.

Lyubomirsky, S., Sheldon, K. M., and Schkade, D. (2005). Pursuing happiness: The architecture of sustainable change. *Review of General Psychology*, 9, 111_131.

MacConville, R., and Rae, T. (2012). *Building Happiness, Resilience and Motivation in Adolescents – a positive psychology curriculum for well-being* London: Jessica Kingsley

Madden, W., Green, S., and Grant, T. (2010). A pilot study evaluating strengths-based coaching for primary school students: Enhancing engagement and hope. *International Coaching Psychology Review*, 6, 71–83.

Madell, D. E., and Muncer, S. J. (2007). Control over social interactions: An important reason for young people's use of the internet and mobile phones for communication? *Cyberpsychology and behavior*, 10(1), 137-140.

Mahar, S., and Sullivan, L. (2002). *Social Competence: A whole school approach to linking, learning and wellbeing*. Melbourne: Department of Education and Training.

Mann, J (2006) *Free Hugs Campaign - Official Page (music by Sick Puppies.net)* Retrieved 11 May 2013 from https://www.youtube.com/watch?v=vr3x_RRjdd4

Manning, J., and Paxman, J. (2015). *Head of Wellbeing - An essential post for secondary schools?* London: 2020 Health Organisation Retrieved 20 January 2015 from <http://www.2020health.org/2020health/Publications/Publications-2015/Head-of-Wellbeing.html>

Marcus, N., and Thompson, S. (2008). *Measuring well-being in policy: issues and applications* London: NEF.

Marryat, L., Thompson, L., McGranachan, M., Barry, S., Sim, F., White, J., and Wilson, P. (2014). *Parenting Support Framework Evaluation Final Report, 2014, Project Report*. NHS Greater Glasgow

Marques, S. C., Pais-Ribeiro, J. L., and Lopez, S. J. (2009). Validation of a Portuguese version of the Children Hope Scale. *School Psychology International*, 30, 538–551.

Marquès-Brocksopp, L. (2012). The broad reach of the wellbeing debate: Emotional wellbeing and vision loss *British Journal of Visual Impairment* 30: 50

Martinsen, E.W., Morgan, W.P. (1997). Antidepressant effects of physical activity. In: Morgan in WP, editor. *Physical activity and mental health*. Washington, DC: Taylor and Francis.p. 93-106.

Martyn, D. (2002). *The experiences and views of self-management of people with a schizophrenia diagnosis*. London: Rethink.

Maslow, A. H. (1954). *Motivation and personality*. New York: Harper and Row, Publishers.

Massimini, F. and Carli, M. (1988). The systematic assessment of flow in daily experience. In

Masten, A. S. (2004). *Regulatory processes, risk and resilience in adolescent development*.

Annals of the New York Academy of Sciences, 1021 , 310–319.

Masten, A. (2001). Ordinary magic. *American Psychologist*, 56(3), 227–238

Masten, A. S., and Obradović, J. (2008). Disaster preparation and recovery: Lessons from research on resilience in human development. *Ecology and Society*, 13 (1), 9.

Mauss, I. B., Tamir, M., Anderson, C. L., and Savino, N. S. (2011). Can seeking happiness make people unhappy? Paradoxical effects of valuing happiness. *Emotion*, 11, 807–815.

Mayers, P. (1978). *Flow in adolescence and its relation to the school experience*.

Unpublished doctoral dissertation, University of Chicago.

McCaffery, Margo, and Alexandra Beebe. (1989) *Pain: Clinical Manual for Nursing Practice*.

St. Louis, MO: C. V. Mosby

McCombs, B., (2004). The learner-centered psychological principles: A framework for balancing academic achievement and social-emotional learning outcomes. In J. Zins, M. Bloodworth, R. Weissberg and H. Walberg (Eds.), *Building academic success in social and emotional learning* (pp. 23– 29). New York: Teachers College Press.

McCrae, R. R. (1986). Well-being scales do not measure social desirability. *Journal of Gerontology*, 41(3), 390-392.

McCreanor, T., Watson, P. and Denny, S. (2006). ‘Just accept us how we are more’: experiences of young Pakeha with their families in Aotearoa New Zealand, *Social Policy Journal of New Zealand*, 27, 156–170.

McGrath, H. and Noble, T. (2003). *The BOUNCE BACK! Classroom Resiliency Program. Teacher’s Handbook. Teacher’s Resource Books, Level 1: K-2; Level 2: Yrs 3-4; Level 3: Yrs 5-8*.

Pearson Ed

McIntyre, L. (2006). *The Practical Skeptic: Core Concepts in Sociology*. 3rd ed. New York: McGraw Hill,

McLaren, K. (2002). *Youth Development Literature Review: Building Strength*. Wellington, New Zealand: Ministry of Youth Affairs.

McLellan, R. and Steward, S. (2014). Measuring children and young people’s wellbeing in the school context, *Cambridge Journal of Education* 1-26

Merzenich, M. M. (2001). Cortical plasticity contributing to child development. *Mechanisms of cognitive development: Behavioral and neural perspectives*, 67-95.

Meyer, J. (1987). Self and life course: Institutionalization and its effects. In G.Thomas et al (Eds.), *Institutional structure* (pp. 242-260). Beverly Hills, CA: Sage.

Mezzacappa, E. S., and Katkin, E. S. (2002). Breast-feeding is associated with reduced perceived stress and negative mood in mothers. *Health Psychology*, 21(2), 187.

Michaelson, J., Abdallah, S., Steuer, N., Thompson, S., and Marks, N. (2009). *National accounts of well-being: Bringing real wealth onto the balance sheet*. London: New Economics Foundation.

Michie, S., Ashford, S., Sniehotta, F. F., Dombrowski, S. U., Bishop, A., & French, D. P. (2011). A refined taxonomy of behaviour change techniques to help people change their physical activity and healthy eating behaviours: the CALO-RE taxonomy. *Psychology & Health*, 26(11), 1479-1498.

Mishra, P., and Vashist, K. (2014). A review study of spiritual intelligence, stress and well-being of adolescents in 21st Century *International Journal of Research in Applied, Natural and Social Sciences Vol. 2, Issue 4, 11-24*

Mitchell, J., Stanimirovic, R., Klein, B., & Vella-Brodrick, D. (2009). A randomised controlled trial of a self-guided internet intervention promoting well-being. *Computers in Human Behavior*, 25(3), 749-760.

Moon, J. (2004). *Reflection in Learning and Professional Development Theory and Practice* Oxon: RoutledgeFalmer

Morgan, D. (1988). *Focus Groups as Qualitative Research* California: Sage

Morgan, D.L., and Krueger, R.A. (1993). When to use focus groups and why. In *Successful Focus Groups: Advancing the State of the Art* (Morgan D., ed.), Sage, London, pp. 3–19

Morgan, N. (2005). *Blame My Brain – The Amazing Teenage Brain Revealed* London: Walker Books

Morrison Gutman, L. and Feinstein, L., (2007). *Parenting behaviours and children's development from infancy to early childhood: changes, continuities and contributions, Research Report No. 22*. London: Centre for Research on the Wider Benefits of Learning.

Morrow, V. and Mayall, B. (2009). What is wrong with children's well-being in the UK? Questions of meaning and measurement. *Journal of Social Welfare and Family Law*, 31(3), 217-229.

Muris, P., Meesters, C., and Van den Berg, F. (2003). The Strengths and Difficulties Questionnaire (SDQ) – Further evidence for its reliability and validity in a community sample of Dutch children and adolescents. *Eur Child Adolesc Psychiatry* 12:1–8

Muss, D. C. (1991). A new technique for treating post-traumatic stress disorder. *British Journal of Clinical Psychology*, 30, 91–92.

Myers, I. (1962). *The Myers-Briggs Type Indicator: Manual* Palo Alto, CA, US: Consulting Psychologists Press. (1962). ii 110 pp.

Nakamura, J. (1988). Optimal experiences and the uses of talent. In M.Csikszentmihalyi and I. Csikszentmihalyi (Eds.), *Optimal experience: Psychological studies of flow in consciousness* (pp.319-326). Cambridge, Cambridge University Press.

Nakamura, J., and Csikszentmihalyi, M. (2002). The construction of meaning through vital engagement. In C. Keyes and J. Haidt (Eds.), *Flourishing* (pp. 83-104). Washington, DC: American Psychological Association Books.

National Institute of Health (1997). *Prevention, Education, and Control. Problem sleepiness in your patient*. NIH Publication No. 97-4073.

National Crime Prevention. (1999). *Pathways to prevention: Developmental and early intervention approaches to crime in Australia*. Canberra: Attorney-General's Department

National Scientific Council on the Developing Child (2006). *Children's emotional development is built into the architecture of their brains. Report 2*. Retrieved from www.developingchild.net accessed 5.9.14

NEF (2009). *Backing the Future: why investing in children is good for us all* London: NEF

NEF (2014). *Well-being at work - A review of the literature* London: NEF Retrieved 13 May 2015 from <http://b3cdn.net/nefoundation/71c1bb59a2ce151df78am6bqr2q.pdf>

Newton, J, Ponting, C, Breen, D (2011). *Young people and wellbeing: contemporary science debates in Wales* Cardiff: BRASS

Nidich, S., Mjasiri, S., Nidich, R., Rainforth, M., Grant, J., Valosek, L., Change, W., and Zigler, R. (2011). Academic achievement and transcendental meditation: A study with at-risk urban middle school students. *Education*, 131, 556–564.

Nisbet, J. and Broadfoot, P. (1980). *The impact of Research on Policy and Practice in Education* Aberdeen: Aberdeen University Press

Noble, T., and McGrath, H. (2007). *The Positive Educational Practices Framework: Leadership Transforming Schools Through Optimism Paper presented at the ACEL/ASCD Conference: New Imagery for Schools and Schooling: Challenging, Creating, and Connecting*, Sydney, Australia, 10-12 October 2007.

Noble, T., and McGrath, H. (2008). The positive educational practices framework: A tool for facilitating the work of educational psychologists in promoting pupil wellbeing *Educational and Child Psychology* Vol 25 No 2 p.119-134

Noble, T., and McGrath, H. (2012). Wellbeing and Resilience in Young People and the Role of Positive Relationships in Roffey. S (2012) *Positive Relationships - Evidence Based Practice across the World* (pp.17-34)London: Springer

Noble, T., and McGrath, H. (2014). Well-being and resilience in school settings. In *Increasing psychological well-being in clinical and educational settings* (pp. 135-152). Springer Netherlands.

Noddings, N. (1995). A morally defensible mission for schools in the twenty first century. *The Phi Delta Kappan*, 76, 365–368.

Nolen, A. L., and Vander Putten, J. (2007). Action research in education: Addressing gaps in ethical principles and practices. *Educational Researcher*, 36(7), 401-407.

Norcross, J. C., and Vangarelli, D. J. (1989). The resolution solution: Longitudinal examination of New Year's change attempts. *Journal of Substance Abuse*, 1, 127-134.

Norrish, J., and Vella-Brodrick, D. (2009). Positive psychology and adolescents: Where are we now? Where to from here? *Australian Psychologist*, 44, 270–278.

NUS Scotland (2010). *Silently Stressed- A survey into student mental wellbeing* Edinburgh:

NUS Scotland

Nussbaum, M. (2000). *Women and human development: The capabilities approach*.

Cambridge: Cambridge University Press.

Nyutu, P. N. and Gysbers, N. C. (2008). Assessing the counselling needs of counseling students in Kenya, *International Journal of Educational and Vocational Guidance*, 8, 83–94.

O'Connor, P. J., and Youngstedt, S. D. (1994). Influence of exercise on human sleep. *Exercise and sport sciences reviews*, 23, 105-134.

O'Leary, Z. (2005). *Researching Real-World Problems: A Guide to Methods of Inquiry* London: Sage

O2 (2011). *O2 Youth Matters report* London: O2

OECD (2012). *Youth unemployment rates in OECD countries, December 2007 to March 2012*

(Percentage of total youth labour force (15-24) Retrieved 24 August 2012 from

www.oecd.org/els/employmentpoliciesanddata/50305438.xlsx

OFSTED (2007). *Tellus2 Questionnaire Summary Sheet: National*, OFSTED

OFSTED (2013). *Not yet good enough: personal, social, health and economic education in schools Personal, social and health education in English schools in 2012* Manchester: OFSTED

Retrieved 25 August 2014 from

http://www.surreyhealthyschools.co.uk/downloads/not_yet_good_enough_pshe_ofsted_2013.pdf

Ogden, J. (2000). *Health Psychology*. Buckingham: Open University Press.

ONS (2011). Measuring National Well-being Newport: ONS

ONS (2015). *Insights into children's mental health and well-being* Newport: ONS

Oppenheim, A. (1992). *Questionnaire Design, Interviewing and Attitude Measurement* New York: Continuum

Ormel, J., and Wohlfarth, T. (1991). How neuroticism, long-term difficulties, and changes in quality of life affect psychological distress. A longitudinal approach. *Journal of Personality and Social Psychology*, 60, 744–755.

Ormel, J., and Schaufeli, W. (1991). Stability and change of psychological distress and their relationship with self-esteem and locus of control. *Journal of Personality and Social Psychology*, 60, 288–299.

Orpinas, P., and Horne, A. M. (2006). *Bullying prevention: Creating a positive school climate and developing social competence*. American Psychological Association.

Osterman, K. F., and Kottkamp, R. B. (2004). *Reflective practice for educators*. California: Corwin Press

Overton, W. F., and Byrnes, J. (1991). *Cognitive development. The encyclopedia of adolescence*. New York: Garland, 151-156.

Overton, W. (1990). Competence and procedures: Constraints on the development of logical reasoning. In W. Overton (Ed.), *Reasoning, necessity, and logic: Developmental perspectives* (pp. 1–32). Hillsdale, NJ: Erlbaum.

