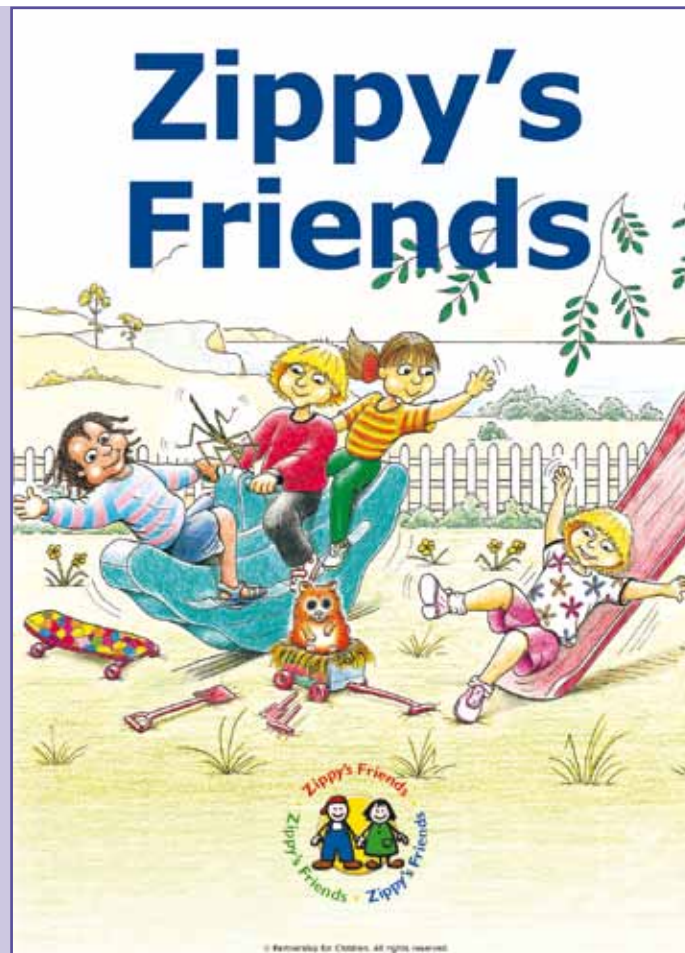




NUI Galway
OÉ Gaillimh



An evaluation of the *Zippy's Friends* emotional wellbeing programme for primary schools in Ireland



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March 2010

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EXECUTIVE SUMMARY



Introduction

This report presents the main findings on the evaluation of the Zippy's Friends emotional wellbeing programme in Irish primary schools. The Zippy's Friends programme is designed to promote the emotional wellbeing of children aged five to eight years of age by increasing their repertoire of coping skills and by stimulating varied and flexible ways of coping with problems of day-to-day life. The programme is based around a set of six illustrated stories about a group of children, their families, friends and an imaginary stick insect called Zippy. Comprised of six modules, the programme addresses the following themes: feelings, communication, making and breaking relationships, conflict resolution, dealing with change and loss, and general coping skills. Structured into sessions, the programme is supported by a teacher's manual and an attractive set of teaching materials, which are designed to actively engage the children in a range of child-centered activities. Teachers participate in a structured training programme before implementing the programme in class.

In February 2008, the Zippy's Friends programme was introduced into Irish designated disadvantaged primary schools on a pilot basis to support the implementation of the Social Personal and Health Education (SPHE) curriculum for junior classes. With the support of the Department of Education and Science and the Health Service Executive, the programme was piloted in 30 designated disadvantaged (DEIS) schools in the West of Ireland. The 24 week programme was implemented over two academic years, 12 lessons were implemented between February and June 2008 and the remaining 12 sessions were implemented between October and March 2009. An evaluation of the pilot implementation of the programme was undertaken by the Health Promotion Research Centre at NUI Galway. The evaluation aims to:

- determine if an international evidence-based programme could be adapted and successfully implemented in the local context of disadvantaged primary schools in Ireland
- assess the impact on the pupils' emotional and behavioural wellbeing and coping skills
- examine the process of implementation and the relationship between this process and the programme outcomes.

Methods

The study employs a randomised controlled design with data collection from teachers and pupils before, during and after the implementation of the programme. A total of 730 pupils (mean age = 7 years 3 months; gender = 47.7% female) and 42 teachers from 42 DEIS schools in Donegal, Sligo, Leitrim and Galway were randomly assigned to intervention (N = 523) and control groups (N=207).

The intervention group was further divided into two types – Intervention Type I (N=270) and Intervention Type II (N=253). The teachers in Intervention Type I were asked to implement the programme as faithfully as possible. The teachers in Intervention Type II were requested to use the programme as a resource and they could, therefore, decide which parts of the programme they would implement. The control schools received the standard SPHE class (30 min per week). The evaluation is comprised of a range of quantitative and qualitative methods designed to assess the process of programme implementation and the programme effects on the children and teachers. The teachers completed questionnaires on a weekly basis throughout the implementation of the programme in addition to taking part in focus group review sessions. The children also completed a questionnaire, along with taking part in the Draw and Write Activity and participatory workshops.

The following measures were employed:

Programme effects

- Children’s Emotional Literacy
 - Emotional Literacy Checklist
- Children’s Coping Skills
 - Schoolagers’ Coping Strategy Inventory
 - Draw and Write Technique
 - Children’s Participatory Workshops
- Children’s Emotional and Behavioural Wellbeing
 - Strengths and Difficulties Questionnaire

Programme implementation

- Programme Fidelity
- Teachers’ Weekly Reports on Programme Implementation
- Perceived Strengths and Weaknesses of the Programme
 - Children’s Participatory Workshop
 - Teachers’ Review Questionnaire and Focus Group Interviews
- The School Context – Ethos Questionnaire
- The School Context – Social Personal and Health Education Questionnaire

Key Findings on Adapting the Programme to Primary Schools in Ireland

- There were no difficulties experienced in adapting the programme to the Irish school setting. The Zippy’s Friends programme fitted well in the context of SPHE for primary schools and supported the delivery of a number of strand units of the curriculum. The findings from the evaluation suggest that the programme was well received by teachers and pupils and that little or no adaptation was required. Throughout the implementation of the programme the commitment of the teachers and the support of the local health promotion staff were found to be critical to the successful implementation of the programme.

Key Findings on Programme Effects

- **Children’s emotional literacy:** The evaluation results indicate that the Zippy’s Friends programme had an overall significant positive effect on the children’s emotional literacy skills, with significant improvements in the children’s self-awareness, self-regulation, motivation, empathy and social skills when compared with the control group. The results from the teachers’ end of programme evaluation further support these positive findings with the majority of teachers (over 90%) observing improvements in the children’s social skills, verbal communication skills, their ability to manage their feelings and their relationships with each other. The findings from the children’s participatory workshops also show that the children in the intervention group had a more elaborate and wider range of vocabulary for articulating their feelings after completing the programme. They were more likely than the control group to explain the reasons why people felt a certain way and to suggest what they could do to make the situation better. The qualitative findings from the children’s participatory workshop also indicate that there was a significant improvement in the intervention group’s emotional literacy when compared with the control group.
- **Children’s coping skills:** In relation to the impact of the programme on the children’s coping skills, few significant changes emerged from the Schoolagers’ Coping Strategy Inventory apart from the finding that the children in the intervention group were more likely to rate stress-coping strategies such as trying to relax and stay calm as being more effective following completion of the programme. The results from the Draw and Write Activity indicate that there was an increase in the use of problem focused coping strategies among the intervention group and that the coping strategies used were aimed at directly addressing the problem. There was no significant change in the type of coping strategies used by the control group at post-intervention. Results from the participatory workshops also indicate that the children who completed the Zippy’s Friends programme expressed a wider repertoire of coping strategies when compared with the control group.
- **Children’s emotional and behavioural functioning:** The results from the *Strengths and Difficulties Questionnaire* show that both the intervention and control groups’ total difficulties scores decreased over time, however, no significant programme effect was found. Examination of the subscale scores did reveal that post-intervention there was a significant decrease in the hyperactivity levels of the children in the intervention group when compared with the control group.
- **Effects on the teachers and their relationships with the children:** Following completion of the programme the teachers reported that the programme had a positive effect on themselves in terms of raising their awareness about the children’s emotional wellbeing, providing them with strategies to help the children deal with difficult situations, and enhancing their relationship with the children.
- **Effects on the school and the wider community:** The majority of the teachers indicated that there was a lack of ‘whole school’ awareness about the programme and as a result, the broader effects of the programme throughout the school were not found. Several teachers commented on the need for whole school training, i.e. the training of all staff, so that the strategies that are used

in Zippy's Friends could be reinforced with all children in classrooms through cross-curricular activities and also in the schoolyard. Teachers also recognised the need for greater parental involvement in the programme so that what is taught in class could be reinforced in the home environment and in the local community setting.

Key Findings on Programme Implementation

- **Programme Fidelity:** The process evaluation findings indicate that the programme was implemented with a high degree of programme fidelity and that little or no adaptation was actually required. Both Intervention Type I (full implementation) and Intervention Type II teachers (partial implementation) fully implemented over 86% of the programme. The teachers' ratings of their enthusiasm for the programme, its content appropriateness, the pupils' enjoyment and understanding of the sessions, and achievement of aims, were consistently positive and highlight the level of teacher satisfaction with the programme. The structured user-friendly nature of the Zippy's Friends programme, the suitability of the content for the children, and the variety of engaging activities that were used throughout the programme, were all cited as reasons why the teachers enjoyed implementing the programme and did so with a high degree of programme adherence. Evidence of high quality programme implementation was also apparent in the teachers' and children's comments about the factors that facilitated programme implementation. The majority of teachers commented on the importance of the children sitting in a circle. Teachers also emphasised the importance of teacher preparation before implementing the lessons and the need to implement the programme consistently every week. In addition, several teachers spoke about integrating the strategies taught in Zippy's Friends in other areas of teaching and also about sharing their personal experiences with the children during the lessons. The level of teacher preparation and use of personal resources to enhance the lessons indicate the teachers' commitment to high quality programme delivery.
- **Feedback from Teachers on Programme Implementation:** The teachers made a number of recommendations to improve the implementation of Zippy's Friends. One of the most frequently reported recommendations was the need for a whole school approach. The majority of teachers commented on the need for all teachers in a school to receive training in the programme and the need for an additional Zippy's Friends programme for the senior cycle of primary schools. Most of the teachers recognised the need for parents to be informed about the strategies being taught in Zippy's Friends and also the need for some type of home exercise book, that both parent and child completed, which would reinforce what was being taught each week.
- **Factors Influencing Implementation:** The most frequently reported barrier to implementing the Zippy's Friends programme was lack of time. Teachers referred to the problem of finding the time to implement the lesson during the day when all the children were present. Several teachers also spoke about the issue of curriculum overload in teaching. The overall busyness of the classroom has implications for teaching a programme such as Zippy's Friends in terms of getting commitment from all teachers, finding the space, time and resources to support its implementation within an already over stretched timetable. Teachers suggested that the strategies used in Zippy's Friends (e.g. effective communication skills, listening skills, problem solving skills and coping skills) could be taught as part of the overall classroom ethos. Therefore, it is recommended

that a mental health promoting ethos that would support cross-curricular social and emotional learning would be adopted in the classes and also throughout the school so that strategies taught in a programme such as Zippy's Friends would be reinforced throughout the curriculum and school day and not just during the 'Zippy class'. A number of teachers also recommended that the programme should be implemented over one academic year, as opposed to being split over two academic years as in the present study, in order that the children would receive all six modules.

- **The School Ethos:** Overall, the results from the Ethos Questionnaire indicate that both intervention and control schools provide a positive and supportive school environment for the children and that all teachers within the schools work towards providing for the children's needs. Teachers in both the intervention and control schools recognised the importance and value of teaching social and emotional learning in primary schools, particularly for children living in disadvantaged communities. While most teachers reported that parents are interested and supportive of the school and its governance, fewer teachers reported active involvement of a broad range of parents in school life. The results from the Ethos questionnaire clearly illustrate the need for greater collaboration between schools, parents and key stakeholders within the local community.
- **Impact on the Teaching of SPHE:** The results from the SPHE questionnaire show clearly that the teachers who taught the Zippy's Friends programme reported implementing more of the SPHE curriculum than the teachers in the control group. In relation to certain SPHE strand units such as: 'Relating to Others', 'Self' Identity', 'Myself and my Family', there were significant differences in level of implementation between intervention and control groups. These results indicate that the intervention teachers implemented substantially more of the SPHE curriculum than the control group. At the end of programme review sessions some teachers suggested that the Zippy's Friends provided them with a framework and a structure within which to teach parts of the SPHE curriculum.

Conclusions

- The findings from this pilot implementation of the Zippy's Friends programme indicate that the programme was successfully implemented in DEIS primary schools in Ireland and led to a number of significant positive effects for the pupils and teachers. Consistent with the findings from previous studies the programme significantly improved the emotional literacy and coping skills of the children, reduced their hyperactivity levels and lead to improved relationships in the classroom. The programme complements the teaching of the existing SPHE curriculum and leads to a greater awareness among teachers of the importance of social and emotional learning in the curriculum. The planned twelve month follow-up of the programme effects, including the assessment of the programme impact on the children's academic performance, will clearly strengthen the conclusions that can be drawn regarding the longer term impact of this programme. However, at this stage, it is clear that the encouraging evaluation results support the broader roll out and sustainability of the programme within the primary school setting.
- Results from the process evaluation revealed that the programme was well received by both children and teachers and was implemented with a high degree of programme fidelity. The teachers

commented on the activity-based learning which took place throughout the programme and the manner in which the children were able to draw upon their own experiences and identify with the key themes of the programme. It is evident from this study that this type of structured ‘child-centered, activity-based’ learning is an important factor in the success of a programme and is a necessary ingredient for the sustainability of emotional wellbeing programmes in schools. The call from the teachers for another Zippy’s Friends programme at the senior end of primary school suggests the need to adapt the methodologies and strategies that have been used and proven to be effective in Zippy’s Friends and apply them to the senior classes in primary schools. The Zippy’s Friends programme is recognised by the teachers in this study as being a valuable resource in the delivery of the SPHE curriculum. The recognition by teachers of the need for parental involvement and whole school training in the programme further supports the need for a more holistic approach to implementing social and emotional learning in primary schools.

- Supportive organisational and system-level policies and practices are needed in order to ensure the sustainable integration of the programme as a resource for enhancing the school curriculum. Scaling up the programme at a national level will require the support and collaboration of the national education and health agencies in the coordination of teacher training, ongoing support and quality assurance to ensure effective implementation at the local level.
- The positive evaluation findings clearly indicate the benefits of the Zippy’s Friends programme for the children and teachers in DEIS schools who participated in this study. These findings are in keeping with a broader base of international evidence on the benefits of emotional wellbeing programmes for children’s emotional and social functioning and improved academic performance. Schools have an important function in nurturing children’s social and emotional development as well as their academic and cognitive development. The integration of social and emotional learning into the school curriculum supports schools in achieving their educational mission. The increasing recognition that enhancing children’s social and emotional competencies also improves their ability to learn and achieve academically supports the value of programmes such as Zippy’s Friends and their incorporation into the school setting.



INTRODUCTION

This report presents the evaluation findings on the implementation of the Zippy's Friends emotional wellbeing programme in Irish primary schools. This is a programme that promotes the mental health and emotional wellbeing of young children aged five to eight years old. In February 2008, the Zippy's Friends programme was introduced into Irish primary schools on a pilot basis as part of the Social Personal and Health Education (SPHE) curriculum. With the support of the Department of Education and Science and the Health Service Executive, the programme was piloted in 30 designated disadvantaged schools (DEIS) in the West of Ireland. The 24 week programme was implemented over two academic years, 12 lessons were implemented between February and June 2008 and the remaining 12 sessions were implemented between October 2008 and March 2009. An evaluation of the pilot implementation of the programme was undertaken by the Health Promotion Research Centre at NUI Galway. The evaluation aims to:

- determine if an international evidence-based programme could be adapted and successfully implemented in the local context of disadvantaged primary schools in Ireland
- assess the impact on the pupils' emotional and behavioural wellbeing and coping skills
- examine the process of implementation and the relationship between this process and the programme outcomes.

Background

The Zippy's Friends programme is an emotional wellbeing school-based programme that is designed to help all children, not just those who have difficulties or who are considered to be at risk. The programme is designed to promote the mental health and emotional wellbeing of all young children by increasing their repertoire of coping skills and by stimulating varied and flexible ways of coping with problems of day-to-day life (Bale and Mishara, 2004). Zippy's Friends was initially developed by *Befrienders International*, a non-profit organisation involved primarily in suicide prevention. A revised programme was devised as a result of pilot testing of the original programme in Denmark (1998-1999). The programme is now distributed by the non-profit organisation *Partnership for Children*. Over 300,000 children in 16 countries worldwide have participated in the programme to date.

The programme is based around a set of six illustrated stories about a group of children, their families, friends and imaginary stick insect Zippy. The stories describe the issues which young children typically experience: feeling lonely, angry, jealous, friendship difficulties, bullying, dealing with change and loss. The 24 sessions are divided into six modules, each focusing on a particular theme:

- Feelings:** feeling happy, sad, angry, jealous, afraid, nervous and disappointed.
- Communication:** effective and ineffective communication, speaking about feelings, improving listening skills, learning to ask for help.

- iii. **Making and Breaking Relationships:** improving children's ability to make and keep friends, to cope with rejection and loneliness, to resolve conflicts with friends.
- iv. **Conflict Resolution:** characteristics of a good solution, dealing with situations involving bullying, resolving conflicts when angry, helping others.
- v. **Dealing with Change and Loss:** speaking about death, losses and change, coping with death and loss, understanding positive effects of change and loss
- vi. **General Coping Skills:** using different coping strategies, helping others, applying coping skills to new situations.

Each session has been designed to last approximately 45-50 minutes, each module contains four sessions. The sessions are conducted each week by the class teacher and throughout the sessions the children are actively engaged in a variety of child-centered activities, e.g. drawing, listening to stories, asking questions, brainstorming, participating in role-plays, making puppets. Each session begins with a review of what the children learned the previous week and the teacher reading part of the story. The sessions conclude with a child-friendly evaluation of the lesson.

Several characteristics of the programme are aimed at ensuring that the content is integrated into children's daily lives. Repetition is used throughout the programme to reinforce the learning of key elements. The Zippy's rules are repeated at the start of every lesson. The teachers are encouraged to create a Zippy corner in the room so that the children's drawing and the rules the children learn in relation to each module are displayed on the classroom walls. Practical exercises that are an integral part of the programme encourage the children to practise using the skills they have learned.

The underlying hypothesis in developing Zippy's Friends is that if children learn at a young age to expand their repertoire of coping abilities, they will be less likely to develop serious problems in childhood, adolescence and even adult life when they are confronted with the inevitable occurrence of stressful situations (Mishara & Ystgaard, 2006). Numerous studies have indicated that having a repertoire of coping skills at a young age can 'buffer' or moderate the effects of negative life stress on the development of psychological maladjustment (Dubow & Tisak, 1989; Spivack et al, 1976). The programme is based upon Lazarus and Folkman's (1984) theoretical framework of coping. Lazarus and Folkman distinguish between two types of coping strategies – problem focused strategies and emotion focused strategies. Problem focused strategies refer to efforts aimed at changing the situation. This is accomplished by altering either the environment, changing external pressures, or finding resources so that the distressing situation is made less threatening. Emotion focused strategies refer to efforts to manage or regulate the negative emotions evoked by the stressful situation. Emotion focused strategies include cognitive distraction, seeking emotional support, emotional regulation, emotional expression, cognitive restructuring, positive self-statements, thought stopping or selective attention (Lazarus & Folkman, 1984). The underlying objective throughout the Zippy's Friends programme is to provide effective training in coping skills by expanding children's repertoire of coping skills and their abilities to adapt their coping patterns to different situations. Great importance is attached to the interpersonal mutual aspects of coping, or seeking and giving social support. Furthermore, Zippy's Friends aims to give the children better skills in communication, conflict resolution, self-assertion, co-operation, self-control and empathy. This is in line with previous research that has found that programmes focusing on a single phenomenon have proved less effective than those that integrate training of various competences (Weissberg & Elias, 1993).

Promoting Mental Health and Emotional Wellbeing in Schools

Schools have become one of the most important and effective agencies for promoting the social and emotional wellbeing of young people (WHO, 2001; Lister-Sharpe et al., 1999; Weare, 2000; Stewart-Brown, 2006). The school setting provides an opportunity to reach many young people during their formative years of cognitive, emotional and social development. In addition, schools are the principal setting in which formal education takes place and for most young people school is central to their social lives (Patton et al., 2003). World-wide, there is increasing interest in school based programmes on social and emotional learning. Weist and Rowling (2002) cite several reasons for this expanding interest: (i) the growing awareness of the gap between young people who need and young people who receive mental health care (ii) the growing knowledge base of the advantages and impact of school-based prevention and intervention programmes (iii) expanding advocacy emphasising the development of emotional wellbeing programmes in natural settings such as schools and (iv) the link between social and emotional wellbeing and educational outcomes.

There is substantial evidence indicating that school-based emotional wellbeing programmes, when implemented effectively, have a positive effect on children's behavioural and emotional functioning (Durlak & Wells, 1997; Greenberg et al., 2001; Wilson et al., 2003; Browne et al., 2004; Adi et al., 2007). There is also growing recognition that enhancing children's social and emotional skills facilitates their ability to learn and achieve academically (Payton et al., 2008, Adelman & Taylor, 2000; Greenberg et al., 2003; Zins et al., 2004). In a systematic review of reviews on interventions that promote mental health and prevent mental problems in children and young people, Tennant and colleagues (2007) found that interventions aimed at mental health promotion were more effective than those targeting mental health problems and lifestyle factors such as substance misuse. An overview of the evidence from systematic reviews of school mental health promotion programmes indicate that comprehensive programmes that target multiple health outcomes in the context of a co-ordinated whole school approach are the most consistently effective strategy (Barry et al., 2009; Jané-Llopis et al., 2005).

