

Seamus Whitty is the Project Manager, Kerry Life Skills, Killarney, Ireland and Dr Tom Farrelly is a Social Science Lecturer at the Institute of Technology, Tralee, Ireland.

For communication, please email: [seamuswhitty@kerrylifeeducation.com](mailto:seamuswhitty@kerrylifeeducation.com) and [tom.farrelly@staff.ittralee.ie](mailto:tom.farrelly@staff.ittralee.ie)

## Seamus Whitty and Tom Farrelly

# What's Fun Got to Do with It? – Engaging Young People in a School-Based Wellbeing Programme

Youth mental health and wellbeing is receiving increasing attention and has taken its place on the national agenda. Dooley and Fitzgerald (2012), authors of the *My World Survey*, reveal that the number one health issue for young people is their mental health. Mathers and Loncar (2006), assert that mental health problems will be the main cause of morbidity in the industrialised world by 2030. In 2013, Ireland had the fourth highest rate of youth suicide in Europe, with suicide among the top five causes of mortality in the 15-to-19 year age group (NEPS, 2013). There is strong evidence for early intervention for youth mental health problems, with long-term health and societal gains seen as a likely outcome (Sawyer *et al.*, 2012).

The role schools can play in the promotion and development of healthy behaviours in young people is well documented, and schools are increasingly addressing social, mental and physical health concerns in order to support effective learning, but also student wellbeing (Adelman and Taylor, 2012). As schools are increasingly employed to support the mental health, wellbeing and resilience of Irish adolescents; appropriate interventions continuously need to be explored and evaluated (Cannon *et al.*, 2013). Ireland's National Council for Curriculum and Assessment (2017), articulates and demonstrates the developing importance and role for wellbeing in schools in its document '*Guidelines for Wellbeing in Junior Cycle*'. Programmes incorporating life skills, social and emotional learning can produce long-term benefits for young people, including improved emotional and social functioning, positive health behaviours, and improved academic performance (Tennant *et al.*, 2007; Weare

and Nind, 2011). It is within this context, that the interventions of Kerry Life-Skills (KLS), a community-based charity supporting wellbeing in schools, were explored.

The interventions were particularly examined on their perceived social significance and acceptability, or 'social validity'. Social validity is viewed as an important consideration in intervention research, widely acknowledged in the mental health and school psychology disciplines (Gresham and Lopez, 1996; Finn and Sladeczek, 2001). The purpose of social validity assessments is to evaluate the acceptability or viability of a programmed intervention (Schwartz and Baer, 1991). KLS interventions are grounded in principles of positive youth development and empowerment, whereby young people gain the ability, authority, and agency to make decisions and implement change in their own lives (Vavrus and Fletcher, 2006). This supports young people's right to self-determination, positioning them as people who have a voice and deserve to be heard in schools and in society (Cook-Sather, 2006). This is one of the reasons, along with calls in the mental health sector to do the same (Baltag and Mathieson, 2010), that this study endeavoured to keep the voice of the young person to the forefront and to ensure that their voice informs future practice.

## Methods

To effectively promote children's academic, social, and emotional learning, efforts need to be fully integrated within a whole-school approach, with implementation quality, pedagogy and student engagement being prioritised (Dix *et al.*, 2012). However, there are a variety of

methodological challenges in constructing effective interventions and measurement criteria (Awartani, 2008). McCann *et al.* (2012) assert that there is a need for more enhanced evaluation techniques, diverse teaching strategies and increased involvement of service users in the area of social and emotional learning.

Research efforts to establish effectiveness often favour the use of experimental studies with controls, generally considering these forms of evaluation to be the benchmark, or gold standard for intervention effectiveness assessments.

However, Weare and Markham (2005), assert there are other valid, more socially-focused approaches, which emphasize student involvement and ownership. Participants' evaluation of a programme is important as well, since this can provide insight into programme aspects best and least liked by the participants.

This may provide suggestions about how to modify programme implementation to best fit the needs of the target population. The research study undertaken was an exploratory case study of the Kerry Life Skills post-primary programmes using a mixed methods approach incorporating both qualitative and quantitative elements.

The study explored the social validity and user experience of a specific programme with the intention of capturing a range of perspectives and perceptions of key stakeholders. Mixed methods were prioritised as the best way of ensuring rigour, breadth, and depth, while bringing forth the perspective of school management, school teachers and, in particular, the voice of the young people themselves (Denzin, 2012).