Oxford Dictionaries. (2013). Oxford Dictionaries. Oxford University Press. Retrieved 3 February 2013 from <http://oxforddictionaries.com/definition/english/child?q=child>

Oxford Dictionaries. (2015). Oxford Dictionaries. Oxford University Press. Retrieved 6 March 2015 from <http://www.oxforddictionaries.com/definition/english/well-being?q=wellbeing>

Palmer, P. (2003). Teaching with heart and soul: Reflections on spirituality in teacher education. *Journal of Teacher Education*, 54, 376–385

Papay, J., Murnane, R., and Willett, J. (2010). The consequences of high school exit examinations for low-performing urban students: Evidence from Massachusetts. *Educational Evaluation and Policy Analysis*, 32, 5–23.

Parker, J.G., Rubin, K.H, Erath, S.A., Wojslawowicz, J.C., Buskirk, A.A. (2006). Peer relationships, child development, and adjustment: a developmental psychopathology perspective. In *Developmental Psychopathology: Theory and Methods (Vol. 1)* (Cicchetti, D. and Cohen, D.J., eds), pp. 96–161, Wiley

Park, N., and Peterson, C. (2006a). Character strengths and happiness among young children: Content analysis of parental descriptions. *Journal of Happiness Studies*, 7(3), 323-341.

Park, N., and Peterson, C. (2006b). Moral competence and character strengths among adolescents: The development and validation of the Values in Action Inventory of Strengths for Youth. *Journal of adolescence*, 29(6), 891-909.

Park, N., and Peterson, C. (2008). Positive psychology and character strengths: Application to strengths-based school counseling. *Professional School Counseling*, 12(2), 85-92.

Park, N., Peterson, C., and Seligman, M. E. (2004). Strengths of character and well-being. *Journal of social and Clinical Psychology*, 23(5), 603-619.

Parks, A. C., and Biswas-Diener, R. (2013). Positive interventions: Past, present, and future.

In T. Kashdan and J. Ciarrochi (Eds.), *Mindfulness, Acceptance, and Positive Psychology: The Seven Foundations of Well-Being*, (pp. 140-165). Oakland, CA: Context Press.

Parks, A. C., Della Porta, M. D., Pierce, R. S., Zilca, R., and Lyubomirsky, S. (2012). Pursuing happiness in everyday life: A naturalistic investigation of online happiness seekers. *Emotion* 12(6):1222-34

Pedlow, C. T., and Carey, M. P. (2004). Developmentally appropriate sexual risk reduction interventions for adolescents: Rationale, review of interventions, and recommendations for research and practice. *Annals of Behavioral Medicine*, 27(3), 172-184

Perkins, D. (2001). *Understanding Adolescence - A Time of Change* The Pennsylvania State University

Pickering, S. J. and Howard-Jones, P.A. (2007). Educators' views of the role of Neuroscience in Education: A study of UK and International perspectives, *Mind, Brain and Education*, 1(3)

Pierce, J. L., Gardner, D. G., Cummings, L. L., and Dunham, R. B. (1989). Organizational-based self-esteem: Construct definition, measurement, and validation. *Academy of Management Journal*, 32, 622–648

Pierce, T. (2009). Social anxiety and technology: Face-to-face communication versus technological communication among teens. *Computers in Human Behavior*, 25(6), 1367-1372.

- Pinfold, V., Sweet, D., Porter, I., Quinn, C., Byng, R., Griffiths, C., and Larsen, J. A. (2015). Improving community health networks for people with severe mental illness: a case study investigation. *Health Serv Deliv Res* 2015;3(5)
- Plano Clark. V. and Ivankova. N. (2016) *Mixed Methods Research – A guide to the Field* London: Sage
- Polkinghorne, D. (1989). Phenomenological research methods. In: Valle SR, Halling S, eds. *Existential-Phenomenological Perspectives in Psychology*. New York: Plenum Press
- Pollard, E. L., and Lee, P. D. (2003). Child Well-being: A Systematic Review of the Literature. *Social Indicators Research*, 61(1), 59-78.
- Populus (2013). *Perspective on Education* London: Populus
- Powell, R.A., and Single, H.M. (1996). Focus groups. *International Journal of Quality in Health Care* 8(5), 499–504.
- Proctor, C., Maltby, J., and Linley, P. A. (2011). Strengths use as a predictor of well-being and health-related quality of life. *Journal of Happiness Studies*, 12(1), 153-169.
- Prestine, N. A., and LeGrand, B. F. (1991). Cognitive learning theory and the preparation of educational administrators: Implications for practice and policy. *Educational administration quarterly*, 27(1), 61-89.
- Quality of Life Policy Group (2007). *Blueprint for a Green Economy Brentford*: TPF Group
- Qvortrup, J. (1990). 'A voice for children in statistical and social accounting: a plea for children's right to be heard' in James A and Prout A (eds) *Constructing and Reconstructing Childhood*. London: Falmer Press

Race, K. E., Hotch, D. F., and Packer, T. (1994). Rehabilitation Program Evaluation Use of Focus Groups to Empower Clients. *Evaluation Review*, 18(6), 730-740.

Radcliffe, D. (2013). *SPACES OF WELLBEING: WHAT IS SO SPECIAL ABOUT SPECIAL NEEDS ART STUDIOS?*. Diaconia University Retrieved 14 June 2014 from

http://www.theseus.fi/bitstream/handle/10024/66292/Radcliffe_David.pdf?sequence=1

Ray-Sannerud, B. N., Leyshon, S., and Vallevik, V. B. (2015). Introducing Routine Measurement of Healthcare Worker's Well-being as a Leading Indicator for Proactive Safety Management Systems Based on Resilience Engineering. *Procedia Manufacturing*, 3, 319-326.

Razali, N. M., and Wah, Y. B. (2011). Power comparisons of shapiro-wilk, kolmogorov-smirnov, lilliefors and anderson-darling tests. *Journal of Statistical Modeling and Analytics*, 2(1), 21-33.

Reber, A. (1995). *Dictionary of psychology – Second Edition*. Harmondsworth: Penguin.

Rees, G., Goswami, H. and Bradshaw, J. (2010). *Developing an index of children's subjective well-being in England: Summary Report*. The Children's Society, London.

Rees, G., Bradshaw, J., Goswami, H., and Keung, A. (2008) *Understanding Children's Well-being: A national survey of young people's well-being* London: The Children's Society

Rees, G., Bradshaw, J., Goswami, H. and Keung, A. (2010a). *Understanding children's well-being: a national survey of young people's wellbeing*, The Children's Society

Rees, G., Goswami, H., Pople, L., Bradshaw, J., Keung, A., and Main, G. (2012). *The Good Childhood Report 2012 A review of our children's well-being* London: The Children's Society

Richardson, W. (2007). In search of the further education of young people in post-war England. *Journal of Vocational Education and Training* 59, no. 3: 385–418.

Riessman, C. K. (1993). *Narrative Analysis*. Newbury Park, CA: Sage.

Rimm-Kaufman, S. E. (2006). *Social and academic learning study on the contribution of the responsive classroom approach*. Turners Falls: Northeast Foundation for Children.

Rimm-Kaufman, S. E., and Sawyer, B. E. (2004). Primary-grade teachers' self-efficacy beliefs, attitudes toward teaching, and discipline and teaching practice priorities in relation to the Responsive Classroom approach. *Elementary School Journal*, 104(4), 321-341.

Riots Communities and Victims Panel (2012). *After the riots- The final report of the Riots Communities and Victims Panel* London: The Riots Communities and Victims Panel

Robeyns, I. (2003). Sen's Capability Approach and Gender inequality: selecting relevant capabilities. *Feminist economics*, 9(2-3), 61-92

Roberti, J., Harrington, L., and Storch, E. (2006). Further Psychometric Support for the 10-Item Version of the Perceived Stress Scale *Journal of College Counseling Volume 9* 135-147

Roberts, R. E., and Bengton, V. L. (1996). Affective ties to parents in early adulthood and self-esteem across 20 years. *Social Psychology Quarterly*, 59, 96–106.

Robson, C. (1995). *Real World Research – A resource for Social Scientists and Practitioner-Researchers* Oxford: Blackwell

Roffey, S. (2012). *Positive Relationships - Evidence Based Practice across the World* New York: Springer

- Rogers, C. (1961). *On becoming a person*. Boston: Houghton Mifflin.
- Rønning, J. A., Handegaard, B. H., Sourander, A., and Mørch, W. T. (2004). The Strengths and Difficulties Self-Report Questionnaire as a screening instrument in Norwegian community samples. *European Child and Adolescent Psychiatry*, 13(2), 73-82.
- Roulston, K., & Shelton, S. A. (2015). Reconceptualizing bias in teaching qualitative research methods. *Qualitative Inquiry*, 21(4), 332-342.
- Rosenberg, M. (1965). *Society and the Adolescent Self-image*. Princeton, NJ: Princeton University Press.
- Rosenberg, M. (1986). Self-concept from middle childhood through adolescence. In J. Suls (Ed.), *Psychological perspectives on the self* (Vol. 3, pp. 107-136). Hillsdale, NJ: Erlbaum.
- Rossi, P., Lipsey, M. and Freeman, H. (2003). *Evaluation: A Systematic Approach- Seventh Edition* London: Sage
- Rothenberger, A and Woerner, W. (2004). Editorial Strengths and Difficulties Questionnaire (SDQ) – Evaluations and applications *European Child and Adolescent Psychiatry [Suppl 2]*
- Rozin, P., & Royzman, E. B. (2001). Negativity bias, negativity dominance, and contagion. *Personality and social psychology review*, 5(4), 296-320.
- Rudolph, K. D., Hammen, C., Burge, D., Lindberg, N., Herzberg, D., & Daley, S. E. (2000). Toward an interpersonal life-stress model of depression: The developmental context of stress generation. *Development and psychopathology*, 12(02), 215-234.
- Ryan, R. M. (2012). *The Oxford handbook of human motivation*. Oxford University Press.

Ryan, R., Huta, V., and Deci, E. (2008). Living Well: A Self-determination theory prospective of *Eudaimonia* *Journal of Happiness Studies* 9: 139-170

Ryff, C. D. (1989a). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology*, 57, 1069–1081.

Ryff, C. D. (1989b). Beyond Ponce de Leon and life satisfaction: New directions in quest of successful ageing. *International Journal of Behavioral Development*, 12, 35–55.

Ryff, C., and Keyes, C. (1995). The structure of psychological well-being revisited. *Journal of Personality and Social Psychology* 69(4),719-727.

Ryff, C., and Singer, B. (2008). Know thyself and become what you are: An eudiamonic approach to psychological wellbeing. *Journal of Happiness Studies*, 9, 13-39.

Santrock, J.W. (1996). *Adolescence: An Introduction (6th Edition)* Dubeque, IA : Brown and Benchmark

Schanzenbach, D. W. (2012). Limitations of Experiments in Education Research. *Education*, 7(2), 219-232.

Scheckner, S., Rollin, S. A., Kaiser-Ulrey, C., and Wagner, R. (2002). School violence in children and adolescents: A meta-analysis of the effectiveness of current interventions. *Journal of School Violence*, 1 (2), 5–32.

Scheier, M.F., Weintraub, J.K. and Carver, C.S. (1986). Coping with stress: Divergent strategies of optimists and pessimists. *Journal of Personality and Social Psychology* 51(6): 1257–1264.

Scheier, M. F., Carver, C. S. (1992). Effects of optimism on psychological and physical well-being: Theoretical overview and empirical update. *Cognitive Therapy and Research*, 16(2), 201-228

Schools Health Education Unit (2002). *Further education student health and lifestyle survey: Summary report for Oxfordshire colleges*. University of Exeter: SHEU.

Schroer, B. M., Fuhrmann, A., and de Jong-Meyer, R. (2004). Systematic Motivational Counseling in Groups: Clarifying Motivational Structure during Psychotherapy. *Handbook of Motivational Counseling*, 239.

Schueller, S. M., Kashdan, T. B., and Parks, A. C., (2014). Synthesizing positive psychological interventions: Suggestions for conducting and interpreting meta-analyses. *International Journal of Wellbeing*, 4(1), 91-98.

Scott, E., Reppucci, N., and Woolard, J. (1995). Evaluating adolescent decision making in legal contexts. *Law and Human Behavior*, 19, 221–244.

Scott, K. (2012). *Measuring Wellbeing - Towards Sustainability* Oxon: Routledge

Scottish Government (2008) *Getting it Right for Every Child*. Retrieved 3 February 2012 from <http://www.scotland.gov.uk/Resource/Doc/238985/0065813.pdf>

Scottish Government (2009) *Curriculum for Excellence* Edinburgh: Scottish Government

Sebastian, C., Burnett, S., and Blakemore, S. J. (2008). Development of the self-concept during adolescence. *Trends in cognitive sciences*, 12(11), 441-446.

Sedghi, A. (2012). *Youth unemployment across the OECD: how does the UK compare?* The Guardian Wednesday 16 May 2012 Retrieved 24 August 2012 from <http://www.guardian.co.uk/news/datablog/2012/may/16/youth-unemployment-europe-oecd#data>

Self, A., Thomas, J., & Randall, C. (2012). *Measuring National Well-being: Life in the UK, 2012* Newport: ONS

Seligman, M. E. P. (1995). *The Optimistic Child*. New York: HarperCollins Publishers

Seligman, M. (2002a). *Authentic happiness: Using the new positive psychology to realize your potential for lasting fulfilment*. London: Nicholas Brealey Publishing.

Seligman, M. (2002b). Positive psychology, positive prevention, and positive therapy. In Snyder. C.R., and Lopez. S. (Eds.). *Handbook of positive psychology* (pp.3-13). New York: Oxford University Press.

Seligman, M. (2011). *Flourish – A new understanding of happiness and well-being – and how to achieve them*. London: Nicholas Brealey Publishing.

Seligman, M. E. P., and Csikszentmihalyi, M. (2000). Positive psychology: An introduction. *American Psychologist*, 55, 5–14.