School-based mental health promotion programmes have been implemented using different approaches. These may be divided into three groupings:

- i. Universal Programmes - programmes aim to improve the mental health of the whole population of children
- ii. Targeted Programmes - programmes aim to improve the mental health of children at increased risk of mental health problems
- iii. Indicated Programmes - programmes aimed at children who are already manifesting signs of mental health problems.

Universal approaches to school-based mental health promotion include a range of different types of interventions:

- i. Class-based/curriculum based skills training are designed to teach life skills and generic competencies that promote adjustment and resilience through delivering a specific curriculum in the classroom.

- ii. Whole school approach attempts to shape the whole school context, including the school's ethos, organisation, management structures, relationships and physical environment as well as the taught curriculum and pedagogic practice (Weare & Markham, 2005). This approach aims to include all relevant stakeholders including pupils, teachers, school administration, parents and community members in fostering a positive school environment, ethos and sense of connectedness for pupils and staff (Barry & Jenkins, 2007).

Evidence for School-based Programmes

A substantial evidence base has accumulated documenting the ability of universal interventions to improve school-aged children's social, emotional, behavioural and cognitive skills (Domitrovich et al., 2007). Research on early childhood development has emphasised the critical importance of young children's development of social and emotional competence and coping skills in laying the foundation for successful adjustment later in life (Lynch et al., 2004). Interestingly, the majority of emotional wellbeing programmes aimed at enhancing resilience, competence and cognitive development are targeted at adolescents and older children, with few formal, well evaluated programmes available for pre-school and the early years in primary school (Kay-Lambkin et al., 2007; Lynch et al., 2004). Most programmes for younger children are aimed at preventing specific problem behaviours or are intended for specific high risk group of children who already have particular problems (Mishara & Bale, 2004).

A review of mental health promotion programmes for school age children concluded that young children, either pre-school age or in early grades, benefit more than older children (Browne et al., 2004). Similarly, a meta-analysis of 14 early childhood programmes revealed that education focused on improving the child's awareness and expression of feelings and causes of behaviours, along with training in problem solving skills, was most successful for children aged 2-7 years (Durlak & Wells, 1997). In addition, evidence suggests that without intervention, emotional and behavioural problems in young people may be less amenable to intervention after eight years of age (Eron, 1990), resulting in an escalation of academic problems, antisocial behaviour and eventual school drop out in later years (Snyder, 2001; Tremblay et al., 1996). Given this evidence, it makes sense to pay more deliberate attention to the preschool and early school years and to take a long term developmental approach. Further evidence from developmental research supports this argument, it shows that early experiences and relationships at home and school set the stage for how a child learns self regulation skills, as well as the ability to manage emotions, take the perspective of others and develop close relationships (National Research Council and Institutes of Medicine, 2000).

Evaluation of Zippy's Friends Programme to Date

Zippy's Friends is currently running in schools and kindergartens in 16 countries and more than 300,000 children have enrolled in the programme worldwide. To date, the programme has been evaluated in Denmark, Lithuania and Southampton, testing the programme in different countries, school settings and grade levels. In addition, a longitudinal study is currently being carried out in Norway. An evaluative study in Denmark and Lithuania was carried out in 2000 (Mishara & Ystgaard, 2006). A total of 322 participating children in 17 first grade classes were compared to 110 control children in six classes in Denmark and 314 Lithuanian kindergarten children age six-seven in 16

classes were compared to 104 control children in six classes. The teachers completed the *Social Skills Questionnaire*, a coping skills observation form and a weekly questionnaire detailing pupil attendance, pupils' enjoyment of the lesson and overall usefulness of the session. The pupils completed the *Social Skills Questionnaire* and the *Schoolagers' Coping Strategy Inventory*. The results from this study found that the intervention children used significantly more coping strategies and improved in the social skills of cooperation, empathy, assertion and self-control. In Lithuania, where additional observations of behaviour problems were undertaken, a significant decrease in the problem behaviour scales of 'externalising problems' and 'hyperactivity' was also noted.

A second evaluation explored the effects of participation in Zippy's Friends during kindergarten (Monkeviciene et al., 2006). The intervention group consisted of 140 children in the first year of primary school who had participated in the programme in Lithuania the preceding year in kindergarten (children's age ranged from 7 to 9 years old). The teachers and parents completed the *Behavioral and Emotional Adaptation to the Transition Questionnaire*, the *Problems Encountered Questionnaire* and the teachers completed an additional questionnaire the *Reactions Observed in the New School Environment*. Results showed that, compared to a control group of 106 children, participation in the programme related to better behavioural and emotional adaptation to the transition from kindergarten to first grade. The intervention group had more positive reactions to the new school environment and used more appropriate and more diversified coping strategies when compared with the control group.

In Southampton, an evaluation of the programme was carried out over two years. During year one, four intervention classes in three schools and three control classes in one school took part in the study. The three control schools were enrolled in the study for year two (34 children) and there were 23 pupils in the control group. Results from the two year evaluation in Southampton showed improvements in the intervention group's emotional literacy skills and hyperactivity levels in year two. Both teachers and children rated the programme positively (Holmes and Faupel, 2004, 2005).

One of the limitations of the three evaluation studies conducted to date is that they provide little information about the process of implementation in terms of programme fidelity, quality of implementation and factors that affected programme implementation. There is increasing knowledge of the factors that can influence implementation quality in school settings (Durlak, 1998; Domitrovich & Greenberg, 2000; Dariotis et al., 2008). Research suggests that implementation represents a complex interaction between characteristics of the implementation system, characteristics of the implementer and various aspects of the setting and organisational context in which the programme is implemented (Chen, 1998; Greenberg et al., 2006). Chen suggests that programmes operate within an 'implementation system' that can provide support or present barriers to the delivery of a programme. To date, however, the systematic study of programme implementation has been relatively neglected. It is argued that understanding why an intervention fosters change, with whom and under what circumstances it fosters this change (effectiveness) is as important as knowing whether a desired change took place (efficacy), particularly when broader implementation of an initiative is planned (WHO, 1998). Greenberg and colleagues (2006) state "*effectiveness trials are critical in helping to understand how high-quality programmes are likely to be implemented with real-world constraints and the factors in these settings that affect the quality of programme implementation*" (p4).

Zippy's Friends in Ireland

In 2007 the Health Service Executive (HSE) introduced the Zippy's Friends programme to the Department of Education and Science. A joint partnership was subsequently set up and it was planned to pilot the programme as part of the Social, Personal and Health Education (SPHE) curriculum with children in first class. SPHE is a compulsory part of the curriculum in all primary schools in Ireland. It focuses on the development of a broad range of skills relevant to children's health and wellbeing within a supportive whole school environment (NCCA, 1999). The curriculum is delineated at four levels: infant classes, first and second classes, third and fourth classes, and fifth and sixth classes. The curriculum is divided into three strands: Myself, Myself and others, and Myself and the wider world. Each of these strands is further subdivided into a number of strand units or topic areas. The time allocated for SPHE in accordance with the primary school curriculum recommendations is 30 minutes per week.

The content of Zippy's Friends encompasses objectives from several of the curriculum's strand units:

Strand: Myself	Strand Unit:	Personal identity Developing self confidence Making decisions Growing and changing
Strand: Myself and Others	Strand Unit:	Myself and my family My friends and other people Relating to others

Zippy's Friends also reflects the principles of learning in the Irish curriculum as outlined by National Council for Curriculum Assessment (NCCA, 1999). These principles include:

- The child as an active agent in his or her learning
- The child's knowledge and experience as a base for learning
- Environment based learning
- Learning through guided activity and discovery
- The transfer of learning – application of learning to real life
- Higher-order thinking and problem solving
- Collaborative learning

Activity based learning is a central part of the SPHE curriculum. The NCCA recommends that a wide variety of active learning strategies should be used in implementing SPHE. It also states that children should be (i) encouraged to critically reflect on their work and explore possibilities for transferring what they have learned to situations in their own lives and (ii) given opportunities to interact with others and with their environment and to learn to cooperate with their peers.

The implementation of Zippy's Friends programme is further supported by key recommendations from two policy documents aimed at mental health and suicide prevention. *A Vision for Change: Report of the Expert Group in Mental Health Policy* (Department of Health and Children, 2006) identifies the need for the mental health promotion among school aged children (5-12 years). Four

key issues in relation to the promotion of positive mental health are highlighted: (i) promoting positive mental health and wellbeing (ii) raising awareness of the importance of mental health (iii) enhancing the capacity of mental health service providers and the general community to promote positive mental health and (iv) suicide prevention. *Reach Out: The National Strategy for Action on Suicide Prevention: 2005-2014* (Health Service Executive and Department of Health and Children, 2005) also recommends that the promotion of positive mental health should become an integral part of the primary and secondary schools curriculum.

In December 2007 a two day training workshop was carried out by *Partnership for Children* for the HSE staff to support the training of teachers in the intervention group. A National Advisory Group was subsequently set up. The National Advisory Group consisted of members from the Department of Education and Science, Health Promotion, HSE; National Educational Psychological Service Agency, Irish National Teachers Organisation, Primary Professional Development Service, National Office for Suicide Prevention and the research team from the Health Promotion Research Centre, National University of Ireland Galway.

The Zippy's Friends programme was piloted in designated disadvantaged schools in the HSE West (*DEIS schools: Delivering Equality of Opportunity in Schools: an action plan for social inclusion*). Schools are granted disadvantage status by the Department of Education and Science on the basis of socio-economic and educational indicators such as unemployment levels, housing, medical card holders and information on the basic literacy and numeracy. A total of 311 primary schools in Ireland have been designated as 'disadvantaged'. These schools receive a greater level of support in terms of pupil-teacher ratios, special grants and extra support for pupils. Economically disadvantaged children are especially at risk for the development of mental health problems because of the greater number of negative or undesirable life events and adverse conditions (risks factors) to which they are exposed (Keenan et al., 1997; Lavigne et al., 1998; McLeod & Shanahan, 1996; McLoyd, 1998). This over abundance of negative life events can place demands on them that exceed their coping resources (Sterling et al., 1985). Freyers and colleagues (2005) reviewed the evidence from nine-large scale population-based studies carried out over the last 20 years and conclude that common mental disorders are significantly more frequent in socially disadvantaged populations. These findings highlight the need to prioritise work with disadvantaged populations and to start as early as possible.

Following the decision to implement the Zippy's Friends programme with children in first class in designated disadvantaged schools in the HSE West region, including Donegal, Sligo, Letrim and Galway, schools were randomly assigned to intervention and control groups. The intervention teachers participated in a two-day training workshop. This workshop explained the goals of the Zippy's Friends programme, the theoretical background to the programme, the components of the programme and the structure of each session. The teachers also took part in a variety of role play situations taken directly from the programme.

Objectives of the Evaluation Study

An evaluation of the pilot implementation of the programme was undertaken by the Health Promotion Research Centre at NUI Galway. The specific objectives of the evaluation are to:

- establish the feasibility of adapting an international emotional wellbeing programme to the disadvantaged primary school setting in Ireland
- determine if the programme has significant effects on the children who participated, when compared with children in a control group
- investigate whether the programme effects are greater than those of a standard health education programme
- examine the process of implementation and explore the reality of implementing an emotional wellbeing programme in disadvantaged schools
- understand the organisational context within which the programme is being implemented in the schools and the effect of this on programme implementation and outcomes
- explore the effects of different levels of teacher fidelity on the process of programme delivery and on the outcomes
- determine the degree to which the Social Personal and Health Education curriculum was implemented across the intervention and control groups
- ascertain the attitudes of pupils towards the programme
- explore the attitudes of the teachers regarding the effect of the programme on the pupils, themselves and the wider school environment
- examine the attitudes of teachers towards the content and structure of the programme
- explore the usefulness of the draw-and-write technique as an evaluation tool with children.

METHODS



Study Design

This study employs a randomised controlled design, with assessments before (T1), during (T2 & T3), immediately after (T4) and 12 months post-implementation (T5). The 24 week programme was implemented over two academic years, 12 lessons were implemented between February and June '08 and the remaining 12 lessons were implemented between October '08 and March '09. The children were in the second half of first class when the programme began. Baseline assessments took place one week before programme implementation. When the teachers completed the first half of the programme, interim assessments took place (T2). Before the teachers started the second half of the programme (October '08), a second set of interim assessments were collected (T3). End of programme evaluation (T4) took place between March and June '09. A twelve month follow up (T5) will take place between March and June '10. Use of a randomised controlled design in this study strengthens the internal and external validity of the results produced, thus generating valid scientific evidence.

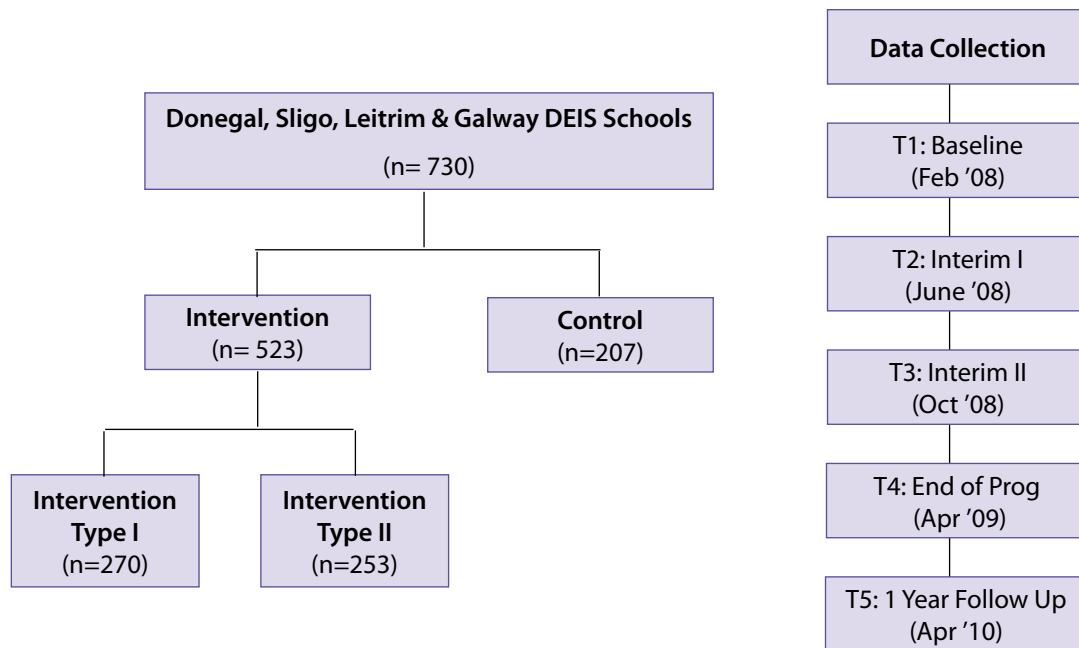
Sample

A total of 730 pupils and 42 teachers from 42 DEIS (designated disadvantaged) schools in Donegal, Sligo, Leitrim and Galway were randomly assigned to control and intervention groups. To qualify for selection, the schools had to be assigned the designated disadvantaged status by the Department of Education and Science. The classes had to contain ten or more children in first class, i.e. multi-grade classes with nine or less children in first classes were excluded from the study. A list of all schools that fulfilled the criteria was made and the schools were contacted by the Health Promotion Officers in each county to determine if they were willing to take part in the study. In total 27 schools (28 classes) in Donegal, nine schools in Sligo and five schools (11 classes) in Galway agreed to participate. The schools that agreed to participate in the study were then randomly assigned to the control and intervention groups.

Of the 730 pupils, 523 pupils from 34 classes were randomly assigned to the intervention group and 207 pupils from 16 classes were randomly assigned to the control group. The intervention group was further divided into two separate intervention groups; Intervention Type I (N=270) and Intervention Type II (N=253). The teachers in Intervention Type I were asked to implement the programme as faithfully as possible. The teachers in Intervention Type II were requested to use the programme as a resource and they could, therefore, decide which parts of the programme they would implement. This option was requested by the Department of Education and Science in order to determine the effectiveness of the programme when used as a resource in comparison to full implementation of the

programme. The control schools received the standard SPHE class (30 min per week). An overview of the study sample and data collection points is presented in Figure 1 below.

Figure 1: Study Sample and Data Collection



The schools ranged in size from small rural three teacher schools to large urban schools with 41 teaching staff. All schools were mixed gender schools. Table 1 indicates the number of schools, classes, teachers and children assigned to the Intervention and Control group.

Table 1: Number of schools, classes, teachers and children in intervention and control groups

	Intervention Group I	Intervention Group II	Control Group	Total
No of Schools	15	15	15	45
No of Classes	18	16	15	49
No of teachers	18	16	15	49
Children	270	253	207	730

Participants

The mean age of the children at the baseline (March '08) was 7 years and 3 months (Mean = 87.2 months, SD=5.6, Min = 7 years, Max = 9 years 10 months). The number and mean age of the children (in years and months) are shown in Table 2.

Table 2: Number and mean age of children in intervention and control groups

	Intervention Group I		Intervention Group II		Control Group		Total	
	N	Mean age	N	Mean age	N	Mean age	N	Mean age
Male	135	7.03	134	7.03	113	7.03	382	7.3
Female	135	7.02	119	7.01	94	7.04	348	7.3
Total	270	7.03	253	7.02	207	7.03	730	7.03

Table 3 illustrates the number of teachers that were in Intervention Type I, II and the control group. In total, 49 first class teachers were involved in the first half of the evaluation between February and March '08 (35 intervention teachers and 14 control teachers). For the second half of the evaluation (October – April '09) some of the classes were merged when the children moved into second class, thus 45 second class teachers were involved in the second half of the evaluation (31 intervention teachers and 14 control teachers). Also, because the programme was taught over two academic years some of the intervention teachers did not continue with their class group into second class. As a result 17 second class teachers were trained in September 2009.

Table 3: Number of teachers in intervention and control groups

	Intervention Type I		Intervention Type II		Control Group		Total
1 st half of programme (Jan-June '08)	18		17		14		49
2 nd half of programme (Sept – April '09)	16	(8 new teachers)	15	(9 new teachers)	14	(10 new teachers)	45

Measures

The evaluation consists of both process and outcome evaluation components, thereby seeking to determine the extent to which the programme was implemented as intended within the Irish school context and the impact of the programme on the children's emotional wellbeing. The programme is evaluated by the teachers and children using a range of quantitative and qualitative measures in a triangulation of methods to ensure the validity of evaluation research (Nutbeam, 1998; Philips et al., 1994).

(1) Measures used to examine the impact of the programme

The impact of the programme on the children's coping skills, and their emotional and behavioural wellbeing was measured using child self-report measures and standardised questionnaires completed by the class teacher.

Children's Emotional Literacy

- **Emotional Literacy Checklist (Faupel, 2003)**

The teachers completed the *Emotional Literacy Checklist* pre-intervention, before starting the second half of the programme and post-intervention. This narrow-band questionnaire measures five dimensions of emotional literacy (i) self-awareness, (ii) self-regulation, (iii) motivation (iv) empathy and (v) social skills. All 20 items on the checklist are rated from 1 to 4 (1 being not at all true, 4 being very true). An overall total emotional literacy score is obtained by summing the scores for each item. A higher score indicates better emotional literacy. The *Emotional Literacy Checklist* has good internal consistency with a Cronbach's Alpha coefficient reported of 0.94 (Faupel, 2003). In the current study the Cronbach's Alpha coefficient was 0.91.

Children’s Emotional and Behavioural Wellbeing

- **Strengths and Difficulties Questionnaire (Goodman, 1997)**

The Strengths and Difficulties Questionnaire is a brief standardised questionnaire that measures children’s (age 4-16 years) emotional and behavioural wellbeing. It is made up of 25 items which can be broken into five scales: (i) Emotional Symptoms (ii) Conduct Problems (iii) Hyperactivity / Inattention (iv) Peer Relationship Problems and (v) Prosocial Behaviour. All 25 items are scored between 0 and 2. The questionnaire generates two main scores (i) Total Difficulties Score: sum of all the scales except the prosocial scale and (ii) Prosocial Score: this scores refers to the children’s positive social behaviour. According to Goodman (2001), the *Strengths and Difficulties Questionnaire* has good internal consistency with a Cronbach’s Alpha coefficient of .73. The Cronbach’s Alpha coefficient in this study was .76. Table 4 indicates the bands which children can be classified into depending on their score.

Table 4: Strengths and Difficulties Questionnaire classification and scores

	‘Normal’	‘Borderline’	‘Abnormal’
Total Difficulties Score	0-11	12-15	16-40
Emotional Symptoms Score	0-4	5	6-10
Conduct Problems Score	0-2	3	4-10
Hyperactivity Score	0-5	6	7-10
Peer Problems Score	0-3	4	5-10
Prosocial Score	6-10	5	0-4

In contrast to previous evaluations of the Zippy’s Friends programme and other emotional wellbeing programmes, this study attempts to access the children’s conceptualisations of their own emotional wellbeing and coping skills using child centered participatory methods. Recent research has shown that there is a lack of focus on children’s own unique perspectives and this denies them the opportunity to share their thoughts and feelings (Ireland & Holloway, 1996). The children’s self-report evaluations will be used in combination with teacher pre- and post-evaluation measures. The rationale behind using multiple quantitative and qualitative methods is that quantitative data cannot by itself provide all the information and insight required to appreciate children’s experiences. Additionally, the use of multiple methods offers complimentary insights and understandings that may be difficult to access through reliance on a single method of data collection.

Children’s Coping Skills

- **Schoolagers’ Coping Strategy Inventory (Ryan-Wenger, 1990)**

The children completed the 26 item self-report *Schoolagers’ Coping Strategies Inventory* at pre- and post-intervention. Children indicate how frequently they use each coping strategy (frequency scale) and how much the same coping strategies help them to feel better (effectiveness scale) on a scale of 0-3. Scores can range from 0 to 73. The total number of coping strategies the children use, regardless of frequency, can be calculated by subtracting the number of items with a response of 0 from 26 (total number of coping strategies). Scores can range from 0 to 26. Range of reliability correlations in several studies have been: test-retest, 0.73-0.82; internal consistency, 0.70-0.89 (Ryan-Wenger, 1997).