Ethical approval was provided by the ethics review board of the Department of Social Sciences, Institute of Technology, Tralee and gatekeeper access was obtained from the four participation schools prior to data collection.

## Participants

Four schools in County Kerry in Ireland's South West were purposively selected for this bounded case, as they provided an appropriately diverse range of school types in the county, providing potential access to large population sizes (n=250) incorporating the following criteria:

- Mixed genders
- A range of geographical locations with a mix of urban and rural catchment areas

- A range of junior and senior cycle second level student participants

In each school, participant student groups were selected randomly out of the entire year group receiving the programme intervention. Purposive sampling was again used to select the school principals and Social, Personal and Health Education (SPHE) teachers for personal interviews.

## Instrumentation

One of the challenges of this study was to identify measures that were designed to assess and explore the social importance, or social validity, of the interventions and the user experience of the KLS programmes, rather than measure the impact on symptom change and adaptive functioning. The purpose of social validity assessments is to evaluate the acceptability or viability of a programmed intervention (Schwartz and Baer, 1991). The three elements of an intervention often assessed for their social validity are: (a) the social significance of the goals of intervention; (b) the social acceptability of the intervention process and (c) the social importance of the outcomes produced by the intervention (Foster and Mash, 1999). For the purposes of this study it was necessary to adapt measures from three different scales or questionnaires that align with these three elements, with a view to integrating the different measures into a tailored questionnaire that would meet the requirements of the research question. Notwithstanding the difficulties associated with the adoption of any measure, the three scales adapted for inclusion of the questionnaire were:

1. Social Validity- Children's Usage Rating Profile (CURP) (Briesch and Chafouleas, 2009; Chafouleas *et al.*, 2009; Briesch *et al.*, 2013). One of the benefits of exploring this perspective is it enables schools and professionals, through the data gathered, to gain a better understanding of how the intervention may need to be altered in order to increase the chances of successful implementation.

2. Social Validity- Friends for Life Program Social Validity Questionnaire. 'FRIENDS for Life' is a school-based positive mental health programme based on a group Cognitive Behavioural Therapy (CBT) intervention that promotes emotional resilience and reduces anxiety

in children and adolescents (Barrett *et al.*, 2000). Social validity has been included for assessment in several studies on the Friends for Life programme (Barret *et al.*, 2001; Gallegos-Guajardo *et al.*, 2013) with specific questions relating to how much students enjoyed the interventions and how they felt it could be improved on.

3. The Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS). The SWEMWBS is a scale of seven positively worded items, with five response categories, which have been specifically designed to measure both the feeling and functioning aspects of positive mental wellbeing, i.e. flourishing (Stewart-Brown *et al.*, 2011). These questions adapted from the SWEMWBS were included specifically to assess the perceived impact the programmes have on statistically robust and valid measures of health and wellbeing.

Additionally, a number of semi-structured interviews were also included to triangulate the survey data, in order to explore the perceptions of school management and teachers. The interviews

provided an opportunity to further query contextual aspects of student perceptions, allowing for the triangulation of data obtained from the student questionnaires. However, this paper's focus is largely on the data from the student survey and the issues associated with the findings from it.

## Findings

A total of 182 young people completed the questionnaires across the four schools, comprising 68 males and 114 females. The perceptions and experiences of 4 key stakeholders, management and SPHE teachers in each of the participating schools, was also explored in order to provide a meaningful context for these data.

Tables 1-3 present the student responses to questionnaire questions according to the three social validity measures being explored, namely:

- Social significance of the goals of intervention
- Social acceptability of the intervention process
- Social importance of the outcomes produced by intervention procedure

**Table 1 Overall Responses to Significance of Intervention Goals**

	Disagree/Strongly Disagree (%)	Neutral (%)	Agree/Strongly Agree (%)
I understand why this programme was chosen for our school.	4	17	79
I expect to use the ideas I learned in this programme in my life.	1	22	77
If a friend were having difficulties I would recommend this programme.	4	20	76

**Table 2 Overall Responses to Acceptability of Intervention Process**

	Disagree/Strongly Disagree (%)	Neutral (%)	Agree/Strongly Agree (%)
I enjoyed the KLS programme.	0	2	98
I would not like to take part in this programme again.	92	3	5
This programme used up time that could have been better spent.	93	4	3
This programme can help students to make up their own mind about things.	2	10	88
I would not like to take part in this programme again.	92	3	5