Seligman, M. E. P., Steen, T. A., Park, N., and Peterson, C. (2005). Positive psychology progress: Empirical validation of interventions. *American Psychologist*, 60, 410–421.

Seligman, M., Ernst, R., Gillham, J., Reivich, K., and Linkin, M. (2009). Positive education: Positive psychology and classroom interventions. *Oxford Review of Education*, 35, 293–311.

Sellen, J., McMurran, M., Theodosi, E., Cox, M., and Klinger, E. (2009). Validity of the offender version of the Personal Concerns Inventory with adult male prisoners *Psychology, Crime and Law*, 15:5, 451-468

Selye, H. (1956). *The stress of life*. New York: Mc Graw Hill

Sen, A. (1980). *Equality of what?* (Vol. 1, pp. 197-220). na.

Shah, H., and Marks.N. (2004). *A well-being manifesto for a flourishing society*. London: The New Economics Foundation

Sheldon, K. M. (2002). The self-concordance model of healthy goal-striving: When personal goals correctly represent the person. *Handbook of self-determination research*, 65-86.

Sheldon, K. M., and Elliot, A. J. (1999). Goal striving, need satisfaction, and longitudinal well-being: the self-concordance model. *Journal of personality and social psychology*, 76(3), 482.

Sheldon, K. M., and Kasser, T. (1995). Coherence and congruence: two aspects of personality integration. *Journal of personality and social psychology*, 68(3), 531.

Sheldon, K. M., and Lyubomirsky, S. (2004). Achieving sustainable new happiness: Prospects, practices, and prescriptions. In A. Linley and S. Joseph (Eds.), *Positive psychology in practice* (pp. 127-145). Hoboken, NJ: John Wiley and Sons.

Sheldon, K. M., and Lyubomirsky, S. (2006). Achieving sustainable happiness: Change your actions, not your circumstances. *Journal of Happiness Studies*, 7, 55–86.

Sheldon, K. M., and Lyubomirsky, S. (2009). Change your actions, not your circumstances: An experimental test of the Sustainable Happiness Model. In A. K. Dutt and B. Radcliff (Eds.),

Happiness, economics, and politics: Toward a multidisciplinary approach (pp. 324–342).

Cheltenham: Edward Elgar

Sheldon, K. M., Boehm, J. K., and Lyubomirsky, S. (2012). Variety is the spice of happiness: The hedonic adaptation prevention (HAP) model. In Boniwell, I. and David, S. (Eds.), *Oxford handbook of happiness* (pp. 901-914). Oxford: Oxford University Press.

Sheldon, K.M. and Houser-Marko, L. (2001). Self-concordance, goal- attainment, and the pursuit of happiness: Can there be an upward spiral? *Journal of Personality and Social Psychology*, 80, 152-165.

Sheroff, D. Knauth, S. and Markis, E. (2000). The quality of classroom experiences. In M. Csikszentmihalyi. and B. Schneider. (Eds.) *Becoming Adult: How teenagers prepare for the world of work* (pp. 141-164). Basic books, New York.

Sherrod, L. R., Haggerty, R. J., and Featherman, D. L. (1993). Introduction: Late adolescence and the transition to adulthood. *Journal of Research on Adolescence*, 3, 217–226.

Shin, D., and Johnson, D. (1978). Avowed happiness as an overall assessment of the quality of life. *Social Indicators Research*, 5(1), 475-492.

Shonkoff, J.P. (2000). Science, policy, and practice: three cultures in search of a shared mission. *Child Dev.* 71, 181–187

Silva, P. A., and Stanton, W. R. (Eds.). (1996). *From child to adult: The Dunedin multidisciplinary health and development study*. Oxford University Press.

Silverman, D. (2012) Research and policy in Seale, C. (2012). *Researching society and culture*. Sage.

Silverman, D. (2006). *Interpreting qualitative data: Methods for analyzing talk, text and interaction*. Sage.

Sin, N. L., and Lyubomirsky, S. (2009). Enhancing well-being and alleviating depressive symptoms with positive psychology interventions: A practice-friendly meta-analysis. *Journal of Clinical Psychology*, 65(5), 467–487.

Singh, K., and Duggal Jha, S. (2008). Positive and negative affect, and grit as predictors of happiness and life satisfaction. *Journal of the Indian Academy of Applied Psychology*, 34, 40-45.

Sladden, J. (2005). Psychotherapy skills in the real world *BMJ Career Focus* 330 33-35

Smaldone, A., Honig, J. C., and Byrne, M. W. (2007). Sleepless in America: inadequate sleep and relationships to health and well-being of our nation's children. *Pediatrics*, 119(Supplement 1), S29-S37.

Smedje, H., Broman, J.E., Hetta, J., Von- Knorring, A.L. (1999). Psychometric properties of a Swedish version of the “Strengths and Difficulties Questionnaire.” *Europ Child Adolesc Psychiatry* 8:63–70

Smith, J., Fleeson, W., Geiselman, B., Settersten Jr, R. A., and Kunzmann, U. (2001). Sources of well-being in very old age. In P. Baltes and K. U. Mayer (Ed.). *The Berlin Aging Study: Ageing from 70 to 100* (pp. 450-471). Cambridge, UK: Cambridge University Press.

Snyder, C.R., Harris, C., Anderson, J.R., Holleran, S.A., Irving, L.M., Sigmon, S.T., Yoshinobu, L., Gibb, J., Langelle, C. and Harney, P.(1991). The will and the ways: Development and

validation of an individual differences measure of hope. *Journal of Personality and Social Psychology* 60(4): 570–585.

Sointu, E. (2005). The rise of an ideal: tracing changing discourses of wellbeing. *The Sociological Review*, 53(2): 255–74.

Spiers, K. (2015). *Northern exposure: a comparison study of Alaska and Yukon models of measuring community wellbeing* (Doctoral dissertation).

Spradley, J. (1979). *The Ethnographic Interview*. New York: Holt, Rinehart, and Winston

Stafford, K., Moore, C., Foggett, K., Kemp, E. and Hazell, T. (2007). *Proving and improving: exploring the links between resilience, behaviour and academic outcomes*, paper presented at the Australian Association for Research in Education (AARE) Conference, Fremantle, Australia, 25–29 November.

Stanley, N., and J. Manthorpe. (2001). Responding to students' mental health needs: Impermeable systems and diverse users. *Journal of Mental Health* 10, no. 1: 41–52.

Stanchfield, J. (2013). *The value of reflection* Retrieved 5 June 2013 from <http://www.experientialtools.com/2013/12/16/the-importance-of-reflection/>

Statham, J., and Chase, E., (2010). *Briefing Paper 1: Childhood wellbeing: a brief overview*. Childhood Wellbeing Research Centre.

StatsWales (2015). *Unique learners enrolled at further education institutions by age group, mode of learning and gender* Retrieved 15 December 2015 from <https://statswales.wales.gov.uk/Catalogue/Education-and-Skills/Post-16-Education-and-Training/Further-Education-and-Work-Based-Learning/Learners/Further->

Education/uniquelearnersenrolledfurthereducationinstitutions-by-age-modeoflearning-gender

Steen, T. A., Kachorek, L. V., and Peterson, C. (2003). Character strengths among youth. *Journal of Youth and Adolescence*, 32(1), 5-16.

Stein, N., Folkman, S., Trabasso, T., and Richards, T. A. (1997). Appraisal and goal processes as predictors of psychological well-being in bereaved caregivers. *Journal of Personality and Social Psychology*, 72, 872– 884.

Steinberg, L., and Cauffman, E. (1996). Maturity of judgment in adolescence: Psychosocial factors in adolescent decision-making. *Law and Human Behavior*, 20, 249–272.

Steinberg, L. (2014). *Age of Opportunity – Lessons from the new science of adolescence*
Boston: Eamon Dolan

Steptoe, A. S., and Butler, N. (1996). Sports participation and emotional wellbeing in adolescents. *The Lancet*, 347(9018), 1789-1792.

Steuer, N., and Marks, N. (2008). *Local Wellbeing: Can We Measure It?* London: NEF

Stewart, D., Shamdasani, P., and Rook, D. (2007). *Focus groups - Theory and Practice* Second Edition California: Sage

Stiglitz, J., Sen, A., and Fitoussi, J.P. (2010). *Report by the commission on the measurement of economic performance and social progress*. Paris: Commission on the Measurement of Economic Performance and Social Progress.

Stratham, J., and Chase, E. (2010). *Childhood wellbeing – A brief overview*. Loughborough: Childhood Wellbeing Research Centre.

Suh,E., Diener, E., and Fujita, F. (1996). Events and subjective well-being: Only recent events matter. *Journal of Personality and Social Psychology* 70(5), 1091-1102.

Suhrcke, M., and de Paz Nieves, C. (2011). *The impact of health and health behaviours on educational outcomes in high income countries: a review of the evidence*. WHO. Retrieved 4 May 2013 from <http://www.euro.who.int/en/health-topics/noncommunicable-diseases/chronic-respiratory-diseases/publications/2011/impact-of-health-and-health-behaviours-on-educational-outcomes-in-high-income-countries-the-a-review-of-the-evidence>

Sumner, L. W. (1996). *Welfare, happiness and ethics*. Oxford: Clarendon Press.

Sun, R. C. F. and Hui, E. K. P. (2007). Building social support for adolescents with suicidal ideation: implications for school guidance and counseling, *British Journal of Guidance and Counseling*, 35(3), 299–309.

Taggart, H., Lee, S., and McDonald, L. (2014). *Perceptions of wellbeing and mental health in English secondary schools: a cross sectional study* Retrieved 14 December 2015 from <http://www.centreforum.org/assets/pubs/headteacher-survey.pdf>

Taylor, M., Gillies, R., and Ashman, A. (2009). Cognitive Training, Conflict Resolution and Exercise: Effects on Young Adolescents' Wellbeing *Australian Journal of Guidance and Counselling* Volume 19 Number 2 pp. 131–149

The Children's Society (2011). *How happy are our children: measuring children's well-being and exploring economic factors* London: The Children's Society

TheCorpfa (2013). *Video that will change your life. I have no words left*. Retrieved 4 May 2013 from https://www.youtube.com/watch?feature=player_embedded&v=PT-HBI2TVtl

The Telegraph (2014, December 31). *Head warns of 'ticking time bomb' in schools* Retrieved 20 August 2015 from <http://www.telegraph.co.uk/education/11320091/Head-warns-of-ticking-time-bomb-in-schools.html>

The Telegraph (2011). *GCSEs: Pressure of exams leaves teens suffering from mental illness* 25 Aug 2011 Retrieved 24 August 2012 from <http://www.telegraph.co.uk/education/educationnews/8720513/GCSEs-Pressure-of-exams-leaves-teens-suffering-from-mental-illness.html>

Thomas, E. (2013). *The best motivational video you'll ever see* Retrieved 4 May 2013 from https://www.youtube.com/watch?v=scr2PrcDxEo&feature=player_embedded

Thomas, J. (2009). *Working Paper: Current Measures and the Challenges of Measuring Children's Wellbeing* Newport: Office for National Statistics

Thompson, S., and Ake, J. (2009). *A guide to measuring children's well-being* London: NEF

Thompson, S., and Marcs, N. (2008). *Measuring well-being in policy: issues and applications* London: Nef

Thornton, R. and Chapman, H. (2000). Student voice in curriculum making *Journal of Nursing Education* 39,3 124-132

Tomyn, A. J., and Cummins, R. A. (2011). The subjective wellbeing of High-School students: Validating the personal wellbeing index – school children. *Social Indicators Research*, 101, 405–418.

Tough, E. (2013). *How children succeed - grit, curiosity and the hidden power of character*
London: Random House

Tourangeau, R., and T. W. Smith. (1996). "Asking Sensitive Questions: The Impact of Data Collection Mode, Question Format, and Question Context." *Public Opinion Quarterly* 60:275–304.

Townshend, K., Jordan, Z., Peters, M. D., and Tsey, K. (2014). The effectiveness of Mindful Parenting programs in promoting parents' and children's wellbeing: a systematic review protocol. *The JBI Database of Systematic Reviews and Implementation Reports*, 12(11), 184-196

Trist, E. (1976). Engaging with Large-scale systems. In A.W. Clark (ed) *Experimenting with Organizational Life: the action research approach*. London: Plenum

Turner, C. F., L. Ku, F. L. Sonnenstein, and J. H. Pleck (1996). Impact of ACASI on Reporting of Male-Male Sexual Contacts: Preliminary Results from the 1995 National Survey of Adolescent Males. In *Health Survey Research Methods: Conference Proceedings*, ed. R. B. Warnecke. DHHS publication no. (PHS)96-1013. Hyattsville, MD: National Center for Health Statistics.

Tysk, L., (1984). Time perception and affective disorders. *Perceptual and Motor Skills* 58, 455–464.

UK Healthy Universities Network (2015). *January Newsletter* Retrieved 15 December 2015 from
http://www.healthyuniversities.ac.uk/uploads/files/healthy_universities_newsletter_january_2015.pdf

Umpfrey, L. R., and Sherblom, J. C. (2014). The relationship of hope to self-compassion, relational social skill, communication apprehension, and life satisfaction. *International Journal of Wellbeing*, 4(2).

UNICEF (2007a). *An overview of child well-being in rich countries*. Florence: UNICEF Innocenti Research Centre

UNICEF (2007b). *Child in poverty perspective: An overview of child well-being in rich countries*. Report Card 7. Innocenti Research Centre.

UNICEF (2010). *The children left behind - A league table of inequality in child well-being in the world's rich countries* Florence: UNICEF Innocenti Research Centre

Ussher, M. H., Owen, C. G., Cook, D. G., and Whincup, P. H. (2007). The relationship between physical activity, sedentary behaviour and psychological wellbeing among adolescents. *Social psychiatry and psychiatric epidemiology*, 42(10), 851-856.

Valiant, G. L. (1993). Life events, happiness and depression: The half empty cup. *Personality and Individual Differences*, 15, 447-453.