- **Draw and Write Technique (Williams et al., 1989)**

The Draw and Write Technique is a popular method of collecting data from young children. This technique involves the children drawing a picture in response to a theme or topic and writing down associated ideas. A sub-sample of children from 11 classes (Intervention Type I: N=76; Intervention Type II: N=74; Control: N=68) was randomly chosen from the intervention group and control groups to take part in the Draw and Write Activity pre- and post-intervention. The purpose of this activity is to examine the coping strategies that the children would use when feeling sad or upset about a particular situation. Using a story about a girl who was upset because her friend had taken her colouring pencils as a stimulus, the children were asked to draw and write about a time when they felt sad or upset about something. Following this the children were asked to draw and write about what they could do to make themselves feel better (coping strategy). The draw and write analysis involves a comparison between the control and intervention groups' responses and any changes between the groups' responses over time.

- **Children's Participatory Workshops, Interim and Post-Intervention**

While numerous theoretical models of health promotion advocate the use of participatory methods, the use of participatory approaches in evaluation appear to be much less common (Douglas, 2000; Kalnins et al., 1992). A 'bottom up' approach using participatory and interactive methods of evaluation was employed in this study to enhance participation and to elicit comprehensive, valid and reliable responses from the children involved. Eleven schools (four schools from Intervention Type I, four schools from Intervention Type II and three control schools) were randomly chosen to take part in interim and end of programme participatory workshops. The workshops provided an opportunity to examine the ability of the children in the intervention and control groups to identify feelings in relation to everyday life situations (Feelings Activity) and to identify feelings and coping strategies in relation to three problem situations that children their age might experience (Problem Solving Vignettes Activity).

Qualitative child centered techniques adapted from previous studies by Douglas, 2000; Byrne et al., 2004; and Clarke, Canavan and Barry, 2008 were used to engage the children in the workshop activities. During the activities the children and facilitator sat in a circle and the children shared their ideas with the group using a talking object. For the Feeling Activity the researcher read one sentence about something that happened to a child and the intervention and control children were asked how the child might have felt. The children were invited to respond to six scenarios. For the Problem Solving Vignettes Activity, the children were asked about two problem situations that children in the vignettes experienced. A variety of energiser games were used as part of these activities to maintain the children's interest and attention throughout the workshop (See Appendix A for workshop outline). The children's responses during the recognition of feelings activity and the vignettes activity were recorded using a digital recorder.

(2) Measures to evaluate the implementation of the programme

The process of programme implementation was monitored and documented throughout the study in order to (i) ascertain the strengths and weaknesses of the programme (ii) determine how and why certain aspects of the programme worked better than others (iii) understand the interaction between characteristics of the implementation system, characteristics of the implementer and various aspects of the setting and organisational context in which the programme is implemented. The following measures were used to evaluate the process of implementation:

- **Teachers Weekly Reports on Programme Implementation**

The teachers in the intervention group completed a weekly questionnaire after implementing each session. These 24 weekly questionnaires were designed to elicit information about the implementation of each session from the teacher's perspective. Questions were concerned with (i) programme fidelity, i.e. what parts of each session were fully implemented, partially implemented or not implemented (ii) the positive aspects and the difficulties experienced by the teachers (iii) factors that influenced the implementation of the lesson (iv) the suitability of the content to the children (v) the extent to which the children enjoyed and benefited from the each lesson (vi) description of any changes that were made to the activities during the session and (vii) teachers' overall rating of the session.

- **Perceived Strengths and Weaknesses of the Programme - Children's Participatory Workshop, Interim and Post-Intervention**

The children's views about the programme were ascertained during the child participatory workshops. Child centered techniques were used to engage the children in the workshop activities. The class was divided into groups of two or three and the children brainstormed on poster paper (i) what the programme was about (ii) what they liked about the programme (iii) what they disliked about the programme and (iv) what kind of things Zippy's Friends had taught them. On completion of this activity the children's responses to "*What kind of things has Zippy's Friends taught you?*" were placed on the wall and the children were asked to identify the two most important things that Zippy's Friends taught them. Each child was given two 'post-its' and voted using the two post-its.

- **Perceived Strengths and Weaknesses of the Programme - Teachers' Review Questionnaire & Focus Group Interviews (Post-Intervention)**

On completion of the programme the teachers in the intervention group were asked to complete an end of programme review questionnaire. The purpose of this questionnaire was to obtain the teachers' opinions about: (i) their overall impression of the programme (ii) the perceived impact of the programme (iii) the children's experiences of the programme and (iv) recommended changes to the programme.

In order to fully understand the process of implementation and outcomes of the programme, a series of focus group review sessions took place with the intervention teachers on completion of the first half of the programme and again at post-intervention. This review session was designed to obtain information from the teachers regarding the following topics:

- i. their experience of implementing the programme
- ii. perceived effects of the programme on the children, themselves as teachers and the wider school community
- iii. the adequacy of programme training
- iv. Zippy's Friends in the context of SPHE
- v. recommendations to assist in implementation of the programme in an Irish setting.

The review sessions were carried out by the researcher in six different localities across Donegal, Sligo and Galway, in order to facilitate the teachers' attendance. Post-intervention, two review sessions took place in Donegal and 13 out of 19 Donegal teachers attended. Two review sessions took place in Sligo and all seven Sligo teachers attended. A further two sessions were carried out in Galway and three out

of the five Galway teachers attended. In total, 23 out of the 31 intervention teachers (74.2%) attended the post-intervention review session.

- **The School Context - Teachers' Social Personal and Health Education Questionnaire**

Before the teachers completed the second half of the programme, both intervention and control teachers were asked to complete an SPHE questionnaire. The purpose of this questionnaire was to determine the level of implementation of the SPHE curriculum across both intervention and control schools for the '08/'09 academic year. The questionnaire was also designed to determine the impact of the implementation of Zippy's Friends on the delivery of the standard SPHE curriculum, i.e. if there was a pattern of strand/strand units being 'left out' as a result of the implementation of the Zippy's Friends programme. Information regarding resources used to teach SPHE, perceived barriers to implementation of the curriculum and recommended changes to the curriculum was also collected

- **The School Context - Teachers' Ethos Questionnaire**

The class teachers in the intervention and control groups completed an Ethos Questionnaire. This questionnaire was designed to provide information about the environment and organisational context within which the intervention was being implemented in each school. The questionnaire was specifically concerned with (i) school policies (ii) the promotion of positive mental health throughout the school (iii) implementation of Social Personal and Health Education (SPHE) curriculum (iv) school ethos (v) support from community services (vi) parental involvement and (vii) barriers that exist in the promotion of positive mental health throughout the school. The Ethos Questionnaire was developed for use as part of the MindMatters programme (Commonwealth Department of Health and Aged Care, 2002) and was subsequently used as part of the evaluation of *MindOut*, a mental health promotion programme in secondary schools in Ireland (Byrne & Barry, 2003). The questionnaire was adapted for use in the Zippy's Friends evaluation and also includes questions from the Psycho-social Environment (PSE) Profile – a questionnaire designed by the World Health Organisation to help schools assess qualities of the school environment that support social and emotional well-being (WHO, 2003).

Procedure

During the teacher training the researcher met with all of the intervention teachers and explained the data collection procedure in terms of completing the (i) *Emotional Literacy Checklist* and *Strengths and Difficulties Questionnaire* for each child and (ii) teacher's weekly reports on programme implementation immediately after teaching each session. The procedure for the collection of data was as follows:

- Baseline data collection took place in January 2008.
- The intervention and control teachers received the *Emotional Literacy Checklists* and the *Strengths and Difficulties Questionnaires* in the post. The teachers were instructed to complete the questionnaires based on the children's behaviour over the past month.
- The researcher and Health Promotion Officers visited all of the intervention and control classes and carried out the *Schoolagers' Coping Strategy Inventory* with the children. A prepared script (See Appendix B) was used to inform the children about the questionnaire and to prepare them for completing the questionnaire. The script ensured that all children received the same instructions prior to completing the questionnaire.

- The researcher visited all of the schools that were randomly selected to take part in the Draw and Write activity. A prepared set of instructions (See Appendix C) was used to guide the children through the Draw and Write activity.
- In May 2008, the intervention and control teachers received the Ethos Questionnaire and were asked to complete this questionnaire as faithfully as possible (questionnaire available from the author on request).
- The first set of interim findings was collected in June 2008. The teachers in the intervention group only completed the *Emotional Literacy Checklist* and the *Strengths and Difficulties Questionnaire*.
- The children in a sample of intervention and control schools took part in the interim child participatory workshop. The researcher used structured activities (See Appendix A) to ascertain the children's views about the programme and to examine their emotional vocabulary and problem solving skills.
- The teachers took part in an interim focus group review session. Teachers were asked a set of questions in a semi-structured format.
- The second set of interim findings was collected in October 2008. The teachers in both the intervention and control groups completed the *Emotional Literacy Checklist* and the *Strengths and Difficulties Questionnaire*.
- The teachers in the control and intervention group completed the SPHE questionnaire in March 2009 (questionnaire available from the author on request). The teachers were asked to complete this questionnaire as faithfully as possible.
- End of programme data collection took place between April and June 2009. The intervention and control teachers received the *Emotional Literacy Checklist* and the *Strengths and Difficulties Questionnaire* in the post. The teachers were instructed to complete the questionnaires based on the children's behaviour over the past month.
- The researcher and Health Promotion Officers visited all of the intervention and control classes and carried out the *Schoolagers' Coping Strategy Inventory* with the children. The script that was used at the baseline was again used by the data collectors to ensure that all children received the same instructions prior to completing the questionnaire.
- The researcher visited all of the schools that were randomly selected to take part in the Draw and Write Activity. The instruction sheet was used again to guide the children through the Draw and Write activity.
- The researcher carried out the child participatory workshops with the sample of schools selected pre-implementation. The same structured activities were used to ascertain the children's views about the programme and to examine their emotional vocabulary and problem solving skills.
- The intervention teachers from each county were invited to attend a focus group review session in June 2009. During the review session the teachers completed an end of programme review questionnaire and took part in a semi-structured focus group review session.

Ethical Approval

Ethical approval was received from the National University of Ireland Galway Ethics Committee in December 2007 to undertake the evaluation of the Zippy's Friends programme. Prior to programme implementation, informed consent was obtained from the parents of the children in the intervention and control groups to allow their children to take part in the research process. Children in the

intervention group whose parents did not give consent received the programme and did not take part in the research (N=2).

Steps were taken to ensure that no teacher or child would be identifiable from the questionnaires. Each school was assigned a number. Each child was assigned the school number followed by their personal number. Consent to record the teachers' focus group review sessions and the children's participatory workshops were sought prior to recording. During the participatory workshops the children were given the option to 'pass' on a particular activity if they wished. The control schools were assured that they would receive the Zippy's Friends programme and training on completion of programme data collection.

Data Analysis

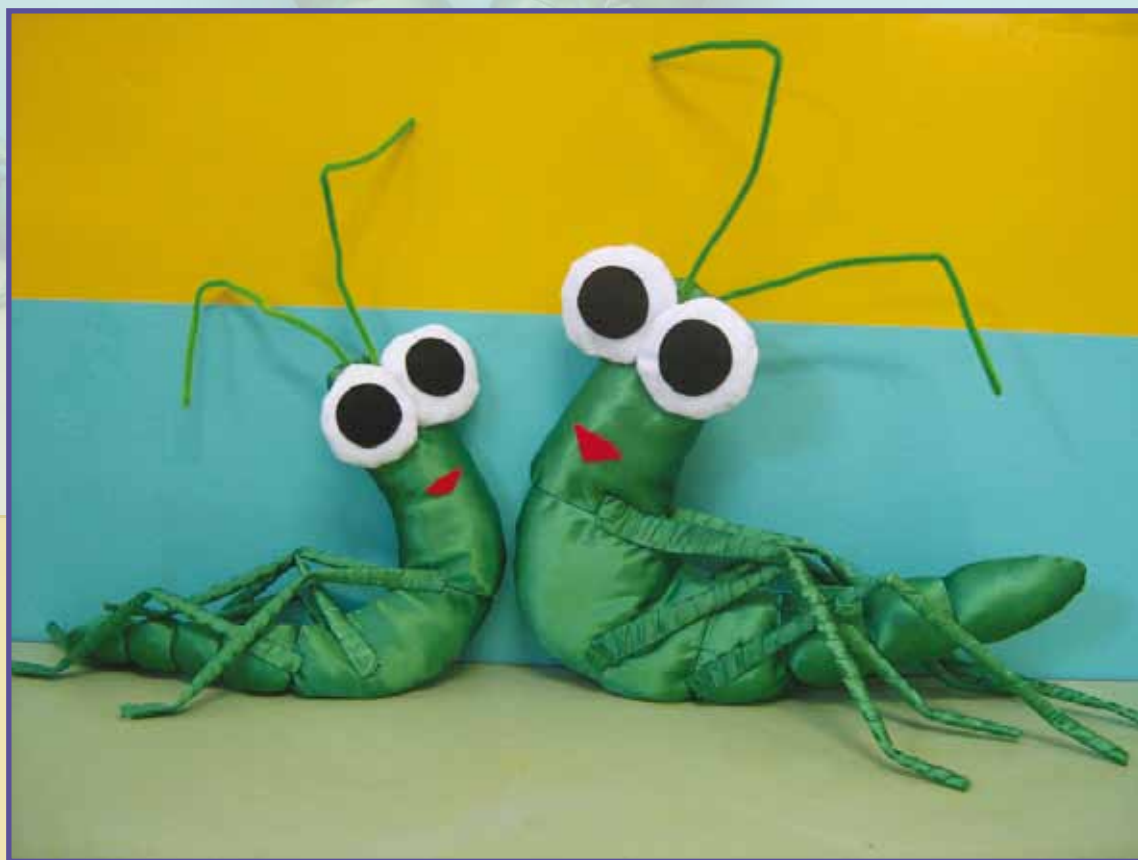
The results from the teacher's *Emotional Literacy Checklist*, the *Strengths and Difficulties Questionnaire* and the children's *Schoolagers' Coping Strategy Inventory* were analysed using SPSS 16. Repeated measures analysis of variance (ANOVA) was used to determine the time x group effect using baseline and end of programme scores. For the purpose of this analysis the two intervention groups were grouped together and their scores were compared with the control group's scores. Between-subjects factors were group (intervention vs. control) and the within subjects factor was time (pre-intervention vs. post-intervention). A significance level of 0.05 was used for all statistical tests.

In terms of the programme's effects, it was hypothesised that when compared with the control group, there would be a statistically significant (i) increase in the intervention group's emotional literacy skills as measured by the *Emotional Literacy Checklist* (ii) decrease in the intervention group's Total Difficulties score and an increase in their Prosocial Behaviour score as measured by the *Strengths and Difficulties Questionnaire* (iii) increase in the intervention group's use of effective coping skills as measured by the *Schoolagers' Coping Strategy Inventory*, the Draw and Write Technique and the Problem Solving Vignettes Activity during the Participatory Workshops.

Data from the Weekly Questionnaire, the Ethos Questionnaire, the SPHE Questionnaire and the Review Questionnaire were analysed using SPSS 16. Responses to closed questions were coded and inputted directly, while responses to open questions were transcribed and grouped into meaningful categories.

The child participatory workshops and the teachers' focus group review sessions were recorded with the permission of the respondents. The recordings were transcribed by the researcher and thematic analysis was undertaken to analyse the data. Transcripts were reviewed and the main sections were highlighted. The responses were grouped into mutually exclusive themes and a coding frame was devised. This coding frame was used to code all the data and assess the common themes that were present across the groups.

The written comments from the children's Draw and Write activity were analysed using thematic analysis. The children's responses to 'Picture 1' were grouped into mutually exclusive categories and an analysis of the responses the children made in relation to the coping strategies they could use was carried out. A comparison was made between the intervention and control groups' responses and the changes between pre- and post-intervention responses.



RESULTS



Section 1: Programme Effectiveness

This section will present the key findings on the effect of the programme on the children's (i) emotional literacy, (ii) social and behavioural wellbeing, (iii) coping skills and (iv) recognising and expressing feelings.

Children's Emotional Literacy

The impact of the programme on the children's emotional literacy was determined by analysing the scores on the *Emotional Literacy Checklist*. The intervention and control groups' pre and post-intervention scores can be seen in Table 5. There is a significant difference in the intervention and control groups' baseline emotional literacy scores. The mean score for the children in the intervention group was 61.54 (SD=11.36) compared with a mean score of 65.53 (SD=10.91) for the children in the control group. Post-intervention, there was an increase in the intervention groups' emotional literacy score (M=66.26, SD=11.54) and a decrease in the control groups EL score (M=65.06, SD=10.16). Figure 2 shows the intervention and control groups' pre-intervention, interim (Sept '08) and end of programme emotional literacy scores.

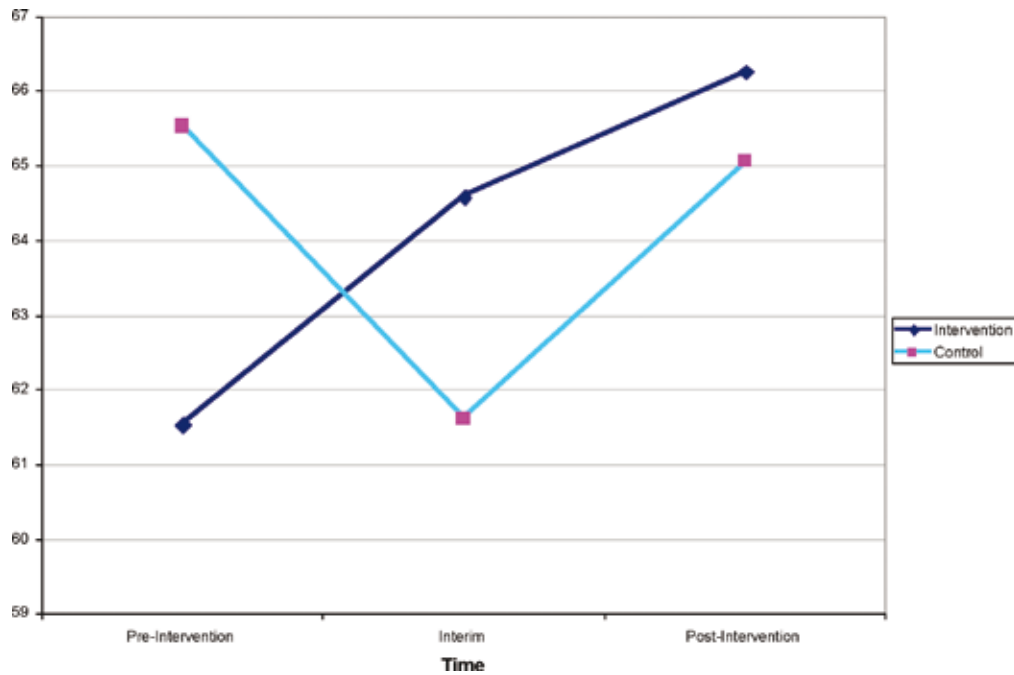
Table 5: Mean Emotional Literacy Score Pre- & Post-Intervention

	Mean pre-intervention ELC score (SD)	Mean post-intervention ELC score (SD)	N	F-Value
Intervention group	61.54 (11.36)	66.26 (11.54)	317	21.21**
Control group	65.53 (10.91)	65.06 (10.16)	109	

*p≤.05 **p≤.01

A 2 (time: pre-intervention, post-intervention) x 2 (intervention condition: Intervention, control) mixed between within subjects ANOVA was performed in order to examine the statistical significance of changes in the intervention groups' emotional literacy scores when compared with the control group. A significant interaction was found between group and time [Wilks Lambda = .95, (F(1, 424) = 21.12; p=0.000, partial eta squared = .047] thus indicating that there was a significant increase in the intervention group's emotional literacy score when compared with the control group.

Figure 2: Intervention and Control Groups Mean Pre-, Interim and Post-intervention Emotional Literacy Scores.



Subscales

When each of the emotional literacy subscales were examined in more detail, a similar pattern of a significant programme effect was found for all five subscales. Post-intervention, there was a significant increase in the intervention group's scores on self-awareness, self-regulation, motivation, empathy and social skills (see Figure 3). The intervention and control groups' pre and post-intervention mean scores for all five subscales are shown in Table 6.