**Table 3 Overall Responses to Importance of Intervention Outcomes**

	Disagree/Strongly Disagree (%)	Neutral (%)	Agree/strongly agree (%)
I learned a lot from this programme.	1	19	80
This programme has a positive impact on how students feel about themselves.	1	6	93
This programme can help students to make up their own mind about things.	2	10	88
This programme can help students to better deal with problems.	4	8	88
I could see myself using the ideas from this programme in my life.	5	19	76
These workshops can help students to feel more confident.	1	7	92

Section C of the questionnaire explored which programmatic elements of the KLS interventions were ranked highest by the students in terms of their preferences for the different activities.

**Table 4 Students' Activity Preferences**

Categories	Percentages
Music	50.35
Interactive games/activities	30.76
Videos	29.27
Stories	28.66
Group work	22.56
Getting out of class	19.36
Other	11.54
Life skills	10.63
Information content	7.1

The open-ended question in Section D at the end of the questionnaire provided further data on the students' experiences and perceptions of the intervention, with students stressing that the programmes were fun, important and interactive. This perception was supported further throughout the interviews with management and SPHE teachers.

The highly positive ratings to all questions (ranging from 76% to over 90%) in Section B of the questionnaire strongly suggest the high social validity of the KLS programmes for the principal stakeholders; the students themselves. The findings indicate that the programmes were fun and enjoyable for students, a dimension that seems to receive scant consideration in the general literature on programme effectiveness.

The programmes are seen to be important and

particularly effective at supporting two established protective factors for youth mental health: self-esteem and confidence (McEvoy, 2009; WHO, 2015), while also supporting a whole-school approach to supporting student wellbeing, particularly supporting the SPHE curriculum. An emphasis on fun, the development of trust over time, the importance of the personal qualities of the facilitator in developing genuine relationships, and the engagement of students interactively in the process of learning, are seen to be key qualities of KLS interventions.

### **Discussion and Implications for School Health**

There is a very strong emphasis in the findings of this study on the importance of fun and engaging positively with students for



interventions to be considered acceptable. The process of programme delivery - in particular, youth-friendly aspects (music, video, activities, stories, getting out of class and a sympathetic facilitator) - is considered by students themselves to be critical for programme acceptability and social validity. These process elements, rather than solely programme content, may be central to programme effectiveness itself, as they may directly influence student buy-in. Marchant *et al.* (2012, p.221) support this: 'In the current climate of evidenced-based intervention, we often lose sight that it is not solely the proposed intervention that leads to desired change, it is the buy-in of stakeholders.'

The perspective that programme outcomes are a result simply of programme 'content' runs the risk of interventions being conducted in an educational setting that is based on the passive transmission of knowledge as represented in the 'banking' analogy of education (Freire, 1998). An alternative perspective is to propose interventions based on the 'process' by which the students can best be facilitated in the acquiring of knowledge and understanding of the topic in question, or what has been described as 'process curriculum'. Ord (2007), outlines how 'youth-centred' approaches maintain a commitment to allowing young people to set the pace, with an emphasis on fun and respect. Furthermore, many 'process' aspects of KLS interventions as identified in the data: positive regard, student trust and safety and effective communication, have all been demonstrated in the literature to contribute positively to school culture, and thereby impact on collective and individual wellbeing in schools (Patton *et al.*, 2000; Butler *et al.*, 2011).

Dewey's (1938), emphasis on 'learning through experience' and the importance of contact and communication, provides further theoretical basis for a young-person-centred curriculum. The literature on active learning, (Alexander and Murphy, 1998; Michael, 2001) and its emphasis on placing the student at the centre of the learning experience also supports the contention that process is inextricably linked to outcome. Furthermore, the literature of student engagement consistently highlights the role process plays in impacting on outcomes (Christenson *et al.*, 2012). This would suggest that the engagement, acceptability and popularity of the 'process' of KLS interventions might be associated with

effectiveness, though undoubtedly this needs to be explored with further research.