Vaillant, G. (2003). *Aging well: Surprising guideposts to a happier life from the landmark Harvard study of adult development* . New York: Little Brown.

Van Cauwenberghe, E., Maes, L., Spittaels, H., van Lenthe, F. J., Brug, J., Oppert, J. M., and De Bourdeaudhuij, I. (2010). Effectiveness of school-based interventions in Europe to promote healthy nutrition in children and adolescents: systematic review of published and 'grey' literature. *British journal of nutrition*, 103(06), 781-797.

- Van de Mortel, T.F. (2008), 'Faking it: social desirability response bias in self-report research', *Australian Journal of Advanced Nursing*, vol. 25, no. 4, pp. 40-48.
- Vandiver, T. (2001). Children's social competence, academic competence, and aggressiveness as related to ability to make judgments of fairness. *Psychological Reports*, 89 (1), 111–121.
- Van Roy, B., Veenstra, M., Clench-Aas, J. (2008). Construct validity of the five-factor Strengths and Difficulties Questionnaire (SDQ) in pre-, early, and late adolescence *Journal of Child Psychology and Psychiatry* 49:12, pp 1304–1312
- van Stralen, M. M., Yildirim, M., te Velde, S. J., Brug, J., van Mechelen, W., & Chinapaw, M. J. (2011). What works in school-based energy balance behaviour interventions and what does not? A systematic review of mediating mechanisms. *International Journal of obesity*, 35(10), 1251-1265.
- Vartanian, L.R. (2000). Revisiting the imaginary audience and personal fable constructs of adolescent egocentrism: a conceptual review. *Adolescence* 35, 639–661
- Veltman, C. (2004). Super Size Me. *BMJ*, 328(7450), 1266.
- VIA Institute on Character (2004). *The VIA Classification of Character Strengths* Retrieved 3 May 2013 from <http://www.thehappinessinstitute.com/freeproducts/docs/The%20VIA%20Classification%20of%20Character%20Strengths.pdf>

Viñas, F., González, M., Malo, S., García, Y., & Casas, F. (2014). Temperament and Personal Wellbeing in a Sample of 12 to 16 Year-Old Adolescents. *Applied Research in Quality of Life*, 9(2), 355-366.

Vostanis, P. (2006). Strengths and Difficulties Questionnaire: Research and clinical applications. *Current Opinion in Psychiatry*, 19, 367–372.

Wade, R. C. (1994). Teacher education students' views on class discussion: Implications for fostering critical reflection. *Teaching and Teacher Education*, 10, 231–243.

Wagner, J. (1997). The unavoidable intervention of educational research: A framework for reconsidering researcher-practitioner cooperation. *Educational researcher*, 26(7), 13-22.

Wakeman, B. (1986) Action research for staff development, in C. Day and R. Moore (eds) *Staff Development in the Secondary School* London: Croom Helm

Waldron, S. (2010). *Measuring Subjective Wellbeing in the UK Working Paper*, September 2010 Office for National Statistics

Wallis, C. (2005). *The New Science of Happiness* Time Sunday 9th January Retrieved 9 January 2011 from <http://www.time.com/time/printout/0,8816,1015902,00.html#>

Walton, G. M., and Cohen, G. L. (2007). A question of belonging: Race, social fit, and achievement. *Journal of Personality and Social Psychology*, 92, 82–96.

Walton, G. M., and Cohen, G. L. (2011). A brief social-belonging intervention improves academic and health outcomes among minority students. *Science*, 331, 1447–1451.

Warwick, I., Maxwell, C., Statham, J., Aggleton, P., and Simon, A. (2008). Supporting mental health and emotional well-being among younger students in further education *Journal of Further and Higher Education*, Vol. 32, No. 1, 1–13

Waterman, A.S. (1993). Two conceptions of happiness: Contrasts of personal expressiveness (eudaimonia) and hedonic enjoyment. *Journal of Personality and Social Psychology*, 64(4), 678-691.

Waters, L. (2011). A Review of School-Based Positive Psychology Interventions The Australian Educational and Developmental *Psychologist* 28,2 pp. 75–90

Watson, D., Emery, C., Bayliss, P., Boushel, M., and McInnes, K. (2012). *Children's Social and Emotional Wellbeing in Schools: A Critical Perspective*. Policy Press. Retrieved 24 January 2013, from <http://lib.myilibrary.com?ID=343696>

Waugh, C. E., and Fredrickson, B. L. (2006). Nice to know you: Positive emotions, self-other overlap, and complex understanding in the formation of new relationships. *Journal of Positive Psychology*, 1, 93–106.

Weijers, D., and Jarden, A. (2011). Wipe that smile off your face The *Philosopher's Magazine* (52):53-58

Weissberg, R. P., and O'Brien, M. U. (2004). What works in school-based social and emotional learning programs for positive youth development. *The Annals of the American Academy of Political and Social Science*, 591, 86–97.

Wells, J. (2000). Promoting emotional wellbeing in schools p. 161- 192 in Buchanan. A. and Hudson. B. *Promoting Children's Emotional Wellbeing* Oxford: Oxford University Press

Wells, J., Barlow, J., and Stewart-Brown, S. (2003). A systematic review of universal approaches to mental health promotion in schools. *Health Education, 103* (4), 197–220.

Welsh Assembly Government (2000). Children and Young People: A Framework for Partnership. Retrieved June 20, 2008, from Welsh Assembly Government Website: http://new.wales.gov.uk/docrepos/40382/40382313/childrenyoungpeople/403821/623995/q262a360_english1.pdf?lang=en

Welsh Assembly Government (2002a). *Winning Wales - The National Economic Development Strategy of the Welsh Assembly Government* Cardiff: WAG

Welsh Assembly Government (2002b). *Wellbeing in Wales* Retrieved 4 January 2013 from <http://wales.gov.uk/about/cabinet/cabinetstatements/2002/160702JHWellbeinginwales?lang=en>

Welsh Assembly Government (2008a). 2008 Children and Young People's Well-being Monitor for Wales Cardiff: WAG

Welsh Assembly Government (2008b). School Effectiveness Framework Building Effective Learning Communities Together Cardiff: WAG

Welsh Assembly Government (2009a). *Effective Practice in Learning and Teaching – A Focus on Pedagogy* Cardiff: WAG

Welsh Assembly Government (2009b). *One Wales: One Planet The Sustainable Development Scheme of the Welsh Assembly Government* Cardiff: WAG

Welsh Assembly Government (2009c). *Quality and Effectiveness Framework for post-16 learning in Wales - Delivering Skills that Work for Wales* Cardiff: WAG

Welsh Assembly Government Social Research (2010). *Voices of Children and Young People in Wales Study: A qualitative study of Wellbeing among children and young people under 25 years old* Cardiff: WAG

Welsh Government (2011). *2011 Children and Young People's Wellbeing Monitor for Wales* Cardiff: WG

Welsh Government (2012). *Further Education, Work-based Learning and Community Learning, 2011/12* (provisional), Retrieved 15 June 2013 from <http://wales.gov.uk/topics/statistics/headlines/post16education2012/121127/?lang=en>

Werner, E. E. (1993). Risk, resilience and recovery: Perspectives from the Kauai longitudinal study. *Development and Psychopathology*, 5, 503–515.

Werner, E. E., and Smith, R. S. (1992). *Overcoming the odds: High risk children from birth to adulthood*. New York: Adams, Bannister and Cox.

Whetten, K., Ostermann, J., Whetten, R. A., Pence, B. W., O'Donnell, K., Messer, L. C., and Thielman, N. M. (2009). A comparison of the wellbeing of orphans and abandoned children ages 6–12 in institutional and community-based care settings in 5 less wealthy nations. *PLoS One*, 4(12), e8169.

White, M. (2012). *proactive vs reactive* Retrieved 10 May 2013 from https://www.youtube.com/watch?v=o3Gu0dPc8TA&feature=player_embedded

White, S. (2009). *Bringing Wellbeing into Development Practice* -WeD Working Paper 09/50
Bath Wellbeing in Developing Countries Research group

Wigfield, A., Eccles, J. S., and Pintrich, P. R. (1996). Development between the ages of eleven and twenty-five. In D. C. Berliner and R. C. Calfee (Eds.), *The handbook of educational psychology* (pp. 148–185). New York: Macmillan.

Wilckens, M., and Hall, M. (2015). *Can Well-Being be Predicted? A Machine Learning Approach. A Machine Learning Approach* (February 8, 2015).

Wilkins, J. L. (2008). The relationship among elementary teachers' content knowledge, attitudes, beliefs, and practices. *Journal of Mathematics Teacher Education*, 11(2), 139-164.

Willett, W.C. (1994). Diet and health: what should we eat? *Science* 264, 532–537.

Williams, M., and Penham, D. (2011). *Mindfulness – a practical guide to finding peace in a frantic world* London: Piaktus

Willis, J. (2013). *Building Brain Literacy in Elementary Students* Retrieved 12 May 2015 from <http://www.edutopia.org/blog/building-brain-literacy-elementary-students-judy-willis>

Wilson, T. D., and Linville, P. W. (1982). Improving the academic performance of college freshmen: Attribution therapy revisited. *Journal of Personality and Social Psychology*, 42, 367–376.

Wilson, D., and Conyers, M. (2014). *Engaging Brains: How to Enhance Learning by Teaching Kids about Neuroplasticity* Retrieved 12 May 2015 from <http://www.edutopia.org/blog/neuroplasticity-engage-brains-enhance-learning-donna-wilson>

Wing, R. R., and Jeffery, R. W. (1999). Benefits of recruiting participants with friends and increasing social support for weight loss and maintenance. *Journal of Consulting and Clinical Psychology, 67*, 132-138.

Wong, P. (2011). Positive psychology 2.0: Towards a balanced interactive model of the good life. *Canadian Psychology, 52*, 69–81

World Health Organisation (1996). *Development of health-promoting schools-A framework for action*. Manila: WHO/WPRO

World Health Organization (1997) WHOQOL Measuring Quality of Life. Geneva: WHO

World Health Organization (2003) Diet, Nutrition and The Prevention of Chronic Diseases: Report of a Joint WHO/FAO Expert Consultation. WHO Technical Report Series no. 916. Geneva: WHO.

World Health Organisation (2008). *Health Behaviour in School-Aged Children* Scotland WHO

Wosinski, J., Delmas, P., Bouwers, B., Stormacq, C., and Kiszio, B. (2015). Feasibility, appropriateness, meaningfulness and effectiveness of nursing interventions on the well-being of people with Parkinson's disease and their caregivers living in the community: a mixed-methods systematic review protocol. *The JBI Database of Systematic Reviews and Implementation Reports, 13*(4), 14-29.

Wright, R.L.D. (1976). *Understanding statistics*. New York: Harcourt Brace Jovanoich

Wright, D., Williams, A., and Supple. (1998). A Comparison of Computer Assisted and Paper-And-Pen self-administered Questionnaires in a survey on Smoking, Alcohol and Drug use *Opinion Quarterly Volume 62*:331–353

Wyn, J. (2009). *Youth health and welfare: The cultural politics of education and wellbeing*
Melbourne: Oxford University Press

Wyn, J., Cahill, H., Holdsworth, R., Rowling, L., & Carson, S. (2000). MindMatters, a whole-school approach promoting mental health and wellbeing. Australian and New Zealand *Journal of Psychiatry*, 34(4), 594-601

Xavier, A. M., Veiga, M. M., and van Zyl, D. (2015). Introduction and Assessment of a Socio-Economic Mine Closure Framework. *Journal of Management and Sustainability*, 5(1), p38.

Yaremtchuk, S. V. (2014). Life Satisfaction and Psychological Well-Being of Rescue Operations Participants in a Prolonged Emergency Situation. *Review of European Studies*, 6(4), p174.

Yates, Y. (2011). *Human Givens Therapy with Adolescents – A practical Guide for Professionals* London: Jessica Kingsley Publishers

Yates, Y., and Atkinson, C. (2011). Using Human Givens therapy to support the well-being of adolescents: a case example, *Pastoral Care in Education: An International Journal of Personal, Social and Emotional Development*, 29:1, 35-50

Yuen, M., Chan, R. M. C., Lau, P. S. Y., Gysbers, N. C. and Shea, P. M. K. (2007). Comprehensive guidance and counseling programmes in the primary schools of Hong Kong: teachers' perceptions and involvement, *Pastoral Care in Education*, 25(4), 17–24.

Yuen, M., Lau, P. S. Y., Shek, D. T. L. and Lam, M. P. (2002). Confirmatory factor analysis and reliability of the Chinese version of the Maslach Burnout Inventory among guidance teachers in Hong Kong, *Psychological Reports*, 91, 1081–1086.

Yuen,M., Chan, R., Gysbers,N. C., Lau, P.S.Y., Lee,Q., Shea,P., Fong, R.W and Chung, Y.B.

(2010). Enhancing life skills development: Chinese adolescents' perceptions, *Pastoral Care in Education: An International Journal of Personal, Social and Emotional Development*, 28:4, 295-310

Zack, S., Saekow, J., Kelly, M and Radke, A. (2014). Mindfulness Based Interventions for Youth *J Rat-Emo Cognitive-Behav Ther* 32:44–5

Zarrett, N., and Eccles, J. (2006).The passage to adulthood: Challenges of late adolescence *NEW DIRECTIONS FOR YOUTH DEVELOPMENT*, NO. 111 p. 13 -28

Zikmund, V. (2003). Health, well-being, and the quality of life: Some psychosomatic reflections. *Neuroendocrinol Lett* , 2(6), 401–403.

Zins, J. E., Bloodworth, M. R., Weissberg, R. P., and Walberg, H. J. (2004). The scientific base linking social and emotional learning to school success. In J. E. Zins, R. P. Weissberg, M. C. Wang, and H. J. Walberg (Eds.), *Building academic success on social and emotional learning: What does the research say?* (pp. 2–22). New York: Teacher College Press.