Figure 3: Intervention & Control Groups Pre- and Post-Intervention Emotional Literacy mean subscales scores

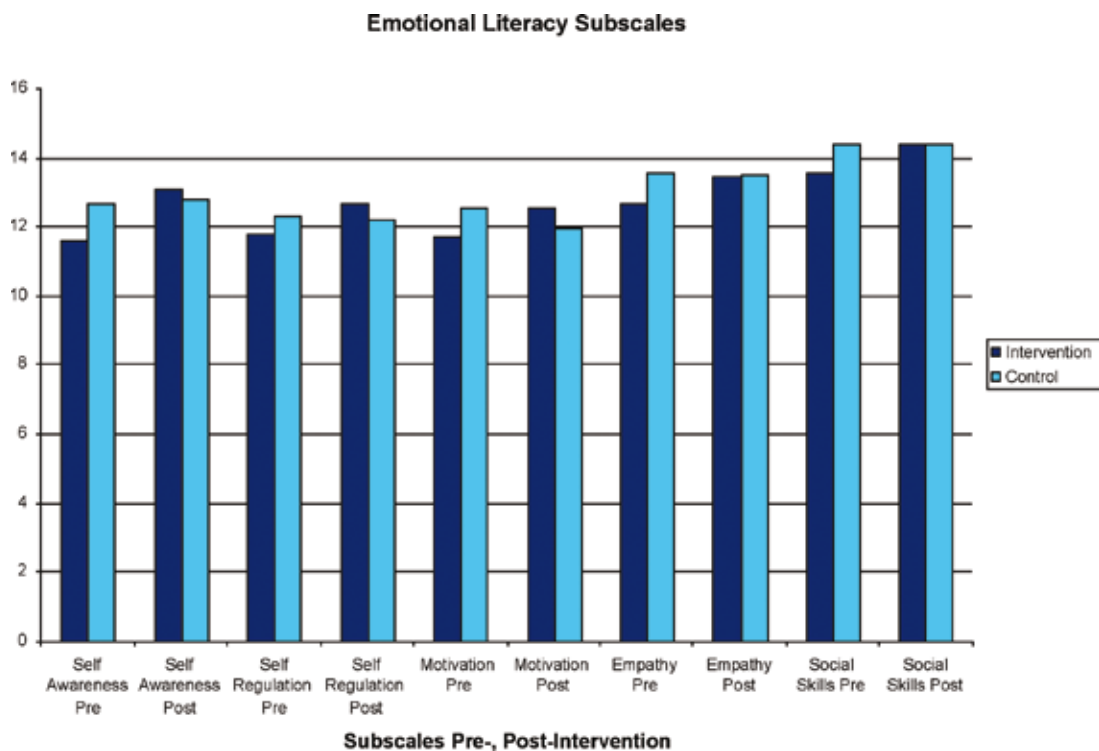


Table 6: Mean pre- and post-intervention Emotional Literacy subscales scores

	Intervention Mean Score (SD)	Control Mean Score (SD)	N	F value
Self Awareness pre-interv	11.61 (2.23)	12.67 (2.29)	321	27.35**
Self Awareness post-interv	13.13 (2.49)	12.78 (2.18)	112	
Self Regulation pre-interv	11.80 (3.30)	12.36 (3.4)	329	8.61**
Self Regulation post-interv	12.69 (3.39)	12.22 (3.21)	112	
Motivation pre-interv	11.73 (3.55)	12.58 (3.21)	328	24.22**
Motivation post-interv	12.60 (3.27)	11.97 (3.02)	113	
Empathy pre-interv	12.71 (2.68)	13.59 (3.09)	326	6.45**
Empathy post-interv	13.49 (2.72)	13.55 (2.51)	111	
Social skills pre-interv	13.56 (2.39)	14.39 (1.99)	328	9.21**
Social skills post-interv	14.39 (2.11)	14.42 (1.99)	113	

*p≤.05 **p≤.01

Score Bands for Emotional Literacy Score

The total emotional literacy score can be divided into five bands. The cut off scores were derived from the norms of the standardisation sample (Faupel, 2003). Table 7 shows the bands and their cut off scores.

Table 7: Emotional Literacy bands and cut offs scores

Band	Score
Well below average	42 or below
Below average	43-50
Average	51-69
Above average	70-75
Well above average	76 or above

Table 8 shows the number and percentage of children in the present study that fall into each band at pre- and post-intervention. Looking at the intervention group, there is an increase in the number of children classified as ‘above average’ and ‘well above average’ in terms of their emotional literacy skills post-intervention. With the control group, however, there is a decrease in the number of children classified above average post-intervention and an increase in the number of children classified as ‘average’.

Table 8: Number of children within each Emotional Literacy score band pre- and post-intervention

Band	Intervention		Control	
	Pre N (%)	Post N (%)	Pre N (%)	Post N (%)
Well below average	30 (6.3%)	13 (3.8%)	4 (2.2%)	0 (0%)
Below average	48 (10%)	17 (5.0%)	20 (11.2%)	10 (7.9%)
Average	273 (57%)	142 (41.9%)	84 (46.9%)	70 (55.6%)
Above average	87 (18.2%)	71 (20.9%)	36 (20.1%)	21 (16.7%)
Well above average	41 (8.6%)	96 (28.3%)	35 (19.6%)	25 (19.8%)

Children’s Emotional and Behavioural Wellbeing

The data from the *Strengths and Difficulties Questionnaire* were analysed in order to determine the impact of the programme on the children’s emotional and behavioural functioning. Both the total difficulties score and subscale scores were examined.

Total Difficulties Score

Table 9 show the intervention and control groups’ pre-intervention and post-intervention mean total difficulties scores. The intervention group has a higher baseline difficulties score (M=9.11, SD=7.3) than the control group (M=8.28 SD=7.9). As may be seen in Figure 4 there is a decrease over time in both the intervention and control groups’ difficulties score. Post-intervention the intervention group has a mean score of 7.0 (SD=6.4), while the control group has a similar mean score (M=7.04, SD=5.5).

Figure 4: Intervention and Control Groups’ Mean Total Difficulties Score Pre-, Interim and Post-Intervention

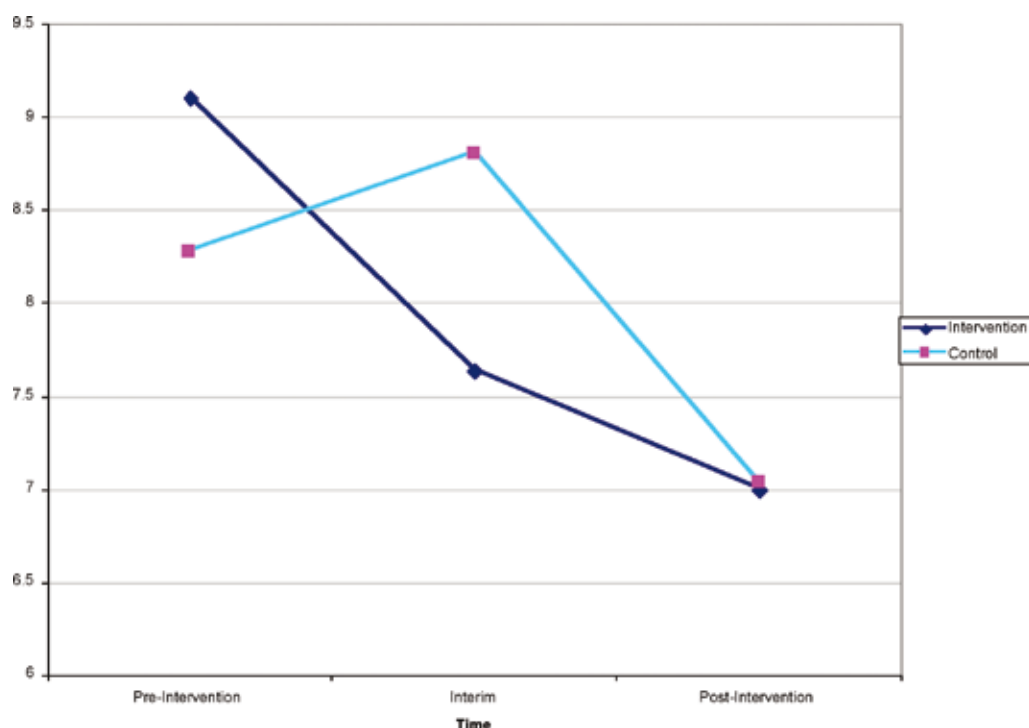


Table 9: Mean Total Difficulties Score Pre- and Post-intervention

	Pre-Interv Total Difficulties Score (SD)	Post-Interv Total Difficulties Score (SD)	N	F Value
Intervention group	9.11 (7.3)	7.0 (6.4)	324	1.86
Control group	8.28 (7.9)	7.04 (5.5)	114	

Repeated measures analysis of variance using pre- and post-intervention scores was used to determine the impact of the programme on the intervention group's total difficulties score when compared with the control group. No significant programme effect was found which indicates that compared to the control group, the programme had no significant effect on the intervention children's behavioural difficulties scores [Wilks Lambda = .959, (F(1,436)=1.86; p=.173, partial eta squared = .004]. There was a substantial main effect for time [Wilks Lambda = .94, (F(1, 436)=27.15; p=0.000, partial eta squared = .059] with both groups showing a reduction in their mean total difficulties score post-intervention. The main effect comparing the two groups was not significant [F(1, 436) = .343, p=.56, partial eta squared = 0.001] suggesting no difference across the two groups.

Subscales

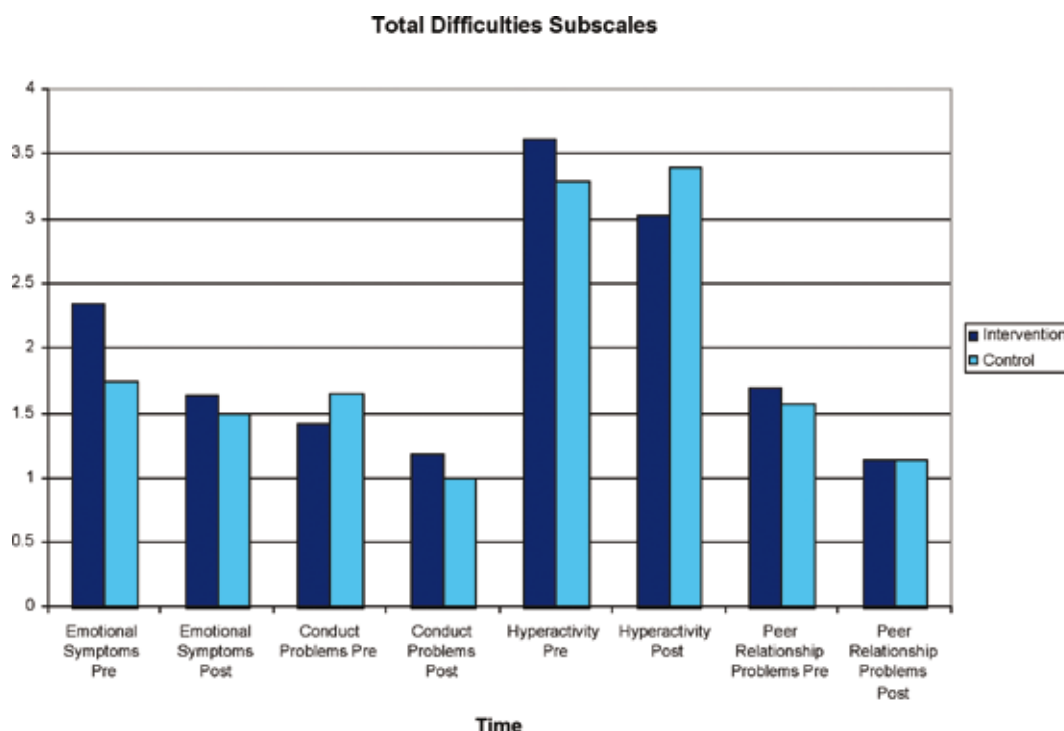
Table 10 shows the intervention and control groups' mean pre and post-intervention scores for the four subscales: Emotional Symptoms, Conduct Problems, Hyperactivity and Peer Relationship Problems. Pre-intervention, the intervention group's Emotional Symptoms, Hyperactivity and Peer Relationship Problems scores were higher than the control groups' scores. Post-intervention, the intervention group evidenced a decrease in their mean scores across all sub-scales. The control group, however, evidenced a slight increase in their mean hyperactivity score post-intervention. Figure 5 illustrates the changes across all four subscales for the intervention and control groups.

Table 10: Mean pre- and post-intervention Total Difficulties Subscales scores

	Intervention Mean Score (SD)	Control Mean Score (SD)	N	F Value
Emotional Symptoms pre-interv	2.35 (2.5)	1.75 (2.3)	329	2.64
Emotional Symptoms post-interv	1.64 (2.5)	1.5 (1.9)	114	
Conduct Problems pre-interv	1.42 (2.0)	1.66 (2.2)	330	5.25*
Conduct Problems post-interv	1.19 (1.8)	1.01 (1.7)	114	
Hyperactivity pre-interv	3.62 (3.2)	3.3 (3.3)	328	6.32*
Hyperactivity post-interv	3.03 (3.2)	3.4 (2.6)	113	
Peer Relationship Problems pre-interv	1.7 (2.1)	1.58 (2.3)	328	.372
Peer Relationship Problems post-interv	1.14 (1.7)	1.15 (1.62)	114	

*p≤.05 **p≤.01

Figure 5: Intervention and Control Groups' Total Difficulties Subscales Scores



Repeated measures analysis of variance was used to examine each of the subscales individually. A significant time x group interaction effect was found for conduct problems [Wilks Lambda = .989, (F(1, 442)=5.25; p=.022, partial eta squared = .012]. The results show that whilst both groups' conduct problems decreased over time the control groups' conduct problems scores were significantly lower than the intervention groups at post-intervention. In contrast to this, a significant time x group interaction effect was found for hyperactivity [Wilks Lambda = .986, (F(1, 441)=6.31; p=.012, partial eta squared = .014] indicating that the intervention group's hyperactivity levels were significantly reduced compared to the control group at post-intervention.

Prosocial Score

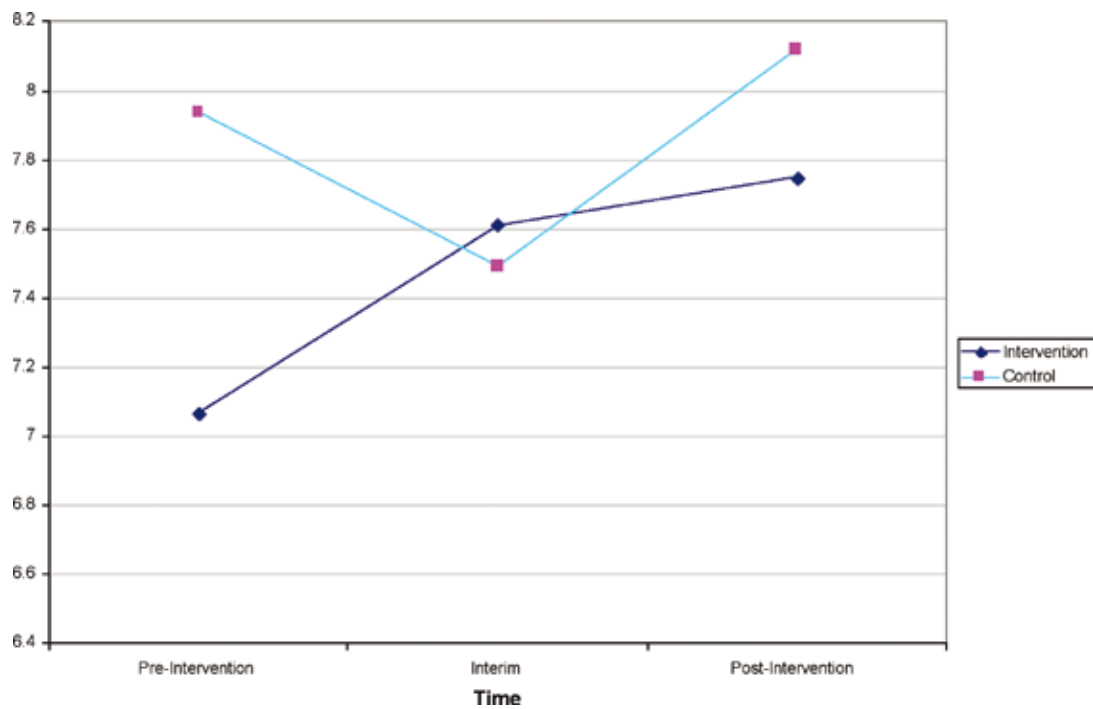
The prosocial score refers to the children's positive social behaviour. Table 11 shows the intervention and control groups' pre- and post-intervention mean prosocial scores. The intervention group's pre-intervention prosocial score was significantly lower than the control groups. Both groups' mean score increased post-intervention. Repeated measures analysis of variance was used to examine the change in scores across both groups. No significant time x group interaction effect was found [Wilks Lambda = .992, (F(1, 440)=3.50; p=.062, partial eta squared = .008] indicating that the programme had no significant effect on this aspect of the children's behaviour. There was a main effect for time [Wilks Lambda = .997, (F(1, 440)=10.20; p=.002, partial eta squared = .023] with both groups showing an increase in prosocial scores post-intervention.

Table 11: Intervention and control groups' mean prosocial score pre- and post-intervention

	Mean pre-interv prosocial score (SD)	Mean post-interv prosocial score (SD)	N	F Value
Intervention group	7.07 (2.4)	7.75 (2.4)	329	3.5
Control group	7.94 (2.1)	8.12 (2.3)	113	

*p≤.05 **p≤.01

Figure 6: Intervention and Control Groups’ Pre-, Interim and Post-Intervention Prosocial Scores



Bands for Strengths and Difficulties Scores

The Strength and Difficulties scores can be classified into three bands “Normal”, “Borderline” and “Abnormal” (Goodman, 1997). Using the bandings shown in Table 12, an “abnormal” score on the total difficulties score can be used to identify likely “cases” with mental health disorders. According to Goodman (1997) approximately 10% of a community sample is likely to score in the abnormal band on any given score with a further 10% scoring in the borderline band.

Table 12: Strengths and Difficulties Bands and Cut Offs

	‘Normal’	‘Borderline’	‘Abnormal’
Total Difficulties Score	0-11	12-15	16-40
Emotional Symptoms Score	0-4	5	6-10
Conduct Problems Score	0-2	3	4-10
Hyperactivity Score	0-5	6	7-10
Peer Problems Score	0-3	4	5-10
Prosocial Behaviour Score	6-10	5	0-4

Table 13 presents the number and percentage of children in the intervention and control groups in this study that fall within the ‘normal’, ‘borderline’ and ‘abnormal’ banding according to their total difficulties score pre- and post-intervention. Pre-intervention, there is a relatively high number of children (19% in both the intervention and control group) scoring in the “abnormal” range in the present study. In terms of the children in the intervention group, there is a decrease in the percentage of children that are classified as ‘borderline’ and ‘abnormal’ post-intervention and an increase in the percentage of children that are classified as ‘normal’. With the control group there is a decrease in the number of children classified as ‘abnormal’ post-intervention and an increase in the number of children that are classified as ‘borderline’ and ‘normal’. The figures seem to indicate a greater number of children in the intervention group moving from the abnormal and borderline band to the normal band post-intervention when compared with the control group.

Table 13: Number of children within each Strengths and Difficulties score band

Band: Total Difficulties Score	Intervention		Control	
	Pre N (%)	Post N (%)	Pre N (%)	Post N (%)
Normal	323 (66.3%)	264 (77.2%)	131 (71.6%)	97 (75.2%)
Borderline	70 (14.4%)	36 (10.5%)	17 (9.3%)	18 (14%)
Abnormal	94 (19.3%)	42 (12.3%)	35 (19.1%)	14 (10.9%)

Children’s Coping Skills: Schoolagers’ Coping Strategy Inventory

The Schoolagers’ Coping Strategy Inventory was employed to determine the impact of the programme on the children’s use of coping strategies and the type of strategies used by the intervention and control groups at pre- and post-intervention.

Number of Coping Strategies Used

The intervention and control groups’ results for the mean number of strategies used at pre- and post-intervention are presented in Table 14. Pre-intervention, the children in the intervention group report using on average 17.54 out of the 26 coping strategies. Similarly, the children in the control group use on average 17.6 coping strategies at pre-intervention. Both groups evidenced an increase in the number of coping skills they use post-intervention. Repeated measures analyses of variance found no programme effect [Wilks Lambda = .995, (F(1, 728)=3.37; p=0.067, partial eta squared = .005] thus indicating that the intervention group did not differ significantly from the control group in the number of coping strategies used across time. There was a substantial main effect for time [Wilks Lambda = .982, (F(1, 727)=13.45; p=0.000, partial eta squared = .018] with both groups showing an increase in use of coping skills post-intervention. The main effect comparing the two groups was not significant, suggesting no difference in the use of coping skills between the two groups.

Table 14: Mean number of coping strategies used pre- and post-intervention

	N	Intervention (SD)	N	Control (SD)	F Value
Pre-Interv Frequency Score	523	17.54 (4.7)	207	17.6 (4.7)	3.37
Post-Interv Frequency Score	523	18.96 (4.9)	207	18.08 (4.5)	

*p≤.05 **p≤.01

Most frequently used strategies

The most frequently used strategies by the children in the intervention and control groups at pre- and post-intervention are shown in Table 15 and 16. Pre-intervention, the strategies used by the intervention group are consistent with those used by the control group and there is little change at post-intervention. Both intervention and control group are most likely to use the strategy of “Say I’m sorry or tell the truth” when they are worried or upset about something. “Play a game” and “Watch tv / listen to music” were also frequently used strategies across both groups at pre- and post-intervention. Pre-intervention the children in the intervention group were more likely than the control group to “talk to someone”. Pre- and post-intervention the children in the control group were more likely than the intervention group to ‘Do something about it’. Post-intervention, however, the children in the intervention group were more likely than the control group to use the strategy ‘Try to relax and stay

calm. The children in the control group were more likely than the intervention group to think about their worries at post-intervention.

Table 15: Most Frequently used Coping Strategies (Pre-Intervention)

Intervention	Mean	SD	Control	Mean	SD
Say I'm sorry, tell the truth	1.76	.89	Say I'm sorry or tell the truth	1.90	.862
Play a game	1.72	.95	Watch tv or listen to music	1.69	.964
Watch tv or listen to music	1.68	.92	Play a game	1.66	1.00
Eat or drink	1.62	1.06	Do something about it	1.60	1.00
Pray	1.60	.98	Pray	1.59	1.03
Talk to someone	1.60	1.03			

Table 16: Most Frequently used Coping Strategies (Post-Intervention)

Intervention	Mean	SD	Control	Mean	SD
Say I'm sorry or tell the truth	1.85	.88	Say I'm sorry or tell the truth	1.85	.93
Watch tv or listen ot music	1.81	.90	Play a game	1.67	.94
Play a game	1.74	.89	Think about it	1.61	.98
Try to relax, stay clam	1.70	.98	Try to forget about it	1.56	1.02
Try to forget about it.	1.69	.98	Do something about it	1.56	1.04
			Pray	1.55	.98

Most effective strategies

Based on the children's responses to the question "How much does this help?" it was possible to identify the strategies that the children perceived to be most effective in terms of helping them to feel better. Tables 17 and 18 present the strategies that the children rated the most effective at pre- and post-intervention. The strategy of "Say I'm sorry or tell the truth" when worried about something received the highest rating by both intervention and control groups at pre- and post-intervention. "Watch tv / listen to music", "Play a game" and "Pray" were also rated highly by both groups pre- and post-intervention. Interestingly, post-intervention, the strategy of "Try to relax and stay calm" was rated highly by the intervention group only.