The review of literature conducted for this study did not indicate any substantive references to music, games, videos, story or, even fun, as factors for consideration of programme effectiveness. The relationship, if any, between students' enjoyment of wellbeing programmes, or fun, and programme effectiveness does not seem to be established in this field. However, it is well established that young people learn best when they are having fun, at ease, feel safe (an aspect of KLS intervention referred to frequently in the data) and consider the material being explored to be relevant (Ainley and Ainley, 2011). Further research is required to explore the programme elements most valued by students in this study: music, games, videos and stories, and their relationship and possible role in impacting programme effectiveness. In the case of the KLS programmes, follow-up research might include a focus group approach to explore this in detail.

An unexpected finding of this study related to intervention process, was the importance attached to the approach and personality of the facilitator involved in programme delivery, with many students referring to the facilitator by name in their responses. Many students emphasised certain qualities in facilitation, specifically: fun, kindness, humour and understanding that they found to be important elements of the intervention. This point was mirrored in the staff interviews with the specific attributes necessary for the successful facilitation of the KLS programmes being described as: an understanding of how teenagers think; empathy; genuineness; a capacity for self-reflection; gentleness; and commitment. This warrants further exploration as a review of the literature on the topic included scant references to the importance of the personality and/or the personal qualities of facilitators of mental health or wellbeing programmes in schools. This apparent gap in the literature is at odds with one of the key findings of this study; i.e. that the successful implementation of KLS wellbeing programmes in schools is strongly linked to the personality and commitment of the facilitator. There is significant evidence from related fields - in particular, youth work (Jeffs and Smith, 2010), psychotherapy (Gatongi, 2007) and educational pedagogy (Roorda *et al.*, 2011) - to suggest that this might be

central to what makes programmes work for young people in schools.

This research suggests that in order for mental health and wellbeing programmes in schools to be acceptable to young people themselves, they need to be engaging, fun, and to meet students 'where they are at'. The research further suggests that attention needs to be focussed on the facilitator of these programmes, with the qualities of empathy, genuineness and respect, seen as central to their successful delivery. Further research is required to explore the relationship between the 'process' of programme delivery and programme effectiveness, however, there are indications in this research that 'how' it happens, may in fact, be directly linked to 'if' it happens in the first place.