Appendix A – UK Policy Documents at the start of the research

Year	Policy Document	Purpose
2000	UK Local Government Act (HM Government, 2000)	This act gives local authorities the power to promote wellbeing in their areas.
2002	'Life Satisfaction: The state of knowledge and implications for government' – UK Prime Minister's Strategy Unit (Donovan., Halpern. and Sargeant. 2002)	This paper surveyed the state of the field in wellbeing research.
2005	UK Sustainable Development Strategy – 'Securing the Future' (HM Government, 2005)	This stated that 'by the end of 2006 the Government will sponsor cross-disciplinary work to bring together existing research and international experience and to explore how policies might change with an explicit wellbeing focus.' (p.23)
2005	European Commission – Green paper on Mental Health (European Commission, 2005)	This paper launched a public consultation on how better to tackle mental illness and promote mental wellbeing in the EU.
2006	UK local government White Paper – Strong and Prosperous Communities (Department for Communities and Local Government, 2006)	Local governments are given the responsibility to promote the general well-being of a community and its citizens.
2007	Defra - Sustainable Development Indicators in Your Pocket (Department for Environment, Food and Rural Affairs, 2007)	The UK Government publishes provisional indicators of wellbeing.
2007	Conservative Party Quality of Life Policy Group - Blueprint for a Green Economy (Quality of Life Policy Group, 2007)	This document called for action across eight key policy areas – one being wellbeing.
2008	Foresight Mental Capital and Wellbeing Project (Foresight Mental Capital and Wellbeing Project, 2008).	This document concluded that policies 'need to nurture the mental capital and wellbeing in the wider population, so that everyone can flourish in their lives.'p.10
2008	HM Treasury - Developments in the economics of well-being (HM Treasury, 2008)	This working paper called for a balance between policies that ensure economic growth and those that promote wellbeing.
2010	Big Society policy programme	David Cameron states that he wants to build a society that will 'take power away from politicians and give it to the people' (18th May – Cameron, 2010).

		This agenda puts ‘a new spotlight on a key mechanism for improving wellbeing – making people feel free and powerful enough to help themselves and their communities.’ (Aked et al. 2010, p.8-9)
2010	HM Government – New Horizons – Confident Communities, Brighter Futures: a framework for developing wellbeing (HM Government, 2010a)	This document ‘sets out the argument and evidence base for prioritising wellbeing, and provides a systematic approach to improving mental wellbeing...’ (p.2)
2010	Cabinet Office – The Coalition: Our programme for government (HM Government, 2010b)	This document makes a number of references to the need to address wellbeing.
2010	Office for National Statistics – The National Wellbeing Project	David Cameron asks ONS to lead a national debate on measuring wellbeing.
2011	Office for National Statistics - Measuring National Well-being (ONS, 2011)	This summarised 34,000 responses to the consultation on wellbeing and helped ‘identify the key areas that matter most and will help to ensure that the measures we use will be relevant not only to government but also to the wider public.’p.4
2012	Office for National Statistics - Measuring National Well-being: Life in the UK, 2012 (Self, Thomas and Randall, 2012)	The report is the first snapshot of life in the UK to be delivered by the Measuring National Well-being programme and is to be published annually.

Appendix B – Welsh policy documents at the start of the research

2002	Welsh Assembly Government - A Winning Wales - The National Economic Development Strategy of the Welsh Assembly Government (WAG, 2002a)	This ten year strategy plan highlights that WAG are 'aware that increasing GDP does not automatically lead to a better quality of life for our people. The way we develop is important too.' p.20
2002	Wellbeing in Wales (WAG, 2002b)	This policy document highlights how WAG will 'make more explicit the connections between health and wellbeing in all policy areas.' p.3
2009	One Wales: One Planet The Sustainable Development Scheme of the Welsh Assembly Government (WAG, 2009)	This document outlines WAG's vision for a 'fair, just and bilingual Wales, in which citizens of all ages and backgrounds are empowered to determine their own lives, shape their communities and achieve their full potential.' P.67

Appendix C - Summary of data from WHO (2008) Pp.51-152 (Data drawn from 4396 students in Wales)

Question for 15-year-olds	Wales Boys	Wales Girls	England Boys	England Girls	Health Behaviour of School age Children Average Boys	Health Behaviour of School age Children Average Girls
Feel pressured by homework.	62	68	70	60	40	49
Agree that their classmates are kind and helpful	55	61	72	68	61	63
Who rate their health as fair or poor	20	33	18	32	13	23
Who report high life satisfaction	86	72	89	79	85	78
Who report that they are overweight or obese according to BMI	21	18	13	8	17	10
Who think they are fat	26	47	23	44	21	41
Who eat breakfast every school day	58	45	65	50	60	50
Who drink soft drinks daily	34	26	28	21	32	25
Who report first smoking at age 13 or younger	26	34	19	27	31	28
Who smoke at least once a week	12	23	13	18	18	19
Who drink alcohol at least once a week	42	38	41	38	31	21
Who have been drunk at least twice	52	54	44	50	37	30
Who have ever used cannabis in their lifetime	30	32	26	23	21	16

Appendix D - Summary of where wellbeing features in the new ESTYN framework (2010)

Key Question	Area in which wellbeing is featured
1. How good are outcomes?	1.2 Wellbeing
2. How good is provision?	2.3. Care, support and guidance 2.3.1 provision for health and wellbeing
3. How good are leadership and management?	3.1 Leadership 3.1.1: strategic direction and the impact of leadership 3.1.3 meeting national and local priorities 3.2 Improving Quality 3.2.3 Involvement in networks of professional practice 3.3 Partnership Working 3.3.1 strategic partnerships

Appendix E – Human Givens Theory (Griffin and Tyrrell, 2003)

Box 1. Human Givens—emotional needs (Griffin & Tyrrell, 2003)

Security—Safe territory; an environment which enables us to lead our lives without experiencing excessive undue fear

Volition—A sense of autonomy and control over what is happening around us

Attention—Receiving it from others, but also giving it

Emotional connection to other people—Friendship, love, intimacy

Connection to the wider community—Being part of something bigger than ourselves (we are a group animal!)

Privacy—Time and space enough to reflect on and consolidate our experiences

Status—Being accepted and valued in the various social groups we belong to

A sense of competence/achievement—Which helps us to feel more positive about ourselves (and protects against ‘low self esteem’)

To be stretched—Through ‘stretching ourselves’ mentally or physically (or both) our lives become purposeful and full of meaning

Meaning—To have people who need us;

To have challenge in our lives;

To have a coherent philosophy on life, through, for example:

* Religion, spirituality, belief system;

* Contribution to the community

Box 2. Human Givens—resources (Griffin & Tyrrell, 2003)

Empathy—The ability to build rapport, empathise and connect with others

Memory—The ability to develop complex long-term memory, which enables us to add to our innate knowledge and learn

Dreaming—A dreaming brain that metaphorically diffuses emotionally arousing expectations not acted out the previous day

Observing self—The ability to step back from ourselves (awareness of awareness)

Imagination—Enables us to focus our attention away from our emotions and problem solve creatively and objectively

Thinking brain—A conscious rational mind that can check out emotions, question, analyse and plan (left hemisphere)

Knowing brain—The ability to ‘know’; understand the world unconsciously through metaphorical pattern matching (right hemisphere)

Appendix F - The Positive Educational Practices (PEPs) Framework: A positive psychology approach to pupil wellbeing (Noble and McGrath, 2008).

<p>Foundation One: Social and emotional Competency Pupils are more likely to experience wellbeing and behave in a more pro-social way when they have a sense of social and emotional competence. An effective social and emotional learning curriculum focuses on pro-social values. <i>Resilience skills</i> <i>Emotional literacy skills such as: managing strong feelings</i> <i>Personal achievement skills such as: identifying one's own strengths</i></p>	<p>Foundation Two: Positive emotions Experiencing positive emotions can enhance pupils' wellbeing by increasing their capacity for optimistic thinking and problem solving and by contributing to their resilience, behavioural flexibility and persistence.</p> <p>Foundation Three: Positive relationships</p>
<p>Foundation Four: Engagement through Strengths <i>cognitive and character strengths</i></p>	<p>Foundation Five: A sense of meaning and Purpose</p>

Appendix G - Definitions of 26 Behaviour Change Techniques and Illustrative Theoretical Frameworks (Abraham and Michie 2008, p.382)

Technique (theoretical framework)
1. Provide information about behavior- health link. (IMB)
2. Provide information on consequences. (TRA, TPB, SCogT, IMB)
3. Provide information about others' approval. (TRA, TPB, IMB)
4. Prompt intention formation. (TRA, TPB, SCogT, IMB)
5. Prompt barrier identification. (SCogT)
6. Provide general encouragement. (SCogT)
8. Provide instruction. (SCogT)
9. Model or demonstrate the behavior. (SCogT)
10. Prompt specific goal setting. (CT)
11. Prompt review of behavioral goals. (CT)
12. Prompt self-monitoring of behavior. (CT)
15. Teach to use prompts or cues. (OC)
17. Prompt practice. (OC)
19. Provide opportunities for social comparison. (SCompT)
21. Prompt identification as a role model.
22. Prompt self-talk.
24. Stress management (stress theories)
26. Time management

Note. IMB information-motivation-behavioral skills model; TRA theory of reasoned action; TPB theory of planned behavior; SCogT social-cognitive theory; CT control theory; OC operant conditioning. (Place table here)

Appendix H - Measuring and Improving Wellbeing in Further Education Students.

	Time	Structured activity	Resources
Note start time in next box and note down time estimates for rest of	On arrival	<input type="checkbox"/> Check that there are 6 students for each group and that student consent forms have been completed – collect these.	<ul style="list-style-type: none"> Consent Forms
		<p>Getting organised</p> <ul style="list-style-type: none"> Ensure seating is suitable. Set up recording equipment – do a sound check when everyone settling down to ensure recorder is working properly. Sort out name labels for everyone (including facilitator). Get pupils to sign their names on a page for a log of who is in the group. Initial chat and ensuring everyone is settled and clear on what is happening <ul style="list-style-type: none"> Do you all know each other? This research project focuses on well-being amongst Further Education Students. We are particularly interested in wellbeing of F.E. students as they study for their A levels and BTEC courses. We want to find out what sort of things you think affects your wellbeing; your views are central to this project. We plan to develop a questionnaire that measures well-being, a questionnaire devised particularly for young adults. We also plan to develop ways to improve well-being. We want to find out what you think about well being and what you think affects wellbeing generally and in college. We have to record you so that we don't forget what you say, but only the 	<ul style="list-style-type: none"> Digital recording equipment + tapes x 1 extension leads x 1 Spare batteries Name labels Marker/pen

session in following boxes ↓		<p>researchers will hear these recordings or know what you say.</p> <ul style="list-style-type: none"> ○ For those of you that don't know me, my name is Mrs Dodge. Are you all happy to take part in this focus group? 	
	5 mins	<p>Post-it Notes Individual Activity</p> <ul style="list-style-type: none"> ○ Before we start thinking about issues to do with wellbeing, we need to decide what wellbeing is. ○ I'm going to give you all some post-it notes. ○ Write on the post-it notes what wellbeing means to you and what is important to your wellbeing. You can give as many ideas as you like but put one idea on each post-it note. ○ Please try and do this individually as wellbeing can mean different things to different people. There are no wrong answers, just what you think. 	<ul style="list-style-type: none"> • Post-it notes • Pens
	10 mins	<p>Categorising</p> <ul style="list-style-type: none"> ○ Now, I would like you to try and group your ideas into categories. ○ Look at the links or common themes between your ideas and stick your post-it notes in categories onto the flipchart paper. ○ When you're happy with your categories try and say what each category is. 	<ul style="list-style-type: none"> • Flipchart paper • Pens
	15 mins	<p>Wellbeing Theory</p> <p>Introduce the wellbeing theory diagram to the students.</p> <ul style="list-style-type: none"> ○ I want you to think specifically about your age group. What challenges do you think people your age face between the ages of 16 and 18? ○ How do you think they might deal with these challenges? ○ Could we identify what resources young people use from what you have just described? 	Wellbeing Theory Diagram.

		<ul style="list-style-type: none"> ○ Is there any way the college can help with developing these resources? ○ Do you think this diagram explains how wellbeing can change? ○ Is there anything you would like to add before we finish? 	
	5 mins	<p>Finish of session</p> <ul style="list-style-type: none"> • Explain that the college has requested to know general themes that emerged and that we plan to do out a brief summary merging the themes from the focus groups but that <u>these will not identify anyone or single anyone out.</u> Verify that they are happy about this. • Thank them for their participation. • Photograph the flipchart. 	<ul style="list-style-type: none"> • Camera

Appendix I – Information and Consent form

Understanding Wellbeing

Participant Information Sheet

Title of Project: Measuring and Enhancing Wellbeing in Further Education Students.

This research project focuses on well-being amongst Further Education Students. We hear a good deal today about the role of wellbeing in our society; you may have heard that politicians are talking about this too. We are particularly interested in wellbeing of F.E. students as they study for their A levels and BTEC courses. We plan to develop a questionnaire that measures well-being, a questionnaire devised particularly for young adults. We also plan to develop ways to improve well-being, that is, ways to help people feel in control of their lives and ready to face life's challenges.

This is an invitation to you to join the study, and to let you know what this would involve. The study is being organised by one of your colleagues, Mrs Rachel Dodge in collaboration with some lecturers from University of Wales Institute Cardiff: Dr Lalage Sanders, Dr Annette Daly and Dr Jan Huyton.

When the project is complete we intend to publish the results of the study in a journal (such as the British Educational Research Journal) so that other schools and colleges may read about what we have done and use our methods to help their students.

If you want to find out more about the project, or if you need more information to help you make a decision about joining in, please contact Rachel Dodge at rachel.dodge@collegeswales.ac.uk .

Your Participation in the Research Project

Why you have been asked

We are asking lower sixth tutors in this college to take part in this study.

What happens if you want to change your mind?