Table 17: Coping Strategies perceived the most effective (pre-intervention)

Intervention	Mean	SD	Control	Mean	SD
Say I'm sorry or tell the truth	2.25	1.07	Say I'm sorry or tell the truth	2.32	1.00
Pray	2.10	1.15	Draw, write or read something	1.69	1.19
Play a game	2.10	1.17	Pray	1.65	
Watch tv or listen to music	2.09	1.16	Play a game	1.59	
Cuddle pet	2.00	1.23	Watch tv or listen to music	1.46	1.00

Table 18: Coping Strategies perceived the most effective (post-intervention)

Intervention	Mean	SD	Control	Mean	SD
Say I'm sorry or tell the truth	2.28	.97	Say I'm sorry or tell the truth	2.17	1.02
Play a game	2.23	.98	Pray	1.95	1.12
Watch tv or listen to music	2.12	1.00	Play a game	1.93	1.16
Pray	2.08	1.08	Watch tv or listen to music	1.87	1.17
Try to relax or stay calm	2.04	1.07	Eat or drink	1.81	1.16

Children's Coping Skills: Draw and Write Technique

Before the implementation of the Zippy's Friends programme a sample of children in the intervention and control groups were randomly chosen to take part in the Draw and Write Technique. This sample was made up of 130 pupils in the intervention group (male N=72, female N=58) and 68 pupils in the control group (male N= 29, female N=39). Pre- and post-intervention, the children were asked to draw a picture and write one sentence about a time when they felt sad. Following this the children were asked to draw a second picture and write one sentence about what they could do to make themselves feel better (see Appendix C for transcript of instructions read out to the children). In analysing the responses, the children's sentences about a time when they felt sad were grouped into mutually exclusive categories based on the content of the sentences. These categories were devised after examination of the data. Following this the children's sentences about how they would cope with the situation were examined. A comparison between the changes in the intervention group's responses at pre- and post-intervention, the control group's pre- and post-intervention responses, and the difference between the intervention and control groups' responses was carried out. Figure 7 illustrates the overarching themes and categories which emerged from the children's responses in relation to times when they felt sad. Figure 8 presents the four themes and the main strategies the children reported they would use to feel better. Figures 9.1, 9.2, 9.3 and 9.4 provide further detail in relation to the four themes and the strategies the children in the control and intervention groups would use at pre- and post intervention.

A description of the events that the children recalled within each theme, along with the strategies the children would use to make themselves feel better is provided in the figures that follow. A comparison between the intervention and control groups' coping strategies pre- and post-intervention will be

made with the use of sample quotes to illustrate the children’s perceptions. In relation to ‘Picture 2’, it is important to note that while the children were asked to draw a picture and write a sentence about what they could do to feel better, some children drew a picture about what they had done in the past to make themselves feel better and other children drew a picture about what they could do to feel better.

Figure 7: ‘A time when I felt sad’: Children’s themes and categories

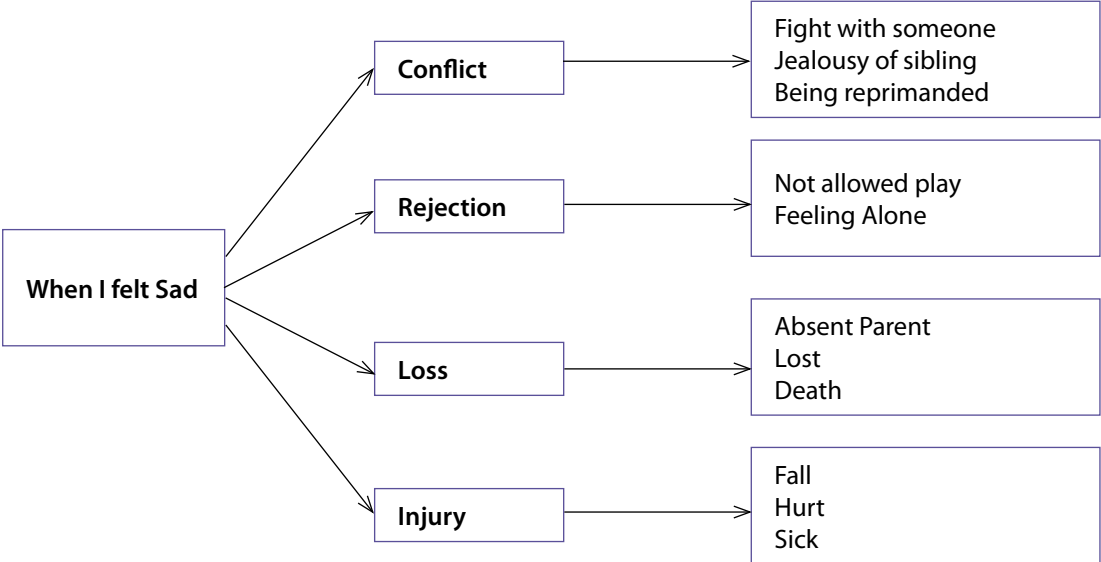
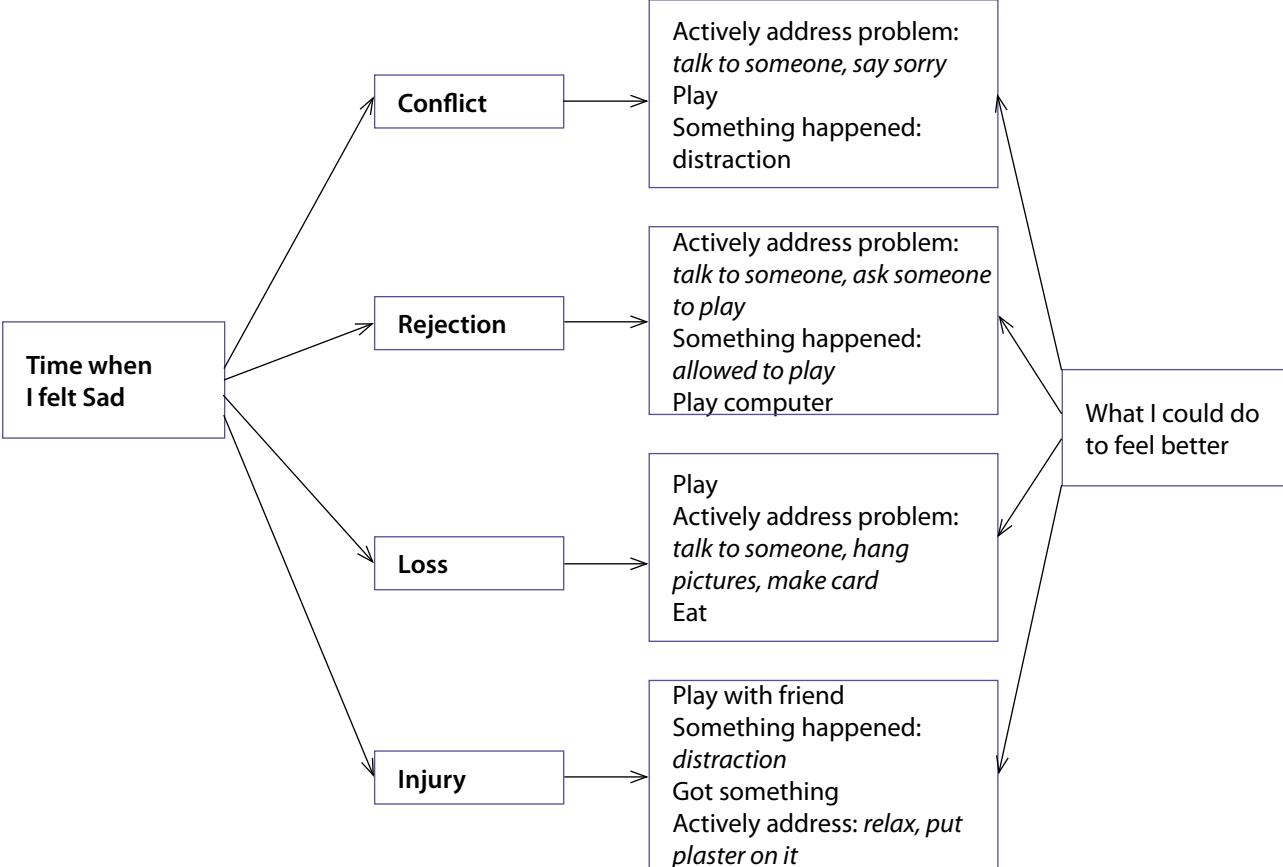
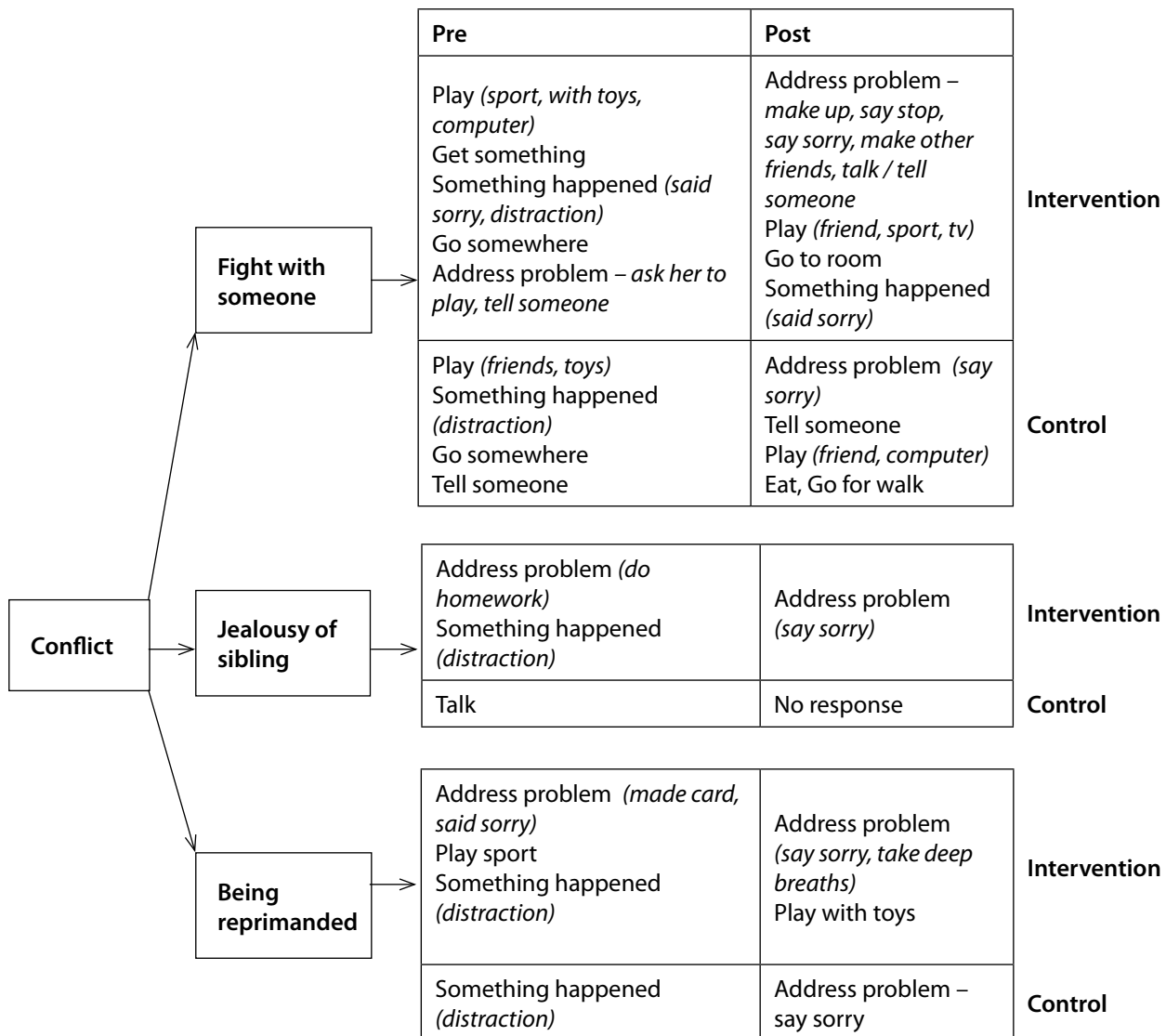


Figure 8: ‘What I could do to feel better’: Children’s coping strategies



Theme: Conflict

The theme of conflict was made up of three categories: (i) fight with someone (ii) jealousy of sibling and (iii) being reprimanded.



Fight with someone

The category of ‘fight with someone’ was the most popular response category pre- and post-intervention. This category was subdivided as there were a number of specific events in relation to fighting to which the children referred. The sub categories included:

- **Being hit/pushed**

The children in the intervention and control group wrote about a time when they were hit, punched or pushed by a brother, sister or friend. Pre-intervention, the children in the intervention and control group used coping strategies such as playing by themselves, feeling better when something happened (somebody said sorry) and talking to someone. Examples of the children responses include:

(Pic 1): “When Matthew hit me in the head”. (Pic 2, play): “I played with my real toys”. [Interv]

(Pic 1): “My sister hit me with a toy”. (Pic 2 something happened): “My sister said sorry”. [Interv]

(Pic 1): “I felt sad when my bother hit me”. (Pic 2 talk): “I will always tell my mammy if my brother hits me”. [Control]

Other coping strategies used by the children included playing 'playstation', hitting back, going somewhere (to the park / to bedroom), feeling better as a result of something happening (other person saying sorry) and telling someone. At post-intervention, the children in the intervention group were more likely than the control group to talk to someone. The majority of the children said they would tell their mother or father. Responses from the intervention group included:

(Pic 1): *"This is when my friend threw glass at me. My leg was bleeding"*. (Pic 2 Talk): *"It made me happy when I told Mummy and Granny"*.

(Pic 1): *"When Paul gave me a black eye. It was last week. It was sore (picture: HA HA)"*. (Pic 2 Talk): *"Call a friend, tell Dad"*.

(Pic 1): *"I was sad because I was pulled by the hair"*. (Pic 2 Talk): *"To make myself better I called my Mum"*.

The majority of the children in the control group used 'play' as a means to feeling better after being hit or pushed:

(Pic 1): *"In my old school a person pushed me. The person also poked me with her pencil"*. (Pic 2 Play): *"I am playing basketball with my best friend Lauren"*.

(Pic 1): *"I was lost and a boy hit me"*. (Pic 2 Play): *"I'm playing my playstation"*.

- **Being teased**

The children drew and wrote about a time when they were teased by someone and being called names. There is a change in the coping strategies used by the intervention group between pre- and post-intervention. At pre-intervention the children in the intervention group used strategies such as taking a nap and feeling better when the other person said sorry. Post-intervention however, the children in the intervention group were more likely to tell someone. Examples of the children's responses include:

(Pic 1): *"I fell off the monkey bars and a girl laughed at me"*. (Pic 2 something happened): *"I got picked up and she said sorry"*. [Pre-Intervention]

(Pic 1): *"I felt sad when my sister called me fat (picture 'You are fat')"*. (Pic 2 talk): *"I would feel happy when I told my Mummy (picture 'Laura is annoying me' 'I'll go talk to her')"*. [Post-Intervention]

(Pic 1): *"My friend was calling me names"*. (Pic 2 talk): *"I told teacher. We shook hands and played"*. [Post-Intervention]

In terms of the control group pre- and post-intervention some children in the control group said they would feel better when they go somewhere after being teased:

(Pic 1): *"When someone is bullying me that made me very sad"*. (Pic 2 go somewhere): *"When I walk in the street it makes me forget about it"*.

(Pic 1): *"One girl said that I am very very fat"*. (Pic 2 go somewhere): *"I went into my room"*.

At post-intervention the children in the control group also used the strategy of talking to someone:

(Pic 1): *"I was sad when boys were calling me names"*. (Pic 2): *"I went to tell Mammy"*.

- **Being shouted at**

At pre-intervention, the children in the intervention group used strategies such as playing with toys, feeling better when a friend called over and addressing the problem by asking someone to play with them. No child in the intervention group wrote about such an event at post-intervention. In terms of the control group, pre-intervention, shouting back was used as a strategy to feel better and post-intervention food was also used as a strategy.

(Pic 1): "I was sad when my brother shouted in my face". (Pic 2 shout back): "I shout in his face at him".
(Pic 1): "Sarah shouted in my face". (Pic 2 food): "Ice cream would make me happy".

Jealousy of sibling

At pre-intervention children from the intervention group and the control group wrote about being jealous of a sibling. The children in the intervention group used the strategies of directly addressing the problem and feeling better as a result of getting something, whilst the child in the control group used the strategy of talking to feel better.

(Pic 1): "I have lots of homework. My brother doesn't have any. This makes me sad". (Pic 2 address problem): "I did all my homework and my Mum gave me sweets. I felt happy". [Interv]

(Pic 1): "When my Mammy brought Sarah to bingo and didn't bring me". (Pic 2 something happened): "When my Dad let me watch Father Ted and drink hot chocolate". [Interv]

(Pic 1): "When my Mammy had a baby I was sad". (Pic 2 talk): "I called my Mum and she was bringing my baby sister home". [Control]

At post-intervention, only one child in the intervention wrote about being jealous of a sibling. This child addressed the problem by saying sorry.

(Pic 1): "I was bold. My brother got to play the playstation". (Pic 2 address problem): "I felt sad. And I said sorry to my brother (picture: 'Sorry')".

Being Reprimanded

Some children wrote about being sad when somebody gave out to them. The children were given out to by their teacher and their parents. At pre-intervention some children in the intervention group directly addressed the problem while other children played or felt better when something happened (cousin called over). At post-intervention the children only used the strategy of directly addressing the problem. Some of the children's responses include:

(Pic 1): "When my teacher gave out to me I was really sad". (Pic 2 address problem): "When I made a card it made me feel better (picture - A card with 'I'm sorry' written on it)". [Pre-Intervention]

(Pic 1): "I was sad when my Mammy shouted at me". (Pic 2 something happened): "My cousin came over". [Pre-Intervention]

(Pic 1): "I'm sad because my Mum and Dad gave out to me". (Pic 2 address problem): "I am sorry Mum and Dad. (picture 'I'm sorry' 'It's ok! It's ok')". [Post-Intervention]

(Pic 1): "I was sad when I was grounded". (Pic 2 address problem): "I took deep breaths and said sorry to my Mum". [Post-Intervention]

Pre- and post-intervention one child in the control group referred to a time when they were given out to. At pre-intervention the child used distraction as a strategy to feel better while the child addressed the problem at post-intervention:

(Pic 1): "I felt sad when my Mum got mad at me". (Pic 2 distraction): "Have a party with my friends". [Pre-Intervention]

(Pic 1): "I was sad when I scratched my Mummy's table". (Pic 2 address problem): "I said I'm sorry I scratched your table". [Post-Intervention]

Sample of drawings from children in the intervention group, post-intervention

Theme: Conflict
Fight with someone



I was sad because I was
Puled By The hair.

Picture 1



To make my self
Bettr I called my Mum.

Picture 2

Theme: Conflict
Being reprimanded



I Was sad When i was growded.
I Was sad When i fell

Picture 1



I took deep brethrs.
and said sorry to my mium.

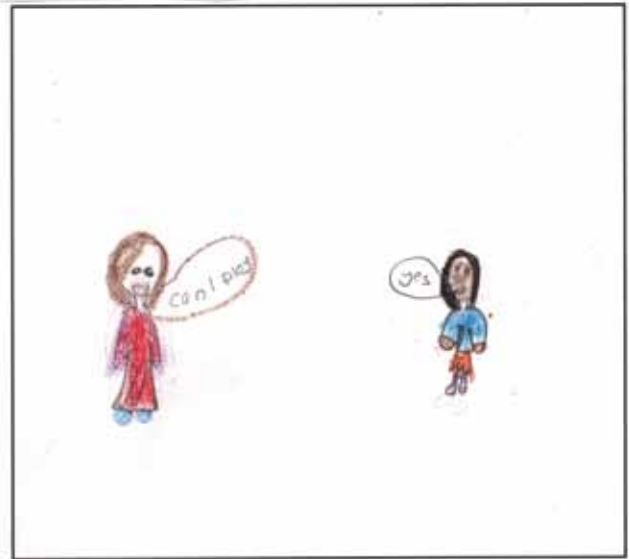
Picture 2

Theme: Rejection
Feeling Alone



I was sad because I was lonely and my brother called me a loner

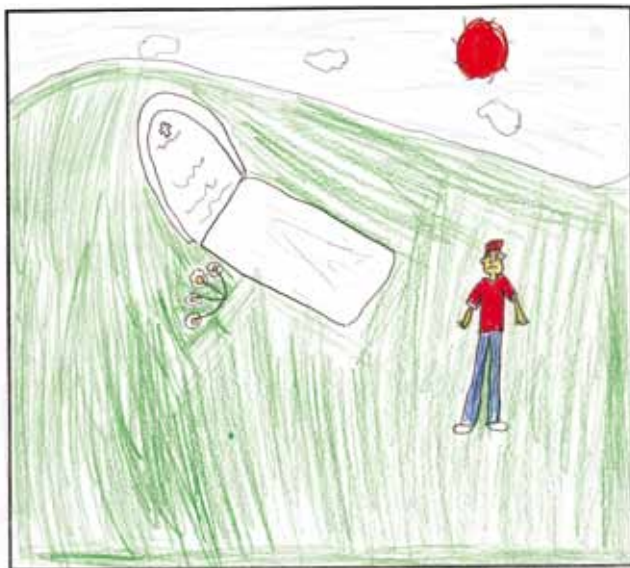
Picture 1



I coped by doing this: Asking if

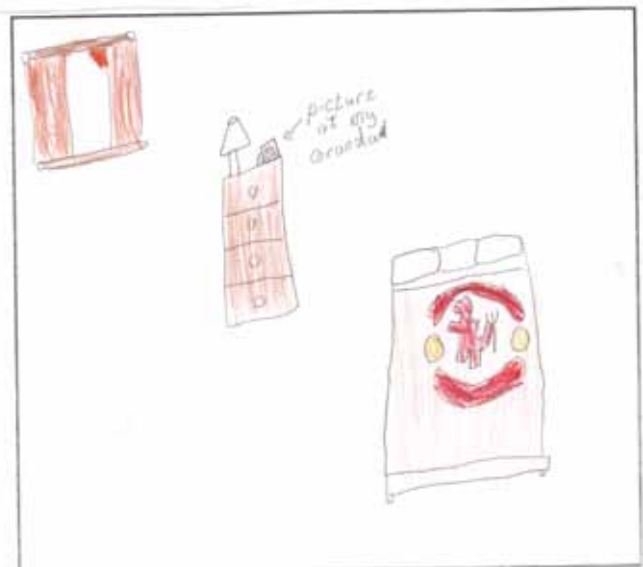
Picture 2

Theme: Loss
Death



I felt sad when my Grandad died.