## References

- Adelman, H.S. and Taylor, L. (2012). Mental Health in schools: Moving in new directions. *Contemporary School Psychology*, 16(9), p.18.
- Ainley, M. and Ainley, J. (2011). Student engagement with science in early adolescence: The contribution of enjoyment to students' continuing interest in learning about science. *Contemporary Educational Psychology*, 36(1), pp.4-12.
- Alexander, P.A. and Murphy, P.K. (1998). The research base for APA's learner-centered psychological principles. In: Lambert, N.M. and McCombs, B.L. eds., *How Students Learn: Reforming Schools Through Learner-Centered Education*. Washington, DC: American Psychology Association. pp.25-6
- Awartani, M., Whitman, C. V. and Gordon, J. (2008). Developing Instruments to Capture Young People's Perceptions of how School as a Learning Environment Affects their Well-Being. *European Journal of Education*, 43(1), pp.51-70.
- Baltag, V. and Mathieson, A. (2010). *Youth-friendly health policies and services in the European region: Sharing experiences*. Geneva: WHO. (Accessed: 2 March 2017). Available at: [http://www.euro.who.int/\\_data/assets/pdf\\_file/0017/123128/E94322.pdf](http://www.euro.who.int/_data/assets/pdf_file/0017/123128/E94322.pdf)
- Barrett, P. M., Lowry-Webster, H. and Turner, C. (2000). *FRIENDS program for children: Participants workbook*. Brisbane: Australian Academic Press.
- Barrett, P., Shortt, A.L., Fox, T.L. and Wescombe, K. (2001). Examining the social validity of the FRIENDS treatment program for anxious children. *Behaviour Change*, 18, pp.63-77.
- Briesch, A. M. and Chafouleas, S. M. (2009). Exploring student buy-in: initial development of an instrument to measure likelihood of children's intervention usage. *Journal of Educational and Psychological Consultation*, 19(4), 321-336.
- Briesch, A. M., Chafouleas, S. M., Neugebauer, S. R. and Riley-Tillman, T. C. (2013). Assessing influences on intervention implementation: Revision of the Usage Rating Profile-Intervention. *Journal of School Psychology*, 51(1), pp.81-96.
- Butler, H., Krelle, A., Seal, I., Drew, S. and Trafford, L. (2011). *The critical friend: Facilitating change and wellbeing in school communities*. Australian Council for Education Research.
- Cannon, M., Coughlan, H., Clarke, M., Harley, M. and Kelleher, I. (2013). *The Mental Health of Young People in Ireland: A report of the Psychiatric Epidemiology Research across the Lifespan* (PERL) Group, Dublin: RCSI.
- Chafouleas, S. M., Briesch, A. M., Riley-Tillman, T. C. and McCoach, D. B. (2009). Moving beyond assessment of treatment acceptability: An examination of the factor structure of the Usage Rating Profile—Intervention (URP-I). *School Psychology Quarterly*, 24(1), pp.36-47.
- Christenson, S.L., Reschly, A.L. and Wylie, C. eds. (2012). *Handbook of research on student engagement*. Springer Science & Business Media.
- Cook-Sather, A. (2006). Sound, Presence, and Power: Exploring the Metaphor of Student Voice in Educational Research and Practice. *Curriculum Inquiry*, 36(4), pp.359–390.
- Denzin, N. (2012). Triangulation 2.0. *Journal of Mixed Methods Research*, 6(2), pp.80-88.
- Dewey, J. (1938). *Experience and education*. 1997 edn. New York: Simon & Schuster
- Dix, K., Slee, P., Lawson, M. and Keeves, J. (2012). Implementation quality of whole-school mental health promotion and students' academic performance. *Child and Adolescent Mental Health*, 17(1), pp.45–51.
- Dooley, B.A. and Fitzgerald, A. (2012). *My world survey: National study of youth mental health in Ireland*. Headstrong and UCD School of Psychology. Dublin
- Finn, C. A., and Sladeczek, I. E. (2001). Assessing the social validity of behavioral interventions: A review of treatment acceptability measures. *School Psychology Quarterly*, 16, pp.176–206.
- Foster, S.L., and Mash, E.J. (1999). Assessing social validity in clinical treatment research: Issues and procedures. *Journal of Consulting and Clinical Psychology*, 67, pp.308–319.
- Freire, P., 1998. *Pedagogy of the Oppressed*. Trans. by Bergman Ramos, M. New York: Continuum.
- Gallegos-Guajardo, J., Ruvalcaba-Romero, N., Garza-Tamez, M. and Villegas-Guinea, D. (2013). Social Validity evaluation of the FRIENDS for Life Program with Mexican Children. *Journal of Education and Training Studies*, 1, (1) April.
- Gatongi, F. (2007). Person-centred approach in schools: Is it the answer to disruptive behaviour in our classrooms? *Counselling Psychology Quarterly*, 20(2), pp.205-211.
- Gresham, F.M. and Lopez, M.F. (1996). Social validation: A unifying concept for school-based consultation research and practice. *School Psychology Quarterly*, 11(3), p.204.
- Jeffs, T. and Smith, M.K. eds. (2010). *Youth work practice*. Palgrave Macmillan.
- Marchant, M., Heath, M. A. and Miramontes, N. (2013). Merging empiricism and humanism: Role of social validity in the school-wide positive behavior support model. *Journal of Positive Behavior Interventions*, 15(4), pp.221-230.
- Mathers, C. D. and Loncar, D. (2006). Projections of global mortality and burden of disease from 2002 to 2030. *PLoS Medicine*, 3(11), p.442.
- McCann, E., Higgins, A., Maguire, G., Alexander, J., Watts, M., Creaner, M. and Rani, S. (2012). A survey of pedagogical approaches and quality mechanisms used in education programs for mental health professionals. *Journal of Interprofessional Care*, 26(5), pp.383-389.
- McEvoy, O. (2009). *Teenage mental health: what helps and what hurts? Report on the outcome of consultations with teenagers on mental health*. Dublin: The Office of the Minister for Children and Youth Affairs.
- Michael, J.A. (2001). In pursuit of meaningful learning. *Advances in Physiology Education*, 25(3), pp.145-158.
- National Council for Curriculum and Assessment. (2017). *Guidelines Wellbeing for Junior Cycle*. (Accessed 2 March 2017). Available at: [http://www.juniorcycle.ie/NCCA\\_JuniorCycle/media/NCCA/Curriculum/Wellbeing/Wellbeing-Guidelines-for-Junior-Cycle.pdf](http://www.juniorcycle.ie/NCCA_JuniorCycle/media/NCCA/Curriculum/Wellbeing/Wellbeing-Guidelines-for-Junior-Cycle.pdf).
- National Educational Psychological Service (NEPS). (2013). *Well-being in post primary schools. Guidelines for mental health promotion and suicide prevention*. Department of Education and Skills: Dublin