If you decide to join the study you can change your mind and stop at any time. We will completely respect your decision. If you want to stop it would help us if you could let us know (you could send us a note from the attached form, or email Rachel) and it will save us bothering you. There are absolutely no penalties for stopping.

What would happen if you join the study?

There are three phases to this study and we are currently asking for your help in the **phase 3** below.

Phase 1

We are running a series of small student focus groups with no more than six people at a time in each group. The aim of the focus group is to find out what students think well-being means to them. What improves somebody's well-being? What might have a negative impact on it? We are not looking for any personal information here about students' own experiences or their own well-being. We will not expect students to disclose any personal information. No focus group will last longer than 50 minutes. Focus groups will take place during the normal college day as timetabling allows.

Phase 2

We will develop a questionnaire based on the data gathered in the focus groups. We will be asking students to complete this new questionnaire along with other questionnaires that have already been designed to measure aspects of wellbeing. We will be asking students to complete all of the questionnaires and to comment on the new one as we go through the development process. The questionnaires will take no more than 25 minutes to complete.

Phase 3

We will be trying out some workshop activities designed to improve people's wellbeing. These will be run in ordinary pastoral sessions and will be part of the pastoral programme planned for your year group. Rachel Dodge will provide you with all the necessary learning materials and any pre-intervention training. Before and after these sessions we will ask students to complete the questionnaire that we developed in phase 2.

If students agree to join the study, then we will use the data from these questionnaires as part of our research.

If students do not wish to join the study, then their completed questionnaires will be used as part of their pastoral care only and will be withheld from the research study.

We are looking for feedback on these activities and how you, as a teacher, felt the workshops went. We want to know what worked and what didn't work; and what we need to change? You will be given an evaluation questionnaire to complete anonymously to provide this feedback

In addition two of the pastoral groups will be observed by the researcher during these sessions as part of the research. Consequently, we will be asking for two tutors who are happy for their sessions to be observed throughout the intervention.

Are there any risks?

We do not think there are any significant risks due to the study. If you did feel that there was any stress involved you can stop at any time. Just tell the interviewer that you want to stop.

Your rights.

Joining the study does not mean you have to give up any legal rights. In the very unlikely event of something going wrong, the College fully indemnifies its staff, and participants are covered by its insurance.

What happens to the Feedback Questionnaires?

We will put all the anonymous feedback questionnaire data to help us further develop the workshop activities for future use.

Are there any benefits from taking part?

There are no direct benefits to you for taking part; however this study may help us to find ways to improve the levels of well-being in people studying at this level.

How we protect your privacy:

All the information we get from you is strictly confidential, and everyone working on the study will respect your privacy. We have taken very careful steps to make sure that you cannot be identified from any of the forms with confidential information that we keep about you.

When we have finished the study and analysed the information, all the forms we use to gather data will be completely destroyed. We will keep the form with your name and we will keep a copy of the attached consent form for 10 years, because we are required to do so by the University.

PLEASE NOTE: YOU WILL BE GIVEN A COPY OF THIS SHEET TO KEEP, TOGETHER WITH A COPY OF YOUR CONSENT FORM

Contact Details: Mrs Rachel Dodge rachel.dodge@collegeswales.ac.uk

Understanding Wellbeing Consent Form

UWIC Ethics Reference Number:

Participant name or Study ID Number:

Title of Project: **Measuring and Improving Well-being in Further Education Students.**

Name of Researcher: Mrs Rachel Dodge

Participant to complete this section: Please initial each box.

- ☐ I confirm that I have read and understand the information sheet for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.
- ☐ I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason.
- ☐ I agree to take part in the above study.
- ☐ I agree to the use of anonymised quotes in publications

Signature of Participant

Date

Name of person taking consent

Signature of person taking consent

Date

** When completed, 1 copy for participant and 1 copy for researcher site file*

Appendix J – Raw Data from Student Focus Groups

Theme	Focus Group Responses
Happiness	Being happy x 5 Happiness x 6 Feeling happy Wellbeing means happiness How happy/sad a person is Feeling good How stressed or happy Stress Mood x2 Physical and Emotional Unhappy How happy and healthy somebody is Ensuring that somebody is happy and not hurt or effected by something Finding ways to become happy e.g with friends Having a good time Emotional problems could affect it
Health and fitness	Having a good and healthy lifestyle Fitness Diet Health x 8 Cleanliness Amount of cigarettes I smoke Fitness x2 How healthy you are Having a healthy lifestyle Being healthy Wellbeing means someone who has good health Healthy, living and life Illness/ unhealthy eating
Safety	Security Feeling secure Safety Having a home Feeling safe
Positive Relationships	Having understanding friends and family Support Having a supportive family Having support The students Having good friends Teachers help Good advice How much attention you get People and culture have an effect on wellbeing Amount of friends

	<p>Good social life</p> <p>Social life</p> <p>Feeling welcomed</p> <p>Having people care about you</p> <p>People are cautious of other's wellbeing</p> <p>People that love and care for you</p> <p>Friends and family make it better</p> <p>If people are horrible it can negatively affect wellbeing</p> <p>People can affect it if you are surrounded by people you love.</p>
Feeling content with yourself	<p>Being comfortable in your life</p> <p>Feeling content</p> <p>Wellbeing physical and mental health</p> <p>The emotion you feel and your physical and mental health</p> <p>Feeling content and complete</p> <p>Whether you are able to feel confident</p> <p>Being true to yourself</p> <p>How good or bad you think you can do</p> <p>Being truthful</p> <p>Mental state</p> <p>Confident with who you are</p>
Living the life you want	<p>Extracurricular activities</p> <p>Being given opportunities</p> <p>Opportunities</p> <p>Opportunities affect wellbeing</p> <p>Feeling as if you are being heard</p> <p>Being Listened to</p> <p>Having free will</p> <p>Lifestyle</p> <p>Status x2</p> <p>Doing things you love</p>
Wealth	<p>Wealth</p> <p>Financial status</p>
Other	<p>Life in general</p> <p>Not tangible, hard to measure</p>

Appendix K – The original SDQ S11-7

Strengths and Difficulties Questionnaire

S 11-11

For each item, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain or the item seems daft! Please give your answers on the basis of how things have been for you over the last six months.

Your Name

Male/Female

Date of Birth.....

	Not True	Somewhat True	Certainly True
I try to be nice to other people. I care about their feelings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am restless, I cannot stay still for long	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get a lot of headaches, stomach-aches or sickness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I usually share with others (food, games, pens etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get very angry and often lose my temper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am usually on my own. I generally play alone or keep to myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I usually do as I am told	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I worry a lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am helpful if someone is hurt, upset or feeling ill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am constantly fidgeting or squirming	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have one good friend or more	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I fight a lot. I can make other people do what I want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am often unhappy, down-hearted or tearful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other people my age generally like me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am easily distracted, I find it difficult to concentrate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am nervous in new situations. I easily lose confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am kind to younger children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am often accused of lying or cheating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other children or young people pick on me or bully me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I often volunteer to help others (parents, teachers, children)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I think before I do things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I take things that are not mine from home, school or elsewhere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get on better with adults than with people my own age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have many fears, I am easily scared	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I finish the work I'm doing. My attention is good	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you have any other comments or concerns?

Please turn over - there are a few more questions on the other side

Overall, do you think that you have difficulties in one or more of the following areas:
emotions, concentration, behaviour or being able to get on with other people?

No	Yes- minor difficulties	Yes- definite difficulties	Yes- severe difficulties
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered "Yes", please answer the following questions about these difficulties:

- How long have these difficulties been present?

Less than a month	1-5 months	6-12 months	Over a year
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Do the difficulties upset or distress you?

Not at all	Only a little	Quite a lot	A great deal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Do the difficulties interfere with your everyday life in the following areas?

	Not at all	Only a little	Quite a lot	A great deal
HOME LIFE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FRIENDSHIPS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CLASSROOM LEARNING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LEISURE ACTIVITIES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Do the difficulties make it harder for those around you (family, friends, teachers, etc.)?

Not at all	Only a little	Quite a lot	A great deal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Your Signature

Today's Date

Thank you very much for your help

© Rol

Appendix L – January WFESS 2012 Measure (sample pages)

Wellbeing in Further Education Students Pilot

***1. Please could you enter your college 'A' number.**

***2. Read through the challenges listed below, and think carefully about how each one is affecting you at this moment in time. Using the drop down box, rate each challenge on a scale of 1 to 10, where 1 is no challenge and 10 is extreme challenge.**

	Current level of challenge
Exams/College Assignments	<input type="text"/>
College in general	<input type="text"/>
Employment, Higher Education	<input type="text"/>
Confidence	<input type="text"/>
Personal Safety	<input type="text"/>
Friends & Acquaintances	<input type="text"/>
Family & Relatives	<input type="text"/>
Health	<input type="text"/>
Finances	<input type="text"/>

Other (If there is another issue not listed above that you are currently finding very challenging, please describe it in the box below and rate it using the same scale.)

***3. Please state which area is the biggest challenge for you at this present time.**

- ☐ Exams/College Assignments
- ☐ College in general
- ☐ Employment, Higher Education
- ☐ Confidence
- ☐ Personal Safety
- ☐ Friends & Acquaintances
- ☐ Family & Relatives
- ☐ Health
- ☐ Finances

Other (please specify)

Wellbeing in Further Education Students Pilot

4. How important is it for you to deal with the challenge of [Q3]? 1 is not important and 10 is very important.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

5. How long has the challenge of [Q3] been present?

☐ Less than a month ☐ A month ☐ 2-5 months ☐ 6-12 months ☐ over a year

6. Does the challenge of [Q3] worry/distress you?

☐ Not at all ☐ Only a little ☐ Quite a lot ☐ A lot ☐ A great deal

7. Does the challenge of [Q3] interfere with your everyday life in the following areas:

	Not at all	Only a little	Quite a lot	A lot	A great deal
Home life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friendships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leisure activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

***8. How likely is it that you will deal with the challenge of [Q3]? 1 is not very likely, and 10 is very likely.**

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

***9. How much control do you have in dealing with the challenge of [Q3]. 1 is no control and 10 is a great deal of control.**

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

***10. How committed are you to solving the challenge of [Q3]. 1 is not at all committed and 10 is very committed.**

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

***11. How much support do you have to deal with the challenge of [Q3]. 1 is no support at all and 10 is a great deal of support.**

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

Appendix M - Comparison of Life Area means between Time 1 and Time 2

Area of challenge	Mean score for impact Time 1	Mean score for impact Time 2	Mean score for strategy Time 1	Mean score for strategy Time 2
Future employment/ Higher Education	21.05	22.43	27.37	27.36
Exams/ College Assignments	14.52	22.61	27.60	28.33
Confidence	22.4	18.31	24.87	23.93
Other issues relating to college	19.12	17.63	24.56	23.28
Finances	23.69	18.72	26.8	23.96
Dating/personal relationships	21.36	15.53	24.12	21.31
Friends/social relationships	22.58	10.94	25.3	22.98
Family and relatives	24.12	17.17	23.71	22.19
Health	22.46	16.57	25.07	23.19
Personal Safety	19.66	14.06	24.34	21.29

Appendix N – Short version of the WFESS

Wellbeing in Further Education Students		
<p>1. Please enter your college 'A' number. This will not be used to identify you but will enable us to contact you with the results from this survey.</p> <input type="text"/>		
<p>2. Please enter your tutor group.</p> <input type="text"/>		
<p>3. Read through the life areas listed below, and think carefully about how you feel about each one at this moment in time. Using the drop down box, rate each on a scale of 1 to 10, where 1 is not at all and 10 is very much so.</p>		
	How resourceful I feel	How challenged I feel
Future employment/Higher Education	<input type="text"/>	<input type="text"/>
Exams/college assignments	<input type="text"/>	<input type="text"/>
Self-confidence	<input type="text"/>	<input type="text"/>
Other issues relating to college	<input type="text"/>	<input type="text"/>
Finances	<input type="text"/>	<input type="text"/>
Dating/personal relationships	<input type="text"/>	<input type="text"/>
Friends/social relationships	<input type="text"/>	<input type="text"/>
Family & Relatives	<input type="text"/>	<input type="text"/>
Healthy living	<input type="text"/>	<input type="text"/>
Personal safety	<input type="text"/>	<input type="text"/>
<p>Other (If there is another life area not listed above that you feel should be measured, please describe it in the box below and rate it using the same scale.)</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>		

Wellbeing in Further Education Students

Think about how these life areas are affecting you at the present time and answer the following questions:

4. How important is it for you to deal with these life areas? 1 is not important and 10 is very important.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

5. On average how long have these life areas been challenging?

☐ Less than a month ☐ A month ☐ 2-5 months ☐ 6-12 months ☐ over a year

6. On average how much do these life areas worry/distress you?

☐ Not at all ☐ Only a little ☐ Quite a lot ☐ A lot ☐ A great deal

7. On average how much do these life areas interfere with your everyday life in the following:

	Not at all	Only a little	Quite a lot	A lot	A great deal
Home life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friendships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leisure activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. On average how likely is it that you will deal these life areas? 1 is not very likely, and 10 is very likely.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

9. On average how much control do you have in dealing with these life areas. 1 is no control and 10 is a great deal of control.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

10. On average how committed are you to solving these life areas. 1 is not at all committed and 10 is very committed.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

11. On average how much support do you have to deal with these life areas. 1 is no support at all and 10 is a great deal of support.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

©Dodge2013

Appendix O – College Agreement

Understanding Wellbeing Research Project

TITLE OF PROJECT: **Measuring and Improving Wellbeing in Further Education Students.**

Thank you for agreeing to facilitate the final stage (stage 3) of this PhD research project. We will be piloting a pastoral programme designed to improve people's wellbeing. These will be run in ordinary pastoral sessions from January 2014 and will be part of the pastoral programme planned for the L6 year group. Rachel Dodge will provide the college with all the necessary learning materials (to be photocopied by the college) and any pre-intervention training, both for tutors and parents. Before and after these sessions we will ask students to complete the questionnaire that we developed in phase 2. If students agree to join the study, then we will use the data from these questionnaires as part of our research. If students do not wish to join the study, then their completed questionnaires will be used as part of their pastoral care only and will be withheld from the research study.