Picture 1

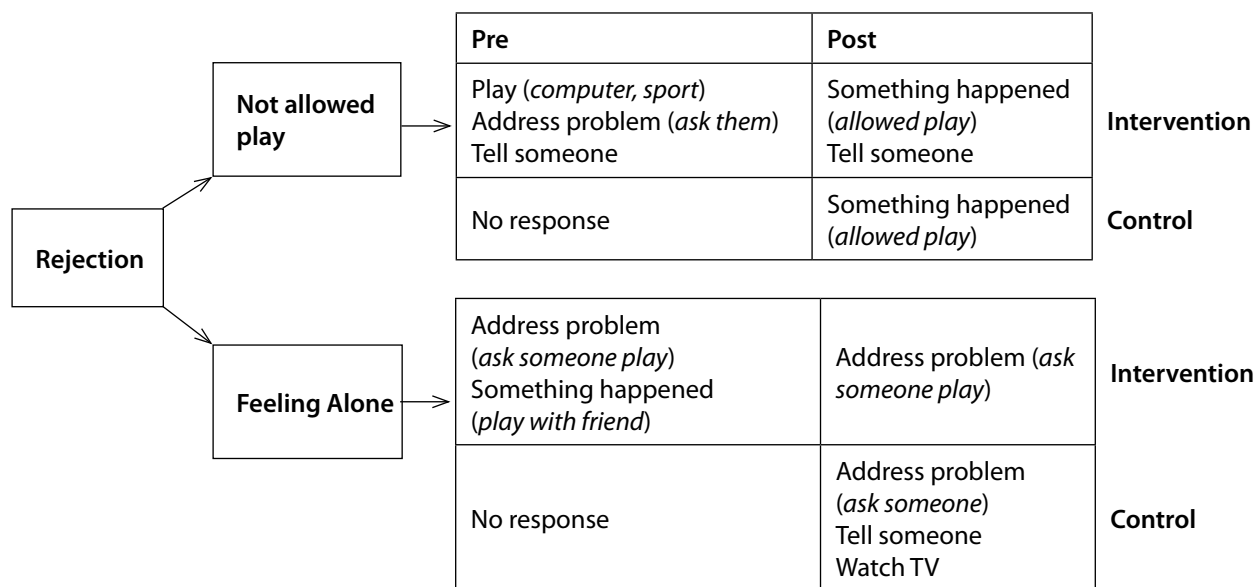


I put a picture of my Grandad in my bedroom.

Picture 2

Theme: Rejection

The theme of rejection is made up of two categories (i) not allowed to play and (ii) feeling alone.



Not allowed play

Several children wrote about a time when a friend or a group of people would not let them join in or play. No child in the control group wrote about it at pre-intervention. More children from the intervention group wrote about it at pre-intervention than post-intervention. There was no notable change in the coping strategies used by the intervention group between pre- and post-intervention. The intervention group's responses to feeling better pre-intervention included telling someone about it, playing with toys / computer game and addressing the problem. At post-intervention feeling better as a result of something happening (being allowed to play) and telling someone about it were used to feel better. Some of the children's responses included:

(Pic 1): "My friend is only playing with my sister. She won't play with me. I am sad". (Pic 2 talk): "I told my Mum. My sister got into trouble for not playing with me. I felt happy". [Pre-Intervention]

(Pic 1): "In the library the group of girls would not let me play hop-sotch". (Pic 2 address problem): "I said 'Can I play please' They said 'sorry' and they let me play". [Pre-Intervention]

(Pic 1): "I felt sad when my cousin didn't let me play my playstation". (Pic 2 something happened): "Then my cousin let me play my playstation". [Post-Intervention]

(Pic 1): "John was mean to me". (Pic 2 talk) "I told Veronica, she talked to John". [Post-Intervention]

Feeling Alone

Some children recalled being alone / having nobody to play with as a time when they felt sad. There was a change in the strategies used by the intervention group between pre- and post-intervention. At pre-intervention, the children in the intervention group used strategies such as playing in the park, feeling better as a result of something happening (playing with friends) and addressing the problem by finding someone to play with them. At post-intervention, however, all of the children in the intervention group attempted to directly address the problem. Examples of responses include:

(Pic 1): "I had no one to play with". (Pic 2 address problem): "I played with Ethan". (picture 'Can I play with you?', 'Yes', 'Thanks')".

(Pic 1): “I felt sad when my friend left me alone on the playground”. (Pic 2 address problem): “Ask my friend to play with me” (picture ‘Will you play with me?’, ‘Yes I will’).

(Pic 1): “Everyone has friends and I did not”. (Pic 2 address problem): “I went to the ... I saw a girl and I said ‘Can you be my friend?’, ‘Yes I will be your friend’” (picture ‘Hello can you be my friend?’ ‘Hello yes I will be your friend’).

At pre-intervention no child in the control group recalled feeling alone. At post-intervention the children in the control group used strategies such as telling a friend, watching television and addressing the problem:

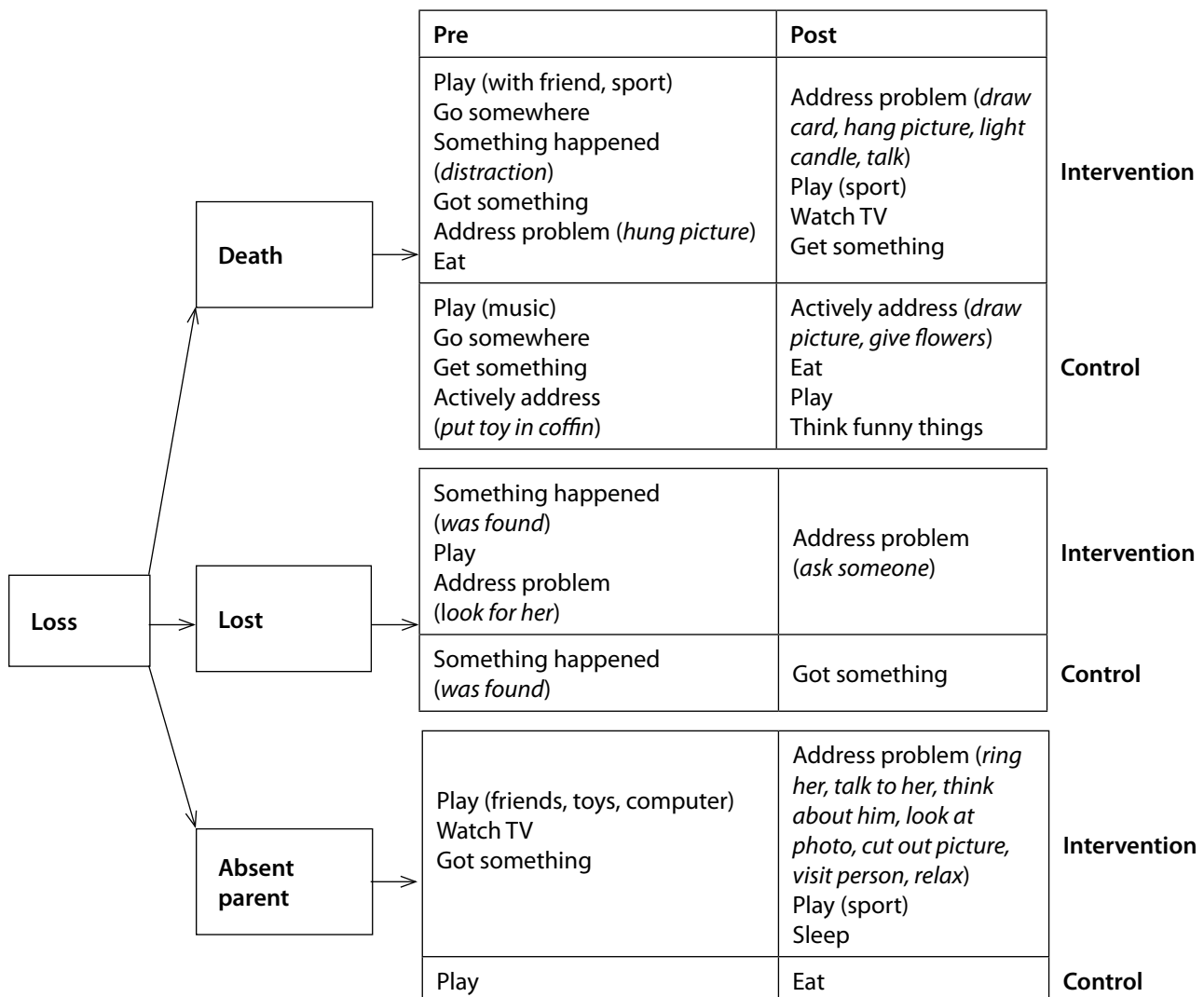
(Pic 1): “When I was lonely. I had no one to play with (picture ‘I am sad’)”. (Pic 2 talk): “Tell my best friends Claire, K and others”.

(Pic 1): “I was sad when my Mum left me at home and then that time I was sick”. (Pic 2 Watch tv): “When I was sad then I went to watch TV and it made me better”.

(Pic 1): “I was sad and lonely because no one would play with me. (picture ‘I and sad and lonely’)”. (Pic 2 address problem): “I could ask the children again (picture ‘Will you play with me?’, ‘Ok I will play with you’)”.

Theme: Loss

The theme of loss is made up of three categories, (i) death of a loved one, (ii) a relative being absent and (iii) being lost.



Death of a loved one

Several children in the intervention and control groups referred to the death of a relative at pre- and post-intervention. The majority of children wrote about the death of a grandparent. Some wrote about a pet dying. Pre-intervention, the most frequently reported coping strategy was 'playing' and 'going somewhere'. Other coping strategies included feeling better as a result of going somewhere, eating and getting something to feel better. Some of the children's comments included:

(Pic 1): "My Mammy's friend died". (Pic 2 play): "I will play and try forget about it". [Interv]

(Pic 1): "My Grandad died four years ago and I am sad". (Pic 2 go somewhere): "When my Mum told me I was going to Portugal". [Control]

(Pic 1): "I was sad when my dog died". (Pic 2 eat): "I was happy when I ate chicken". [Interv]

One child in the intervention and control group attempted to address the problem of feel sad about the death of a relative pre-intervention:

(Pic 1): "My Mammy said my Grandad died, then I cried". (Pic 2 address problem): "I got a picture from my mammy and hung it in my room". [Interv]

(Pic 1): "I was sad when my friend died. I went to his friend". (Pic 2 address problem): "I put a toy in his coffin, I felt better". [Control]

At post-intervention there was an increase in the number of children in the intervention group that attempted to actively address the problem by talking to friends, hanging a picture of the loved one on the wall, lighting a candle. Other children used coping strategies such as 'watching tv' and 'playing sport'. Some of the children's comments included:

(Pic 1): "I felt sad when my Grandad died". (Pic 2 address problem): "I put a picture of my Grandad in my bedroom".

(Pic 1): "I was sad when my Dad died.". (Pic 2 address problem): "I talk about my Daddy".

(Pic 1): "I was sad when my Granddad died". (Pic 2 address problem): "I would go to the church and light a candle for my Grandad".

(Pic 1): "I felt sad when Charlie died. I was very sad". (Pic 2 address problem): "I could stick pictures on the wall. I could pray for him".

In terms of the control group, the coping strategies that were used included addressing the problem by drawing a picture, eating and thinking of funny things.

Lost

Some children remembered a time when they were lost. The majority of the comments were in relation to being lost in a shop. At pre-intervention the most frequently reported coping strategy was feeling better when they were found again:

(Pic 1): "I got lost in Asda. I got lost in the shop". (Pic 2 something happened): "I got lost in the shop but I found my Mammy". [Intervention]

(Pic 1): "When my brother was lost I was very sad". (Pic 2 something happened): "When I found him I was happy again". [Control].

At post-intervention, only one child in the intervention and control group recalled being lost. The child in the intervention group addressed the problem by asking someone for help. In contrast to this, the child in the intervention group felt better when he/she got something:

(Pic 1): “I felt sad when I was lost cause I was lonely”. (Pic 2 address problem): “I had to go and ask a man who worked there”. [Interv]

(Pic 1): “I was sad when I got lost in Dunnes with my friend Carla. And at the end I was happy”. (Pic 2 got something): “I was happy when I got something free in Dunnes with my friend Carla”.

Absent Relative

A relative being absent from home was recalled by several children pre- and post-intervention. In most cases the children referred to a parent being absent. At pre-intervention the most frequently reported strategy that was used by the children in the intervention and control group was to play with friends, toys, a computer game or watch television. There was a change in the type of coping strategies used by the children in the intervention group at post-intervention. The majority of children attempted to directly address the problem of feeling sad by talking to the person on the phone, making a card, looking at photos and thinking about the person. Some of the children’s comments included:

(Pic 1): “My Dad was leaving to Shannon airport to go to Nigeria”. (Pic 2): “Talk to me on the phone and say hello when he comes back home”.

(Pic 1): “I felt sad when my Mum went to Dublin (picture ‘I’ll miss you Mum, bye bye’)”. (Pic 2): “I rang my Mum, I felt so happy”.

(Pic 1): “I was sad when my brother left home. He was 17 then (picture ‘Bye’)”. (Pic 2): “It cheered by up when I looked at photos. He is now in Limerick”.

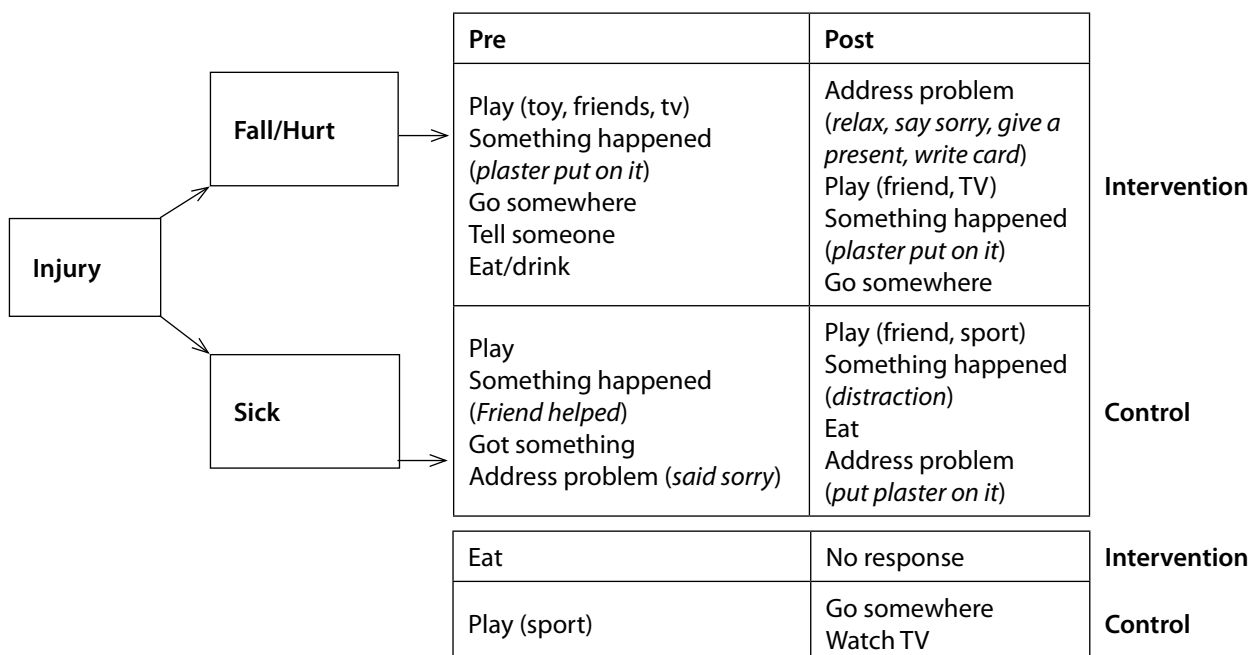
(Pic 1): “I felt sad when my Mammy was in hospital”. (Pic 2 address problem): “I would feel happy when I bought a box of sweets for my Mammy”.

Post-intervention, one child in the control group referred to being sad as a result of an absent parent. Food was used as a strategy to feel better:

(Pic 1): “I was alone because I over slept and my Mum was gone”. (Pic 2): “I made myself some eggs and hot chocolate”.

Theme: Injury/Illness

This theme is made up of two categories (i) falling/being hurt (ii) being sick.



Falling

The category of falling was the second most popular response category at pre- and post-intervention. This category was made up of children's references to falling or being injured. The majority of injuries were in relation to falling and hurting their leg. Pre-intervention, several children used 'play' as a strategy to feel better. Other strategies included, feeling better as a result of something else happening (distraction) or as a result of going somewhere, watching television, talking to a parent, eating/drinking. At post-intervention there were no notable changes in the types of coping strategies used by the children in the intervention and control group. Play was the most frequently reported strategy that was used by both groups:

(Pic 1): *"I felt sad when I fell"*. (Pic 2 play): *"I would feel happy if I played with my friend"*. [Intervention]

(Pic 1): *"I was playing outside and I got a cut on my knee and I was in junior infants"*. (Pic 2 play): *"To make myself happy I play a game of catch"*. [Control]

Other children in the intervention group and control group attempted to address the situation:

(Pic 1): *"I was sad when Claire got knocked down"*. (Pic 2 address problem): *"'What is it Jack?' 'It's a present for you Claire, It's a PSP'"*. [Intervention]

(Pic 1): *"I was sad when Peter fell out the window"*. (Pic 2 address problem): *"Write a card to Peter"*. [Intervention]

(Pic 1): *"I was sad when I hurt myself"*. (Pic 2 address problem): *"To make myself feel happy I would put a plaster on myself"*. [Control]

Children in the intervention group only used relaxation as a way of coping with the situation:

(Pic 1): *"I was sad when I fell"*. (Pic 2 relax): *"I took deep breaths and said sorry to my Mum"*.

(Pic 1): *"I banged my head off the car"*. (Pic 2 relax): *"I would go home and take a rest"*.

Sick

One child in the intervention and control group recalled a time when they were sick at pre-intervention while no child in the intervention group recalled such an event at post-intervention. The child in the intervention group used 'eating' to feel better pre-intervention, whilst the child in the control group played sport:

(Pic 1): *"I am getting a needle"*. (Pic 2 eat): *"I am having raisins"*.

(Pic 1): *"I had a pain in my tummy"*. (Pic 2 play sport): *"I go swimming"*.

At post-intervention the children in the control group felt better as a result of something happening (visit sick cousin) and watching television:

(Pic 1): *"When I was told my wee cousin Sarah Ann was sick I was very very sad"*. (Pic 2 something happened): *"I was going to see her in Scotland"*.

(Pic 1): *"I was sad when I was getting a needle"*. (Pic 2 watch tv): *"I watched a movie"*.

The results from the Draw and Write analyses indicate the range of coping strategies that the children used at pre- and post-intervention. At pre-intervention the children in the intervention and control groups used the strategy of 'play' most frequently. In addition, several passive coping strategies such as feeling better as a result of (i) going somewhere (ii) getting something and (iii) something happening (distraction) were used by both groups. At post-intervention there was a change in the type of coping strategies used by the intervention group in relation to particular problem situations (death, feeling

alone, absent relative). Several children in the intervention group attempted to address the problem situation by, for example, talking to others, making or doing something to feel better, saying sorry, finding someone to play with when feeling alone. While children in the control group also used problem focused coping strategies at pre- and post-intervention, there was a notable increase in the number of problem focused coping strategies used by the intervention group at post-intervention. These results would suggest that children of this age have a wide repertoire of coping skills, however, the children that received the programme were more likely, post-intervention, to use problem focused coping strategies such as addressing the problem by talking to someone, asking a child to play with them when they feel alone, saying sorry, making a card for somebody who is sick, looking at photos to remind them of a loved one etc.

Children's Coping Skills: Participatory Workshops

This section presents the key findings from the children's participatory workshops. These workshops were conducted at the interim (June '08) and post-intervention (April-May '09). A sample of children from the eight intervention classes (N=130) and four control classes (N=68) took part in the Feelings Activity and the Vignette Problem Solving Activity.

Recognition of Feelings Activity

For this activity, the researcher read one sentence about something that happened to a child and the intervention and control children were asked how the child might have felt. The researcher read out six different scenarios and the children were invited to respond to each scenario (see Appendix A for copy of instructions). The scenarios included:

- i. Tom was pushed in the school yard.
- ii. Michael is going to Spain for three weeks.
- iii. Gráinne forgot to do her spellings and she had a spellings test the following day.
- iv. Sharon said nobody would play with her in yard.
- v. Paul's brother took his computer game from him and would not give it back.
- vi. Ronan's sister got a new bike but Ronan didn't get anything.