- Ord, J. (2007). *Youth work process, product and practice: Creating an authentic curriculum in work with young people*. Lyme Regis: Russell House Publishing.
- Patton, G. C., Glover, S., Bond, L., Butler, H., Godfrey, C., Pietro, G.D. and Bowes, G. (2000). *The Gatehouse Project: a systematic approach to mental health promotion in secondary schools*. Centre for Adolescent Health, Royal Children's Hospital, Victoria Australia.
- Roorda, D.L., Koomen, H.M., Spilt, J.L. and Oort, F.J. (2011). The influence of affective teacher–student relationships on students' school engagement and achievement a meta-analytic approach. *Review of Educational Research*, 81(4), pp.493-529.
- Sawyer, S. M., Afifi, R. A., Bearinger, L. H., Blakemore, S. J., Dick, B., Ezech, A. C. and Patton, G. C. (2012). Adolescence: a foundation for future health. *The Lancet*, 379(9826), pp.1630-1640.
- Schwartz, I.S. and Baer, D.M. (1991). Social validity assessments: Is current practice state of the art? *Journal of Applied Behavior Analysis*, 24, pp.189–204.
- Stewart-Brown, S.L., Platt, S., Tennant, A., Maheswaran, H., Parkinson, J., Weich, S., Taggart, F. and Clarke, A. (2011). The Warwick-Edinburgh Mental Well-Being Scale (WEMWBS): a valid and reliable tool for measuring mental well-being in diverse populations and projects. *Journal of Epidemiology and Community Health*, 65(2), p.A38-A39.
- Tennant, R., Goens, C., Barlow, J., Day, C. and Stewart-Brown, S. (2007). A systematic review of reviews of interventions to promote mental health and prevent mental health problems in children and young people. *Journal of Public Mental Health*, 6(1), pp.25-32.
- Vavrus, J. and Fletcher, A. (2006). *Guide to Social Change Led By and With Young People. The Freechild Project*. (Accessed 2 March 2017). Available at: <http://digitalcommons.unomaha.edu/slceguides/4>
- Weare, K. and Markham, W. (2005). What do we know about promoting mental health through schools?. *Promotion & education*, 12(3-4), pp.118-122.
- Weare, K. and Nind, M. (2011). *Mental health promotion and problem prevention in schools: what does the evidence say?* Health Promotion International 2011, 26(SUPPL. 1):i29–i69.
- World Health Organization (WHO). (2015). *Topics at a Glance- Adolescents and Mental Health*. (Accessed 2 March 2017). Available at: [http://www.who.int/maternal\\_child\\_adolescent/topics/adolescence/mental\\_health/en/](http://www.who.int/maternal_child_adolescent/topics/adolescence/mental_health/en/)

## Education and Health

The journal, published by SHEU since 1983, is aimed at those involved with education and health who are concerned with the health and wellbeing of young people. Readership is worldwide and in the UK include: primary; secondary and further education teachers; university staff and health-care professionals working in education and health settings. The journal is online and open access, continues the proud tradition of independent publishing and offers an eclectic mix of articles.

**Contributors** (see a recent list) - Do you have up to 3000 words about a relevant issue that you would like to see published? Please contact the Editor

## SHEU

Schools and Students Health Education Unit

The specialist provider of reliable local survey data for schools and colleges and recognised nationally since 1977

*"The (SHEU survey) helped us to prioritise where we needed to be in terms of PSHE education. We delivered assemblies based on the evidence as well as curriculum development, and dealt with whole school issues – particularly in regard to pastoral care. The answers received to the question on the survey Who are you most likely to approach if you needed help worried staff as teacher was not a popular answer. Subsequently the staff asked themselves why this had happened and what needed to be done to address the issue. There was more emphasis on wider aspects of PSHE education delivery, which needed more attention. To summarise, the (SHEU survey) allows the PSHE department to assess the impact of teaching and learning and modify future lessons accordingly. It allows our school to look at whole school issues such as the extent to which the pastoral care system is meeting the needs of our pupils. It helps us to do need analysis of our pupils. It helps to provide important evidence for SEF / the extent to which we are meeting wellbeing indicators / National Healthy School standards."* Secondary School Head

For more details please visit <http://sheu.org.uk>