We will be looking for feedback on these activities and how tutors and learners felt the workshops went. We want to know what worked and what didn't work; and what we need to change. Tutors and learners will be given an evaluation questionnaire to complete anonymously to provide this feedback. In addition two of the pastoral groups will be observed by the researcher during these sessions as part of the research. Consequently, we will be asking for two tutors who are happy for their sessions to be observed throughout the intervention.

If you are happy for the research to be undertaken atCollege, please sign below:

Signature: _____

Print name: _____

Date: _____

Appendix P – Learner Coach Job Description

Job Description: Learner Coach

All staff are expected to contribute to the fulfilment of the College mission. Staff are expected to value the uniqueness and contribution of all individuals, and promote positive self esteem and equality of opportunity in all aspects of their work.

	Function	Description
a	Job Purpose	<p>To contribute to the achievement of the Mission and strategic objectives of the college by:</p> <p>Acting as personal tutor to students within the pastoral system at College. The tutor role includes monitoring behaviour and attendance, guiding, and instructing groups in tasks associated with the Welsh Baccalaureate Qualification, as well as UCAS and other work as it arises.</p>
b	Accountability	Accountable to designated Assistant Senior Manager.
Responsibilities		
c	Key Responsibilities	<p>The Learner Coach will:</p> <p>Monitor and encourage excellent studentship of learners under his/her care</p> <p>Communicate with parents about areas of concern by any appropriate means, including the College's eLP system</p> <p>Maintain clear and accurate records of student progress, including any extraordinary contact with student</p> <p>Deploy College systems for monitoring and discipline with a view to encouraging high levels of studentship</p> <p>Work with the Welsh Baccalaureate Coordinator to ensure compliance with the demands of the different elements of the course, and generate a positive attitude on the part of students towards it</p> <p>Following the prescribed scheme of work, deliver positive Welsh Baccalaureate lessons, assessing assignments and submitting results via Moodle in a timely manner</p> <p>Be available for admissions, enrolment, and progression, interviews, as well as periodic parents' and recruitment evenings</p> <p>Attend departmental meetings as called</p> <p>Participate in all relevant CPD opportunities offered by the College</p>

	Function	Description
		Understand and sympathise with the Catholic ethos of the College, and seek to manifest at all times in all dealings with students
d	Personal Development	In partnership with the College, take responsibility for personal development, including: Participating in departmental reviews, and identifying support and development needs Attending relevant staff development opportunities Engaging in personal development opportunities, including further academic study, and professional qualifications
e	Health And Safety	All employees have a statutory duty of care for their own personal safety and that of others who may be affected by their acts or omissions. Staff are required to cooperate with College management to enable the College to meet its own legal duties and to report any hazardous situations or defective equipment.

General

This description is not intended to establish a total definition of the job, but an outline of the responsibilities you are expected to undertake. From time to time, you may be required to undertake other duties commensurate with your level of responsibility.

This is a description of the job as it is presently constituted. It is the practice of the College to periodically examine its job descriptions and to update them to ensure that they relate to the job as then being performed, or to incorporate whatever changes are being proposed. You will, therefore, be expected to participate in any discussions relating to job description change.

Appendix Q – ‘Resource-Full’ Student Survey

We are very interested in your thoughts about the Resource-Full programme that you took part in last year during your pastoral sessions.

We would like to know what you think and how you feel, so please respond honestly - there are no right or wrong answers.

1. If you would like to be entered for the draw for a £50 Amazon Voucher please put your student number below:

2. Thinking back to the sessions you had could you rank them by how much you enjoyed them, using 1 as your favourite and ten as your least favourite.

<input type="text"/>	Your amazing brain - the adolescent brain and synaptic pruning	<input type="checkbox"/> N/A
<input type="text"/>	Building the resource bank - Looking at your strengths, goal setting & mission statement	<input type="checkbox"/> N/A
<input type="text"/>	Individual thought patterns - Self-talk, optimism vs pessimism & mindset	<input type="checkbox"/> N/A
<input type="text"/>	Confidence - envelope task, values & beliefs & confidence builder	<input type="checkbox"/> N/A
<input type="text"/>	Relationships - healthy relationships, building relationships & free hugs campaign	<input type="checkbox"/> N/A
<input type="text"/>	Positive communication - communication styles & positive communication tips	<input type="checkbox"/> N/A
<input type="text"/>	Healthy living - sleep, nutrition & exercise	<input type="checkbox"/> N/A
<input type="text"/>	Stress management - what is stress, proactive Vs reactive & coping strategies	<input type="checkbox"/> N/A
<input type="text"/>	Live for the moment - Flow & Mindfulness	<input type="checkbox"/> N/A
<input type="text"/>	Reflection - Revisiting the resourcebank	<input type="checkbox"/> N/A

3. Please tell us how much you agree with the following statements:

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
I enjoyed the Resource-Full lessons a lot.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I've not learned anything from Resource-Full that has helped me solve my challenges.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I liked the variety in the lessons.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The sessions helped me understand others better.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The sessions helped me understand myself better.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I did not learn anything new from the sessions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The sessions led to discussion with the rest of my class.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The sessions made me think in a different way.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. Since participating in Resource-Full are the challenges you face

☐ Much worse ☐ A bit worse ☐ About the same ☐ A bit better ☐ Much better

5. Did the Resource-Full lessons help you build up resources to deal with these challenges?

☐ Not at all ☐ Only a little ☐ Quite a lot ☐ A great deal

6. Have you used any of the techniques covered in the sessions?

☐ Yes ☐ No

7. If YES, which techniques do you use?

8. Do you have any other comments about the programme?

Appendix R – Learner Coach Anonymous Survey

Now that the Resource-Full course is finished it would be really helpful to have your views, as a tutor, on how it went.

Preparation

At the start how did you feel about the prospect of delivering the course? Did you feel adequately prepared?

Delivery

What did you think of the resources?

How was the timing of the course?

Which sessions did you feel worked best?

Were any of the sessions particularly difficult to deliver? If so, in what way?

Reflections and Recommendations

What effect did you feel the course had on your students? (Any examples you can cite would be helpful)

What effect did the course have on you as a tutor? (Any examples you can cite would be helpful)

What changes to the course and its delivery would you recommend?

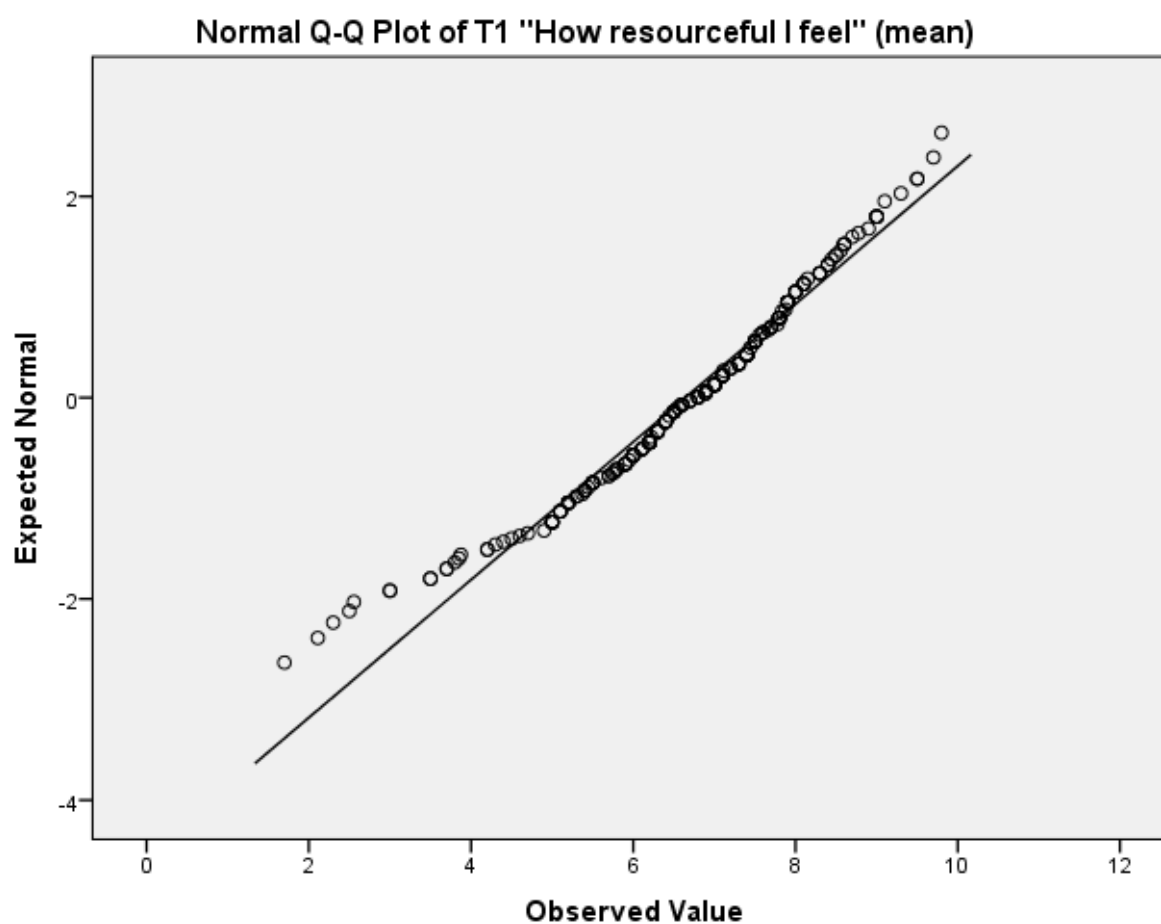
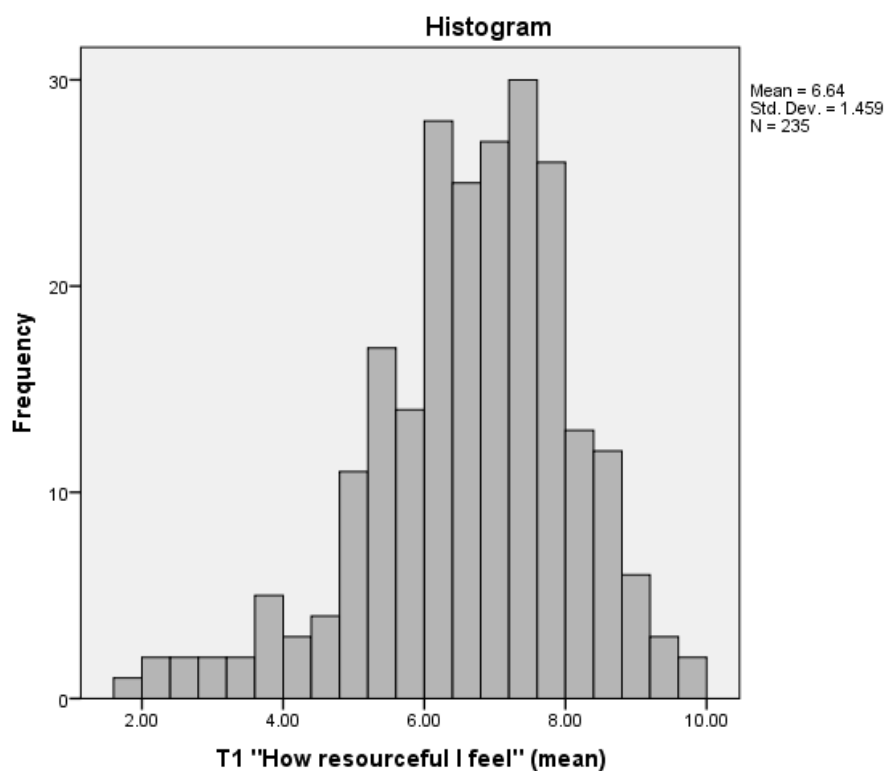
Please feel free to make any further feedback on the course.