An analysis of the types of responses that children in the intervention and control group made at the interim and post-intervention was carried out. The following is a summary of the main findings from the Recognition of Feelings Activity

Types of Responses

Both intervention and control groups identified feelings such as being angry, sad, lonely and worried for different scenarios. At the interim and post-intervention the intervention group were more likely than the control group to use several different feeling words for 'worried' and 'mad'. Examples include: "Scared", "Worried", "Nervous", "Afraid", "Angry", "Cross", "Mad", "Annoyed". Post-intervention, it is apparent that the intervention group had a more elaborate and wider vocabulary for articulating feelings. The intervention group were more likely than the control group to mention feelings like "Terrified", "Embarrassed", "Disappointed", "Nervous", "Proud", "Shocked". The children in the control group on the other hand were more likely to (i) repeat the same feeling that another child in the group had just said and (ii) add the word 'very' to exaggerate the point. For example, in response to the question "How

did Ronan feel when his sister got a new bike and he didn't?", one child said "Very sad" and another child said "Very very very sad". When asked about how Michael felt when he was told he was going to Spain for three weeks, the children in one control school responded: "Excited", "Very very very happy", "Really happy", "Very very excited" "Very excited". For some questions, several children in the control group were unable to articulate a feeling but instead used another word. In relation to the question about how Paul felt when his brother took his computer game, some of the control group's responses included: "Sad like a cry baby", "Crazy", "He's going to punch him", "Fierce". When asked about how Ronan felt some of the children in the control groups said: "He's crying", "That's not fair" "Stupid", "Fierce".

Explaining feelings

At post-intervention, there was an increase in the number of children in the intervention group that gave reasons as to why the person was feeling this way. For example, at the interim a child in the intervention group explained why Gráinne was feeling sad "... because teacher was giving out to her". Two children in the control group explained why she was scared. At post-intervention, however, several children in the intervention group gave reasons. Examples of children's responses post-intervention include:

- "She might have felt frightened because she didn't know what to do"
- "She might be really worried because she might be in trouble"
- "She might be scared that her teacher might be cross with her"
- "Sad because she might get into trouble"
- "She might be scared in case her teacher scolds her"

This is in contrast to the children in the control group who did not give any reasons for their answers.

Possible solutions

In addition to giving reasons for the feelings, at post-intervention the children in the intervention group explained what the child could do to make the situation better. In relation to the scenario about Paul's brother taking his computer game, at post-intervention a child in the intervention group suggested: "He could say to him that he paid a lot of money for the PS (computer game) and he wants it back cause it's not his". Several intervention children made suggestions about what Ronan could do to make himself feel better after his sister got a new bike. The suggestions included:

- "He could say 'I feel upset because you didn't get me a bike and you got my sister a bike, I'm not ungrateful but it's just you didn't get me a bike, could I please have a bike'"
- "He could save up for one"
- "He could write a letter to Santa"
- "He could go and ask his Mum if he could have a bike"

Also, children in the intervention group gave suggestions regarding what Tom should do if he is pushed in the yard. Responses included:

- "He might have felt terrible, he should have told the teacher"
- "He might have talked to his friends".
- "He feels that he's very upset and he wants to do something that will make him feel better".

The children in the control group did not make any suggestion about what the children could do to feel better.

The results from the Feelings Activity indicate that post-intervention the children in the intervention group had a wider, more elaborate vocabulary of feeling words. The children in the control group were more likely to repeat the same feelings and use the word 'very' to emphasise the significance of the feeling. In addition, at post-intervention, the children in the intervention group were more likely than the control group to explain their feelings and to give possible solutions to the problems depicted in the vignettes.

Vignette Problem-solving Activity

The researcher read two vignettes (copies and instructions in Appendix A) to the children in the intervention and control group about two separate children and a problem they experienced. In the first scenario Louise's colouring pencils were taken by another girl in her class and in the second story Ryan was not allowed to go to his friend's house because he did not tidy his room. The children were asked a set of questions about the vignettes: (i) *How did the person feel?* (ii) *What could they do?* (iii) *If you were their friend what would you do to help them?* Post-intervention, similar vignettes were read out to the children, slight modifications were made so that the children wouldn't remember the story. For the first story, Louise's basketball was taken by another girl in class and for the second story Ryan was not allowed to go to his friend's birthday party because he got a note home from the teacher to say he was not doing his work properly in class. A comparison between the intervention and control groups' interim and post-intervention responses was carried out and the following section outlines the main findings from the vignettes activity.

How the children felt

In terms of how the characters felt, the intervention and control children used feelings such as "sad", "angry/annoyed", "upset", "unhappy", "scared" at the interim. At post-intervention the intervention group used other feelings such as "lonely", "embarrassed" "confused". The control group used feeling words such as "unhappy", "disappointed", "grumpy", "huffy", "bored". Similar to the Feelings Activity, the control children were more likely than the intervention children to repeat what other children had previously said. In relation to how Louise was feeling some of the control children's comments at the interim included: "sad", "very very very sad", "very very very sad", "very mad" "she was crying", "very very angry", "she wanted them (the colouring pencils) back". The word 'very' was used less frequently post-intervention. The children in the intervention group were more likely to explain why the characters felt a certain way. At post-intervention only children in the intervention group explained why Louise was feeling sad/angry. Examples include: "Sad that she didn't have her ball anymore", "Worried cause she mightn't get her ball back", "Very confused because her ball just disappeared".

What the children could do

The children in the control and intervention groups were asked about what the two characters could do to make the situation better. There is a notable increase in the types of suggestions made by the children in the intervention group at post-intervention. Regarding Louise and her problem at school, at the interim, the most frequent suggestion made by the children in the intervention group was telling the teacher. Other suggestions included asking if the pencils belong to her, taking the pencils off her, or asking for them back. At post-intervention however, the children gave a range of additional suggestions such as:

– "She might ask them if they would like to play together"

- *“She could ask her where did she get the ball”*
- *“She could go home and talk to her Mum or Dad”*
- *“She could ask a friend to help her get the basketball back”*
- *“Tell the principal”*
- *“Wait till she is ready”.*

There was very little change in the control group’s responses between the interim and post-intervention. At both stages the control children suggested asking for it back, telling the teacher, asking would they like to play together. Only children in the control group suggested using aggressive behaviour to get the ball back: *“Punch him”*; *“She could get mad”*. Another child in the control group suggested: *“Don’t be her friend”*.

Similar to the children’s responses to the first vignette situation, there was a significant increase in the number and variety of suggestions that the intervention children made in relation to what Ryan could do to feel better post-intervention. There was little change in the control group’s suggestions between the interim and post-intervention. At the interim the control group suggested Ryan should:

- *“Clean up his room”*
- *“Jump out the window”*
- *“Tidy his room first and then ask his Dad if he could go to his friends house”*
- *“Run away”.*

At post-intervention, the control group’s most frequent suggestions included: *“Try to sneak out”*, or *“Tidy the house up”* Some children suggested he could play and *“Try to forget about it”*. Others children in the control group suggested: *“He could punch his Daddy”*.

At the interim, the intervention group gave similar suggestions to the control group:

- *“He needs to clean his room”*
- *“He might ask can he go when his room is tidy”*
- *“He could make his Dad tea”*
- *“He should say I’m sorry I didn’t tidy my room”*
- *“He could have crept out of his house but his Mum might catch him”.*

At post-intervention, however, the intervention group came up with a variety of additional coping strategies:

- *“Clean the house”*
- *“He could do something for his Dad”*
- *“He could draw some pictures or he could play with his toys or ask his Dad if he wanted to go to the park”*
- *“He might try better at school”*
- *“Say sorry to his Dad”*
- *“Write a forgiveness card”*
- *“Stop, take a deep breath, count to ten and think about a solution”*
- *“Sit on his bed and calm down”*
- *“Have a nap”*

- *“Listen to music”*
- *“Go up to his room and think about what he should do”*
- *“He could do something on his own”.*

The children were also asked an additional question about Louise’s problem at school: *“If you were Louise’s friend what would you do to help Louise?”*. There was little difference between the intervention and control groups’ responses to this question at the interim and post-intervention. At post-intervention all three groups gave more suggestions about what they would do if they were Louise’s friend. Suggestions included:

- *“Go over and ask her for the ball back cause it’s Louise’s ball”*
- *“Tell the teacher”*
- *“We could go to the principal and the principal could sort it out” (intervention group only)*
- *“If I was her best friend I would say ‘Will we just play something else instead of basketball?’”*
- *“Play together in one big group”.*

Overall, the results from the vignettes seem to echo the positive findings from the Feelings Activity in that the intervention group appeared to have a wider vocabulary of feeling words post-intervention than the control group. In addition, the intervention group also appeared to have a wider repertoire of coping strategies at post-intervention when compared with the control group. There was an increase in the types of suggestions made by the intervention groups in relation to the vignette characters and what they could do to feel better / improve the situation.

Section 2: Implementation of the Programme

This section will outline the main findings regarding the implementation of the programme. The results from Programme Fidelity will be presented followed by the teachers’ comments about the modules and ratings of each session. In addition, this section will outline the children’s and teachers’ views about the programme. Finally, this section will present the findings on the implementation of Zippy’s Friends in the context of the SPHE curriculum (SPHE Questionnaire) and also in context of the school ethos and environment (Ethos Questionnaire).

Programme Fidelity

As part of the overall evaluation of the programme it was necessary to determine the level of programme fidelity (i.e. the extent to which the programme was implemented as intended) and to assess the impact that this had on the success of the programme in individual schools. Programme fidelity was assessed each week as part of the teachers’ weekly questionnaire. The teachers were given a list of all the programme activities that were supposed to be carried out each week and they were asked to indicate what parts of each session they implemented in full, partially implemented and did not implement. As stated previously, the teachers in Intervention Type I were asked to implement the programme as faithfully as possible and the teachers in Intervention Type II were told that they could use the programme as a resource (i.e. they were not required to implement every activity / session). It was anticipated that programme fidelity would be significantly higher among the teachers in Intervention Type I. Table 19 presents the mean number of activities that the teachers in Intervention Type I and II reported they had implemented in full, in part, and the number of activities they did

not implement. The final column shows the percentage of activities that the two intervention groups implemented in full, partially or not at all.

Table 19: Programme Fidelity: Mean number of activities fully implemented, partially implemented and not implemented.

	Implementation	N	Mean	SD	Mean %
Intervention Type I	Implemented in full	13	293.54	37.5	86.4%
	Partially implemented	13	20.92	14.7	7.2%
	Not implemented	13	24.54	17.3	6.2%
Intervention Type II	Implemented in full	14	287.14	34.8	86.6%
	Partially Implemented	14	23.86	15.5	6.2%
	Not implemented	14	20.43	24.2	7.2%

There is little difference in programme fidelity between the two intervention groups. Programme fidelity was high among both groups. The teachers in Intervention Type I (full implementation group) implemented 86.4% of the programme while the teachers that in Intervention Type II fully implemented 86.6% of the programme. 13.4% of the programme was either not implemented or partially implemented by both groups. Three schools (two from Intervention Type I and one from Intervention Type II) fully implemented 75% or less of the programme. This is in contrast to nine schools (five from Intervention Type I and four from Intervention Type II) that fully implemented 90% or more of the programme.

In terms of the 7% of the programme that was ‘partially implemented’, this was mostly concerned with two activities that were part of each session (i) *teacher gives an overview of the lesson* (at the start of the lesson) and (ii) *children described what they liked most and what they liked least about this session* (concluding part of the session). Other activities that were ‘partially implemented’ included acting out situations (role play) during the lesson.

Analyses of the activities that were not implemented revealed that this was mostly made up of four types of activities that were part of all/some of the lessons:

- i. “*Children completed the feedback sheets*”. On average seven out of the 36 teachers stated that the children did not complete the feedback sheets each week.
- ii. “*Teacher wrote children’s suggestions on the board*”. This was only a part of some sessions, however, a number of teachers did not complete this activity. In Module 2 Session 4, three teachers did not write the rules on the board, Module 4 Session 4, nine teachers did not write children’s problems on the board. Module 5 Session 2, seven teachers did not write children’s suggestions about how to feel better on the board.
- iii. “*Teacher put children’s drawings on the wall*”. A number of teachers did not implement this part of the lesson. In Module 5, Session 1, 15 teachers did not put the children’s drawings on the wall and in Module 6 Session 1, nine teachers did not put the children’s drawings on the wall.

- iv. Discussion after an activity – there appeared to be some inconsistency in implementing the ‘discussion’ after the children completed some activities e.g in Module 3 Session 2, five teachers did not implement the discussion of the role play about loneliness after the children took part in the role play. In Module 5 Session 1 and Session 4, seven teachers did not implement the discussion about the children’s drawings.

One activity in the programme was not implemented by the majority of teachers (22 teachers), this activity was part of the visit to the graveyard session “*Teacher showed children pictures of different burial rituals from other countries*”.

Teachers’ Weekly Reports on Programme Implementation

As part of the weekly questionnaires the teachers were asked to comment on the positive and negative aspects of each session.

Module 1: Feelings

Some of the positive comments about these sessions concerned (i) the resources/activities such as the drawing activity, use of the mystery box and the role plays and (ii) the way in which the children could relate to the issues being dealt with. A number of teachers mentioned the length of the lessons as a problem/difficulty. Some teachers said that the children were sitting in the circle for too long and as a result started to get agitated. One of the teachers said: “*Difficult for children to sit in circle at all times*”, “*A lot of discussion. All children wanted to dip into the mystery box and were sad they didn’t get a go*”. By the end of Module 1 a number of teachers stated that the children were “*getting better at participating*”.

Module 2: Communication

The lessons in Module 2 received similar feedback. The activities such as the role plays and the mystery box engaged the children. A number of teachers noted that teacher participation in the activities had a positive impact on the lessons: “*Children loved the games and seeing teacher participating in the role play*”. Another teacher said: “*Children love to see ‘teacher’ more relaxed during Zippy*”. In terms of difficulties with Module 2, the lack of activities and the difficulty retaining the children’s attention were mentioned repeatedly. A number of teachers noted that there was too much talking in these lessons and as a result the children seemed to get restless and distracted. In Module 2, Session 1, one of the teachers commented: “*Felt there was a lot of talking (by the teacher). Class weren’t all paying attention.*” In Modules 2 Session 3 a teacher wrote: “*I felt the children were not very enthusiastic about the topic*”.

Module 3: Making and Breaking Relationships

Module 3 received very positive feedback from the teachers. According to the teachers the topic was age appropriate and very relevant to the children’s lives. For the first session, one teacher wrote: “*Friendship is very important to the children and they understood the content very well*”. Another teacher wrote: “*Shy children becoming more confident. Children taking ownership. Child-centered learning*”. In Session 4 the majority of teachers again spoke about the relevance of the content to the children’s lives. One teacher said: “*Content was age appropriate – children could draw on their own experiences. They enjoyed the role play*”. In Session 2 a teacher commented on her own participation in the lesson: “*The children enjoyed my personal experiences of feeling lonely/rejected. They were very interested in this*”. The variety of activities that taught important skills in relation to conflict resolution was noted as a

positive aspect of Session 3: *“Very appropriate and relevant to children’s daily lives in and out of school. Useful skills”*. In addition, some teachers commented on the importance of displaying the children’s work on the wall after the lesson. In terms of difficulties with this module some teachers said that the children had difficulty with the role play in Session 2 and that *‘the children did not enjoy the discussion around being left out / lonely’*. With regard to the final session in this module (How to make friends), it was suggested that this module would have been most beneficial towards the start of the school year when new friendships are being formed.

Module 4: Conflict Resolution

The positive feedback the teachers gave about the 4th module was in relation to the relevance of the topic to the children’s lives and the honest open discussion the children had about their personal experiences as a result of the activities. One teacher wrote: *“All children discussed a time when they had a conflict and discussed solutions they picked before and recognised they didn’t always pick the right solution but knew what they would pick now”*. In Session 2 (Dealing with Loneliness and Rejection), the teachers said that the role play generated an open discussion around bullying. Some comments included: *“This lesson dealt with a heavy topic in a safe environment and in a fun way.”* *“The children were enthusiastic about talking and referring to instances when they were bullied”* and *“I found that really relating it to the children’s experiences spurs their enthusiasm”*. In Session 4 (How to Make Friends) the teachers said that the content was *“child friendly”* and that the children were able to identify with the role play scenarios: *“Class really responded well especially to absent fathers and could then apply the strategies to (a) feel better themselves and (b) help someone else feel better”*. One of the main difficulties with this module was the lack of activities in Session 1 and 3. A teacher wrote: *“There was a lot of discussion and very little activity – children were getting restless”*. Also, according to a number of teachers, the discussion about the meaning of bullying in Session 2 was problematic. Teachers wrote: *“Children confused the word ‘bullying’ as a time when someone may have said something nasty or did something to them once”* and *“Problem distinguishing between bullying and ‘once off’ incidents”*.

Module 5: Dealing with Change and Loss

In terms of the fifth module, the story, the variety of activities and the discussions about real changes and loss in the children’s lives were cited as the most positive aspects of the lessons. For Session 1 a teacher wrote: *“This was a fantastic lesson. Lots of different activities – story, drawing, discussion. The events going on in the children’s lives mirror the events of the lives of the children in the story”*. A number of teachers noted that the children were active throughout this module particularly in Sessions 1, 3 and 4. The teachers also commented on the discussions the children had with the teacher about death and loss: *“Encouraged open, guided discussion. Children were really interested in hearing about their peers’ experiences. Children were very curious about death and what happens to us when we die”* and *“Wonderfully practical and direct way to openly discuss a topic that is very close to all children”*. Some teachers mentioned that one or two children in their class were upset when they talked about death, however, the visit to the graveyard appeared to be successful across all schools. Some of the comments included:

- *“The visit to the graveyard – all the children were excited and eager to take part. A lot of discussion in the area of death and loss was stimulated”*
- *“One troubled boy spoke of his father’s heartbreak when his uncle (father’s brother) died and this was very moving”*
- *“It’s a wonderful lesson for stimulating discussion and opening up an area that may be viewed as ‘morbid’. It’s essential for children to openly talk about it in order to erase any worries they may have”*.

Module 6: We Cope

Once again the relevance of the issues dealt with in Module 6 was highlighted repeatedly. During Session 1 a number of children spoke openly about personal issues that they cannot change such as parental separation. One teacher commented: *“A high number of separated, single parent and new marriages within this class set-up and this was one of the first subjects brought up by the children”* Another teacher wrote: *“I think this session and those to follow will help the little girl whose parents have separated. This is an excellent programme”*. The activities in Session 3 (using the puppets) and Session 4 (making the crowns and receiving their certificates) were also referred to by the majority of teachers. A number of teachers mentioned the children’s sense of achievement and pride when they received their certificates: *“Children really enjoyed this session, they felt very important with their crowns on and getting their certs, they felt very proud”*. Another teacher wrote: *“They were very excited completing their crowns and receiving their certificates. I feel this experience will help them remember the content they covered in more detail and in a positive nature”*. In terms of difficulties with the final four sessions, several teachers said that some children did not engage with session 2. Some teachers found the session too long and the children became restless. One teacher wrote: *“I had a lot of children who seemed to not to want to take part in this lesson at all. It was as if they switched off”*. It was recommended that this session would include more activities. Similar comments were made for Session 3: *“There was a lot of repetition in this lesson. I felt they were a little bored until they made the puppets”*.

Overall, the teachers’ comments about each session reveal that the variety of activities and the relevance of the topics to the children’s daily lives were particularly important in terms of engaging the children. The programme seemed to facilitate honest open discussions about dealing with real life problems and this was most apparent in the latter modules. The teachers’ recommendations of the need for more activities in some sessions highlight the importance of child-centered activity based learning.

Teachers’ Ratings of Lessons

The mean scores for the lessons that received the lowest and the highest ratings in terms of (i) content appropriateness (ii) teachers’ enthusiasm for each session (iii) achievement of teachers’ aims for each session and (v) teachers’ understanding of how the pupils interacted with each session are presented in Table 20. It is clear that Module 5 Session 3 (The graveyard visit) was the most successful of all 24 sessions. It received the highest rating in all except one of the scales. Module 3 Session 1 (How to keep a friend), Module 3 Session 4 (How to make a friend), Module 6 Session 3 (Adapting to new situations) and Module 6 Session 4 (Celebrating together) also score highly across all scales. Looking at the lessons that received the lowest ratings, there is no lesson that scored consistently low.

Table 20: Mean Score for Teachers' Ratings of Sessions

	Rating 1 (Max Mean)	Rating 2 (Mean)	Rating 3 (Mean)	Rating 24 (Min Mean)
Content appropriate for age	M5 S3 (4.75)	M3 S1 (4.72)	M3, S4 (4.71)	M1 S4 (4.03)
Feel enthusiastic about lesson	M5 S3 (4.7)	M3 S1 (4.57)	M3 S4 (4.42)	M6 S2 (3.84)
Achieved what I aimed to do	M5 S3 (4.55)	M6 S3 (4.46)	M3 S4 (4.42)	M2 S1 (3.87)
Pupils enjoyed session	M5 S3 (4.8)	M3 S1 (4.77)	M6 S4 (4.73)	M5 S2 (3.93)
Pupils understood content	M3 S4 (4.58)	M6 S3 (4.54)	M6 S4 (4.53)	M4 S3 (3.93)
Pupils worked well together	M5 S3 (4.7)	M6 S3 (4.62)	M6 S4 (4.5)	M3 S2 (3.83)
Pupils displayed enthusiasm for lesson	M5 S3 (4.85)	M3 S1 (4.8)	M3 S4 (4.58)	M2 S4 (3.94)

Overall Programme Rating

The teachers were asked to give each session an overall rating of between 1 and 10 (1 being poor and 10 being excellent). Table 21 shows the overall mean score for each session. All the sessions received an overall mean of 7.3 or higher. Module 5 Session 3 (The graveyard visit) received the highest overall rating (M=9.16). This was followed by Module 6 Session 4 (We celebrate together) and Module 3 Session 4 (How to make friends). These findings are consistent with the programme's ratings in Table 20 (content appropriateness, teachers' enthusiasm for the sessions and pupils interaction with the lesson). Module 3 Session 2 (How to resolve conflicts with friends) received the lowest overall rating (M=7.38). This session also received the lowest rating in terms of how well the pupils worked together.