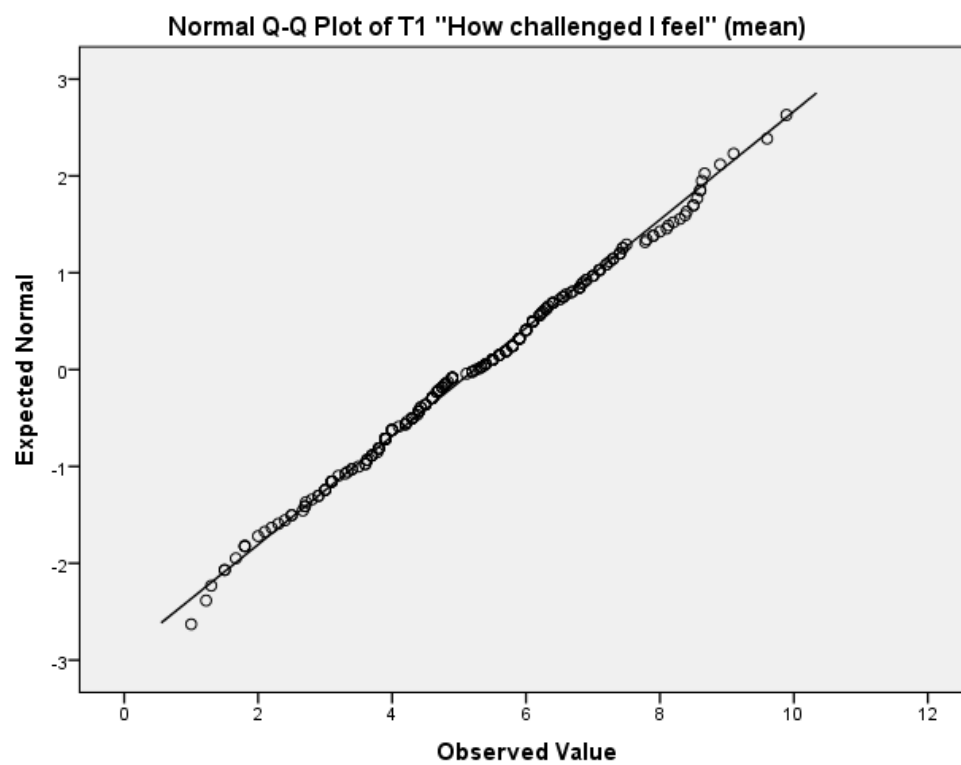
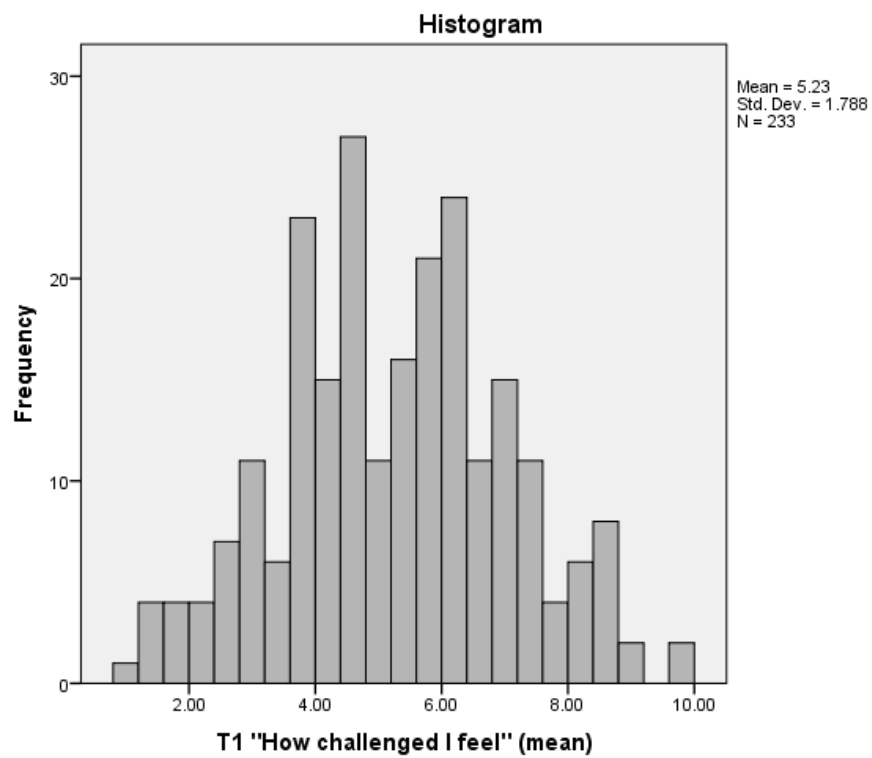
Please send completed feedback to radodge@cardiffmet.ac.uk or email me to request an electronic version of this form.

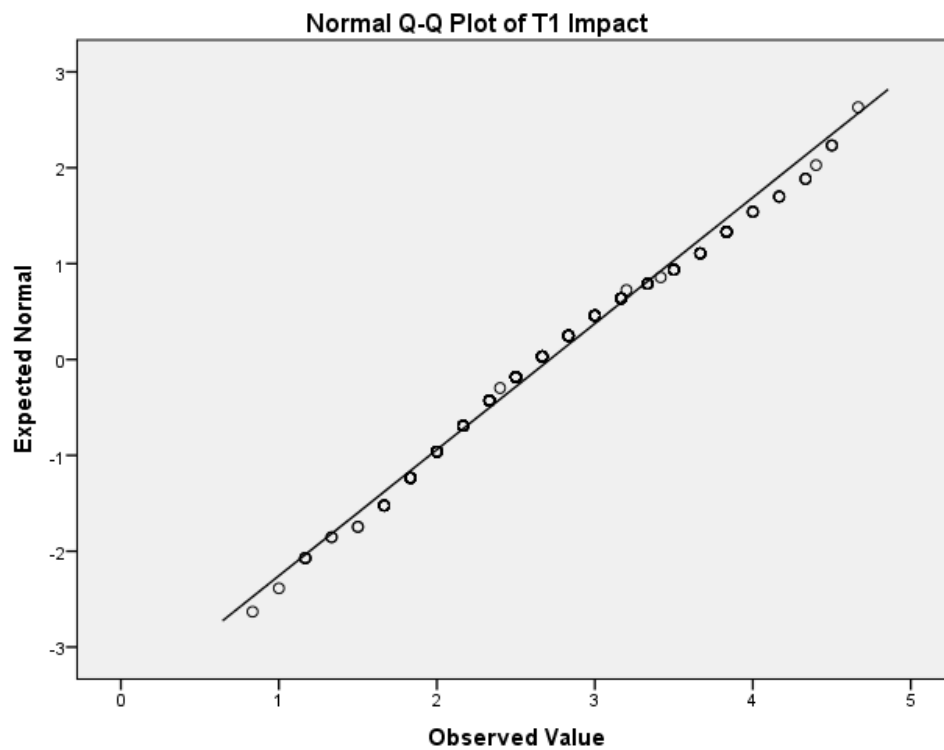
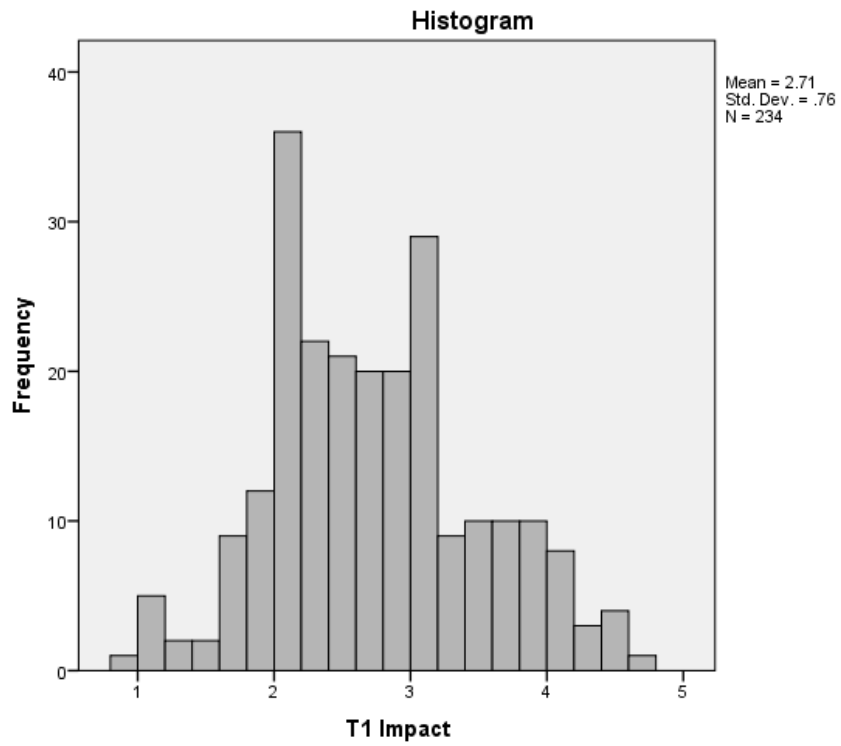
Appendix S – Learner Coach Nodes

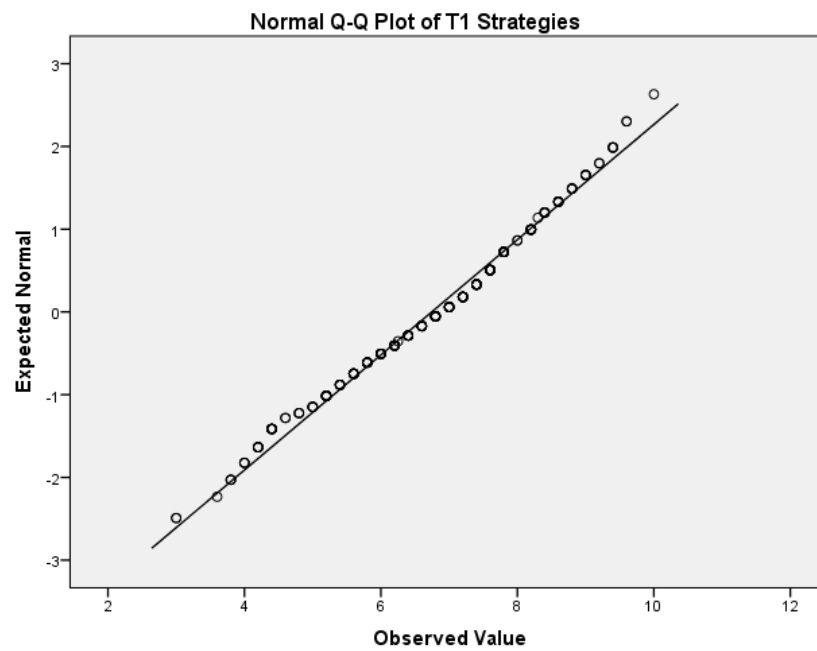
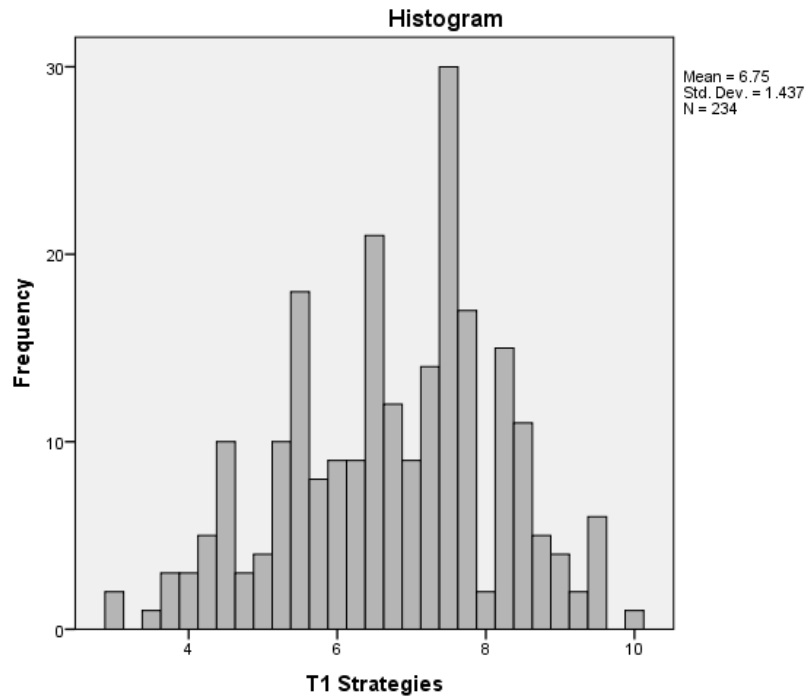
Session/Theme
Your Amazing Brain
Building the Resource Bank
Individual Thought Patterns
Confidence
Relationships
Positive Communication
Healthy Living
Stress Management
Live for the Moment
Reflection
Variety
Discussion
Resources
Different Outlook
Immature
Lack of understanding
Positive
Negative

Appendix T – Histograms and p-plots









Appendix U – Median Scores for Strategies over time

Strategies Scale	T1	T2
How important is it for you to deal with these life areas?	8.00	8.00
How likely is it that you will deal these life areas?	6.35	6.30
How much control do you have in dealing with these life areas?	6.24	6.42
How committed are you to solving these life areas?	7.08	6.83
How much support do you have to deal with these life areas?	6.31	6.68

Appendix V – Citations of Dodge *et al.* (2012)

Chart to demonstrate research contexts of Dodge *et al.* (2012) citations

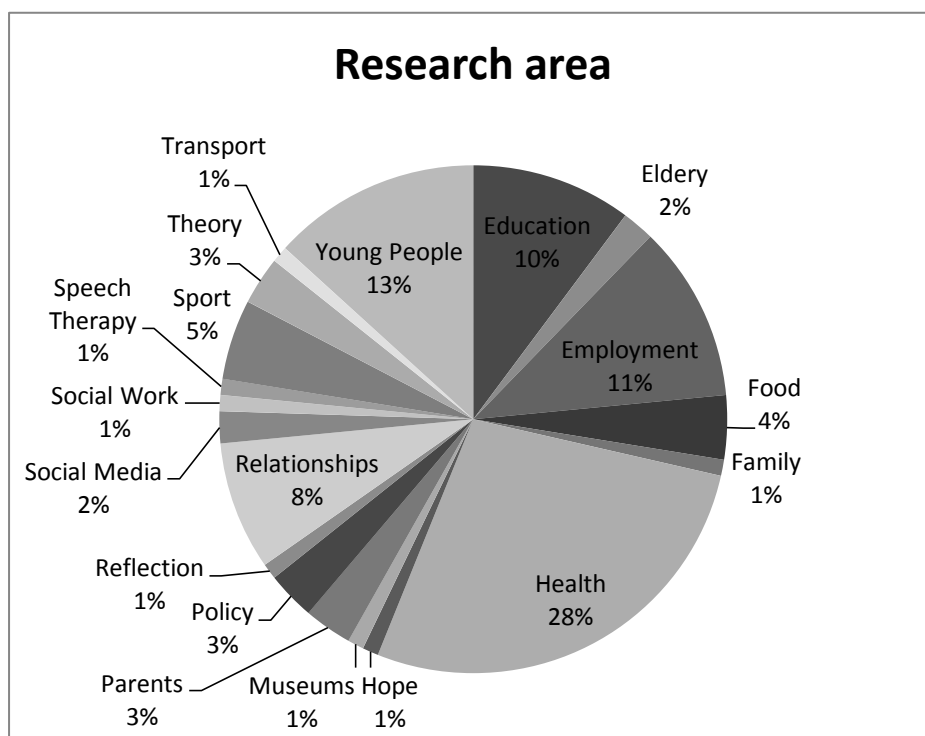


Chart to show location of research citing Dodge *et al.* (2012)