Table 21: Teachers' overall ratings for each session

Overall rating of the session			
Session	N	Mean	SD
Module 1 Session 1: Feeling sad, feeling happy	33	7.88	1.47
Module 1 Session 2: Feeling angry or annoyed	34	7.44	1.59
Module 1 Session 3: Feeling jealous	34	7.79	1.49
Module 1 Session 4: Feeling nervous	31	7.65	1.78
Module 2 Session 1: Improving communication	30	7.63	1.22
Module 2 Session 2: Listening	29	8.14	1.34
Module 2 Session 3: Who can help us?	30	7.63	1.47
Module 2 Session 4: Saying what you want to say	30	7.50	1.7
Module 3 Session 1: How to keep a friend	29	8.62	1.05
Module 3 Session 2: Dealing with loneliness and rejection	29	7.38	1.61
Module 3 Session 3: How to resolve conflicts with friends	25	7.96	1.77
Module 3 Session 4: How to make friends	24	8.83	.82
Module 4 Session 1: How to recognise good solutions	26	7.46	1.07
Module 4 Session 2: Bullying	27	8.22	1.28
Module 4 Session 3: Solving problems	23	7.83	1.59
Module 4 Session 4: Helping others resolve conflicts	24	8.38	1.1
Module 5 Session 1: Change and loss are part of life	26	8.27	1.25
Module 5 Session 2: Coping with death	27	8.22	1.58
Module 5 Session 3: Visit to a graveyard	19	9.16	.96
Module 5 Session 4: Learning from change and loss	24	7.71	1.46
Module 6 Session 1: Different ways to cope	26	7.69	1.35
Module 6 Session 2: How to help others	24	7.79	1.77
Module 6 Session 3: Adapting to new situations	26	8.42	1.17
Module 6 Session 4: Celebrating together	26	8.85	1.08

Most Successful Modules

When the lessons were grouped together and the ratings were analysed according to the modules (Tables 22-25), a clear pattern emerged in terms of the modules that scored consistently high across the ratings. Module 5 (Dealing with change and loss) received the highest overall rating ($M=8.57$) and the highest rating for content appropriateness ($M=4.55$). Module 3 (Making and breaking relationships) received the highest rating for pupils' enjoyment of the sessions ($M=4.43$) and pupils' understanding of the content ($M=4.45$). Module 1 (Feelings) received the lowest overall rating ($M=7.65$), and the lowest ratings for pupils' enjoyment of the sessions ($M=4.16$) and pupils' understanding of the content ($M=4.06$). Module 2 (Communication) received the lowest rating for overall content appropriateness ($M=4.23$).

Table 22: Teachers' Overall Programme Ratings

	Mean	SD
Module 5: Dealing with change and loss	8.57	1.31
Module 3: Making and breaking relationships	8.33	1.31
Module 6: We Cope	8.2	1.34
Module 4: Conflict Resolution	8.13	1.25
Module 2: Communication	7.79	1.42
Module 1: Feelings	7.65	1.54

Table 23: Appropriateness of Content

	Mean	SD
Module 5: Dealing with change and loss	4.55	.74
Module 3: Making and breaking relationships	4.53	.59
Module 6: We Cope	4.5	.59
Module 4: Conflict Resolution	4.45	.67
Module 1: Feelings	4.44	.65
Module 2: Communication	4.23	.80

Table 24: Pupils' Enjoyment of Sessions

	Mean	SD
Module 3: Making and breaking relationships	4.43	.62
Module 6: We Cope	4.37	.63
Module 5: Dealing with change and loss	4.36	.68
Module 2: Communication	4.25	.70
Module 4: Conflict Resolution	4.22	.74
Module 1: Feelings	4.16	.74

Table 25: Pupils' Understanding of Content

	Mean	SD
Module 3: Making and breaking relationships	4.45	.59
Module 5: Dealing with change and loss	4.38	.63
Module 6: We Cope	4.3	.64
Module 4: Conflict Resolution	4.27	.69
Module 2: Communication	4.16	.70
Module 1: Feelings	4.06	.73

Perceived Strengths and Weaknesses about the Programme: Children's Comments during Participatory Workshops

As part of the end of programme child participatory workshops, the children in the intervention group (N=130) were asked for their opinions about the programme. In groups the children brainstormed (i) what they thought the programme was about, (ii) what they liked and disliked about the programme and (iii) what kind of things the programme had taught them.

What is Zippy's Friends all about?

The children's responses to this question were analysed and grouped into key themes. Table 26 presents the key themes in order of frequency.

Table 26: Most frequent responses to the question "What is Zippy's Friends all about?"

Themes
Being nice/kind to others
Friendship
Coping with things/solving your problems
Helping others
Not fighting/bullying
Feelings

Being nice/kind to others

The most frequently reported response related to the theme of 'being nice / kind to others'. The children comments included:

- "Being kind"
- "Sharing with each other"
- "Caring"
- "Being nice to each other"
- "Being friendly"
- "About being nice"
- "Respecting others"
- "Be nice to other people".

Friendship

Several children across all schools referred to the theme of friendship. Children said that the programme was about how to make friends, taking care of your friends and how to keep your friends. Some of the children's responses included:

- "Make new friends"
- "Friendship and making friends"
- "Taking care of your friends"
- "It's about friends, like how to make new friends and how to keep your friends"
- "Playing fairly with each other"
- "Making friends with people"
- "We're friends"
- "Play with each other"
- "Don't leave anyone out of the game"
- "Be nice to friends"
- "Playing nicely with one another"
- "Great friends".

Coping with things / solving your problems

A number of children said that Zippy's Friends is about learning how to cope with things and that it helps you to solve your problems. Some children gave examples of the kind of things they learned to cope with and how to cope:

- *"Coping with things like death, when pets die, moving house"*
- *"Calming down"*
- *"Learning what to do"*
- *"Thinking what to do"*
- *"Coping with things"*
- *"Talking about when you feel grumpy"*
- *"Coming up with solutions"*
- *"Coping if your dog died"*
- *"Coping with people like if they took something"*
- *"Always talk to each other if someone dies"*
- *"Learning to cope with something"*
- *"Solving problems"*
- *"Tells you how to cope with things"*
- *"Don't bottle it up"*
- *"Fix your problems"*
- *"Solutions".*

Helping others

The theme of 'helping others' was mentioned by several children in some of the schools. The children's comments included:

- *"About helping others"*
- *"How to help someone"*
- *"Helping each other"*
- *"Helping people"*
- *"If someone is lonely like Tommy, help them"*
- *"Talk to each other when someone is sad"*
- *"How to cheer people up"*
- *"Helping people who feel left out".*

Not fighting / bullying

Some children said the programme was about learning not to fight/punch or bullying others. Several of the responses in relation to this theme were concerned with bullying while others were concerned with not using aggressive behaviour towards each other. Some of the children's responses included:

- *"Don't punch"*
- *"No fighting"*

- “Not to be a bully”
- “Don’t bully our friends”
- “Stop being a bully”
- “Don’t say nasty things”.

Feelings

A number of children said the programme was about feelings. The feelings of jealousy, happiness and sadness were mentioned by several children. Other children explained that the programme was about learning about your feelings. Some of the children’s responses included:

- “Feelings”
- “Feelings, jealousy”
- “Jealousy”
- “Learning about your feelings”
- “Being sad, being happy”
- “Feelings, happiness”
- “Feelings – tell people about how you feel – Zippy helps you do this”
- “About happiness and sadness and how to make yourself better”.

What do you like about Zippy’s Friends?

Table 27 shows the children’s most frequent responses to the question “*What do you like about Zippy’s Friends?*”. The two most frequent responses in relation to what the children liked about the programme were the stories and the activities. In terms of the stories, some children just stated they liked the stories, others said they liked the characters. Some children explained parts of the stories that they particularly liked: “*When Jill and her friends helped Tommy*”, “*When they got Apple to cheer Tig up*”, “*When they made friends*”, “*When they met a new friend called Tommy*”. It is interesting that all of the events that the children recalled from the stories were positive solutions to the characters problems. The children also said that they liked the pictures that accompanied the stories: “*I liked looking at the pictures*”.

Several activities were highlighted by the children as being particularly enjoyable. The most frequently cited activities were using the mystery box and taking part in the role plays, making the puppets, drawing pictures and making the crowns. A number of children said they liked talking in the circle and sharing their experiences with the group: “*I liked when we had to share our feelings*”, “*Talking about my problems*”, “*I liked talking about helping each other*” and “*Talking and sitting in the circle*”. Some children said that they liked solving their own problems and helping others. Some of the responses included: “*Liked how to fix your problems, finding solutions, it helped*”, “*Solving problems*”, “*Helping each other*” and “*Forgiving friends when they do something to you*”. Making new friends as a result of the programme was another aspect of the programme that the children liked. One child said: “*You got to make new friends*” and another said: “*You got to learn about making friends*”. Other aspects of the programme that the children liked included sitting in the circle, learning new things and having fun.

Table 27: Most frequent responses to “What do you like about Zippy’s Friends?”

Themes:
Stories / Pictures / Characters
Activities
Talking
Helping themselves and others
Making friends

What do you not like about the programme?

Table 28 shows the key themes in relation to what the children did not like about the programme. Certain events in the stories were disliked the most by the children. The events that the children referred to were problem situations encountered by characters in the stories. Two specific events from the stories were mentioned repeatedly: “When Tommy’s Mom and Dad were fighting” and “When Sandy got bullied”. Other responses in relation to events in the stories that the children disliked included: “When Sally had to move to her Dad’s house for the weekend”, “When Tig was crying”, “I didn’t like when people got bullied”, “I didn’t like bits when they got hurt”.

Several children also referred to Zippy’s death as an aspect of the programme that they did not like: “When Zippy died”. Some children said they did not like talking about death or talking about unhappy feelings “Talking about when people die because it made me sad”, “It made me sad when we talked about sad feelings”. Two children said they didn’t like the graveyard visit because it was sad. Two other children said they were “Sitting in a circle for too long”. Other issues mentioned by the children related to time. One said the programme lasted a long time. Another child said that they didn’t get enough time to do the sessions. One child said that they didn’t like it “when you didn’t get a go at the mystery box”.

Table 28: Most frequent responses to “What do you not like about Zippy’s Friends?”

Themes:
Events in the stories
Zippy dying
Talking about death
Talking about unhappy feelings

What have you learned from Zippy’s Friends?

In groups the children brainstormed what Zippy’s Friends had taught them over the past 12 months. The children’s responses were placed on the wall and the children were asked to identify the two most important things that they learned as a result of the Zippy’s Friends programme. Each child voted using two post-its. The children’s responses were grouped into themes. The total number of votes for each theme is shown in the Table 29.

Table 29: Voting Results to the question “*What have you learned from Zippy’s Friends?*”

Themes:	Number of votes	Percentage of Votes (%)
Be nice/kind to others	64	25.8
How to cope with difficult situations	52	21.0
Friendship	44	17.8
Non aggressive behaviour	40	16.1
Feelings	28	11.3
Manners	10	4.0
Listen	05	2.0
Tell truth	05	2.0

The theme of learning to be nice/kind to others received the most number of votes. Responses included:

- “*Let people play with you*”
- “*Don’t leave anyone out*”
- “*Share things*”
- “*Don’t be bad*”
- “*Don’t say nasty things*”
- “*Think of nice things to say*”
- “*Always be nice to each other*”.

Learning to cope with difficult situations was also highly rated by the children. For several children learning how to cope with people leaving, how to deal with bullying and how to calm down were the most important things that they learned. Within this theme several responses related to talking to someone when experiencing difficult situations. Examples include:

- “*Tell teacher or talk to an adult if you are being bullied.*”
- “*Always talk to someone if someone dies*”
- “*Always talk to each other*”
- “*If somebody makes you cry tell a grown up*”
- “*Tell your feelings*”
- “*If someone makes you sad you have to tell them why you’re feeling sad*”

The theme of friendship received just over 17% of the votes. Learning how to make friends, how to keep your friends and how to help your friends were regarded as the most important thing learned by several children. Some of the children’s responses included:

- “*No hurting your friend’s feelings*”
- “*Friendship and being good*”
- “*You can be friends with anyone if you just try*”
- “*How to keep your friends*”
- “*Like your friends for who they are*”
- “*I learned that being friends is much easier than being mean*”.

The fourth most important theme “non aggressive behaviour” included statements such as:

- “*Learned not to lost my temper*”,
- “*Don’t bully anyone*”,
- “*Don’t hit people*”
- “*Don’t be fighting with people*”.

Learning about feelings received just over 11% of the votes. Statements included:

- “*Taught us about our feelings*”
- “*Learned about jealousy*”
- “*Don’t feel sad when someone dies*”.
- “*You can transform your feelings, if you’re feeling sad you can transform it to feeling happy*”.

Themes such as learning good manners, learning about death, learning how to listen and to tell the truth received a small percentage of the votes. Overall, the results from the children’s brainstorming activity indicate that the children recalled the main learning objectives from the six modules: feelings, communication, friendship, conflict resolution, and coping with change and loss. Learning how to be kind to others and how to cope with difficult situations appear to have the greatest impact on the children from their own perspective.

Perceived Strengths and Weaknesses about the Programme: Teachers’ Review Questionnaire

As part of the End of Programme Review questionnaire the teachers were asked to complete some background information about themselves. Table 30 presents information on the teachers gender. Out of the 24 intervention teachers that completed the review questionnaire, one teacher was male. There was an even split between the number of teachers in Intervention Type I (full implementation) and Type II group (use of the programme as a resource); 13 teachers were in intervention Type I and 11 teachers were in intervention Type II.

Table 30: Number and Gender of Teachers in Intervention Groups

	N (%)	Male (%)	Female (%)
Intervention Type I	13 (54.2%)	1 (7.7%)	12 (92.3%)
Intervention Type II	11 (45.8%)	0 (0%)	11 (100%)

The teachers were asked about their number of years teaching experience (Table 31). Over 60% of the teachers had between 2 and 10 years teaching experience. One quarter of all the teachers had taught for 15+ years.

Table 31: Number of years teaching

	N	1 st year teaching	2-5 years	6-10 years	10-14 years	15+ years
No. of teachers	24	0	8 (33.3%)	7 (29.2%)	3 (12.5%)	6 (25%)

The teachers were also asked to indicate if they had taught the first half of the programme and if they

had taught the three revision sessions for Module 1, 2 and 3 before commencing the second half of the programme (Table 32). 50% of the teachers (N=12) taught the first half of the programme and just over 70% of the teachers (N=17) taught the three revisions sessions in full. Five teachers said they did not teach the revision lessons before starting the second half of the programme.

Table 32: Number of teachers that taught first half of the programme and taught revision lessons

		N	%
Taught first half of the programme	Yes	12	50%
	No	12	50%
Taught revision lessons	Yes	17	70.8%
	In Part	2	8.3%
	No	5	20.8%

Overall Experience of the Programme

The teachers were asked to rate their experience of teaching Zippy’s Friends on a scale of 1-10 (1 being poor and 10 being excellent). Table 33 provides the mean overall score for the teachers in Intervention Type I and Type II. The teachers gave the programme a mean overall rating of 8.75. Teachers in Intervention Type II group gave it a slightly but not significantly higher rating M=8.9.

Table 33: Overall Experience Mean Score

	N	Mean	Standard Deviation
Intervention Type I	13	8.6	1.5
Intervention Type II	11	8.9	.94
Total	24	8.75	1.2

A comparison between the teachers who taught the entire programme and the teachers who taught the second half of the programme only revealed that the teachers who taught the entire programme gave the programme a slightly higher rating (M=8.92, SD =1.5) than the teachers who taught the second half of the programme (M=8.58, SD=1.5). In addition, the teachers who taught the three revision lessons before starting the second half of the programme also gave the programme a higher overall score (M=8.82, SD=.95) than the teachers who did not teach the revision lessons (M=8.0, SD =2.0).

An analysis of the impact of the number of years teaching on the teachers’ experience of the programme was also carried out. Table 34 shows the mean overall score for the teachers with 2-5, 6-10, 10-14 and 15+ years teaching experience. It is interesting to note that the teachers who taught for 15 or more years rated their experience of teaching the Zippy’s Friends programme significantly higher (M=9.5, SD=.84) than the overall mean (M=8.75, SD=1.3). The teachers with 2-5 years teaching experience also rated their experience of teaching the programme higher than the overall mean. (M=8.88, SD=.64). The teachers with 11-14 years of teaching experience gave the programme the lowest mean rating (M=8.0, SD=1.0), however, this is still a high overall rating.

Table 34: Number of years teaching experience and mean ratings of experience teaching the Zippy’s Friends programme

	N	Mean	SD
2-5 years	8	8.88	.64
6-10 years	7	8.29	1.9
11-14 years	3	8.00	1.0
15+ years	6	9.50	.84
Total	24	8.75	1.3

The teachers were asked to comment on their experience of teaching the programme. A number of teachers said that the programme was well structured with good resources. Some teachers referred to the children’s enjoyment of the programme and also the improvement in their confidence as a result of the programme. One teacher said: “*Changes in children by the end of the programme are already evident*”. Two teachers made comments about what the programme meant to them:

- “*An emotional wellbeing programme is badly needed in today’s Ireland. Zippy’s Friends is a well set out, structured programme which is both teacher and child friendly. I thoroughly enjoyed teaching it*”.
- “*It is an excellent programme and should be introduced to all teachers. Both pupils and myself gained a lot from this programme*”.

Effect of the programme on the children

The teachers were asked to what extent they agreed or disagreed with a number of statements about changes that occurred in the children as a result of the programme. The negatively worded statements were recoded into positively worded statements and the results from all of the statements were collapsed into three groups (i) strongly agree/agree (ii) unsure and (iii) disagree/strongly disagree with the statement. Table 35 shows the number of teachers out of a total of 24 that strongly agreed/agreed with the statements. 95% of the teachers said that the children’s relationship with each other improved. Over 90% of the teachers strongly agreed/agreed that the children’s (i) ability to manage their feelings (ii) verbal communication skills (iii) ability to cope with difficult situations and (vi) social skills had improved as a result of the programme. An improvement in the children’s behaviour received the lowest scoring with 83% of the teachers strongly agreed/agreed that there was an improvement as a result of the programme. Three teachers strongly disagreed/disagreed with this statement.

Table 35: Number of teachers (out of 24) *strongly agree* / *agree* with statements about changes in the children as a result of the programme

	N (%)		
	Strongly agree/ agree	Unsure	Strongly Disagree / Disagree
Ability to manage feelings improved	22 (91.7%)	2 (8.3%)	0
More respectful	21 (87.5%)	1(4.2%)	2 (8.3%)
Problem solving skills improved	21 (87.5%)	2 (8.3%)	1 (4.2%)
Verbal communication improved	22 (91.7%)	2 (8.3%)	0
Antisocial behaviour improved	20 (83.3%)	1 (4.2%)	3 (12.5%)
Ability to cope with difficult situations	22 (91.7%)	2 (8.3%)	0
Social skills improved	22 (91.7%)	2 (8.3%)	0
Listening skills improved	21 (87.5%)	3 (12.5%)	0
Relationship with each other improved	23 (95.8%)	1 (4.2%)	0

Perceived effects of the programme on the teacher

The teachers were asked to rate on a scale of 1-5 (1 being not at all and 5 being very much so) how much the programme affected them in terms of their relationship with the children, their overall teaching, and their ability to help them emotionally. They were also asked how much they and the children enjoyed the programme. The results from these questions are shown in the Table 36. The statement “*The children enjoyed Zippy’s Friends*” received the highest mean score (M=4.71, SD=.75). This was followed by the statement “*The programme has given me a structure to help the children to cope with difficult situations*” (M=4.54, SD=.66) and “*I enjoyed teaching Zippy’s Friends*” (M=4.5, SD=.66). The statement “*I feel that my teaching has improved as a result of teaching the programme*” received the lowest overall rating (M=3.91, SD=.85).

Table 36: Mean teacher ratings on perceived effects of the programme

	N	Mean	SD
More aware of children’s feelings	24	4.33	.76
Relationship with the children has changed	24	4.17	.87
More aware of listening to the children	24	4.17	1.1
Programme has made a difference to the atmosphere in the classroom	24	3.92	1.1
Programme has given me a structure to help the children cope with difficulties	24	4.54	.66
Enjoyed teaching Zippy’s Friends	24	4.5	.66
Children enjoyed Zippy’s Friends	24	4.71	.75
Teaching has improved as a result of teaching the programme	23	3.91	.85

Effects of the programme transferred outside the classroom

Of the 24 teachers that completed the questionnaire 21 teachers (87.5%) said that the programmes effects had transferred outside the classroom.

Table 37: Have the effects of the programme transferred outside the classroom?

	N	%
Yes	21	87.5
No	3	12.5

Effects of the programme in the home

When asked if they had heard from a parent or sibling about the effects of the programme at home, eight teachers (35%) said they had heard of the positive effects of the programme in the home environment.

Table 38: Have you heard if the programmes effects are evident at home?

	N	%
Yes	8	34.8
No	15	65.2

Effect of programme on academic achievement

Seventeen teachers (77.3%) said that the programme had a positive effect on the children's academic achievement. These teachers commented on the effect the programme had in three main areas which in turn positively affected their academic achievement:

- i. The majority of teachers said that the programme enhanced the children's self confidence: *"It builds their self confidence and improves relationships with peers. It equips them with tools to overcome difficult situations, therefore has a positive influence on their academic achievement", "Confidence has helped them achieve more and they are not afraid to attempt something whereas before they may not have", "Pupils are more confident to request help and let me know if work is difficult so this obviously leads to better understanding"*.
- ii. A number of teachers noted an improvement in the children's oral language and communication and listening skills. One teacher wrote: *"The quieter children are more confident when we are doing oral discussions and activities in the class. They aren't afraid to speak out. It has helped their listening skills especially towards one another and not just the teacher"*. Another teacher wrote: *"I have noticed an improvement in oral language – expression, opinions, feelings, discussing topics in other curriculum areas"*.
- iii. Some teachers also noted that the children were better able to recognise and articulate their feelings and that this in turn helped them academically: *"Encouraged children to focus on their work and to control their emotions, in my class in particular we would experience a lot of tantrums so Zippy encourages them to stop and relax"*.

Table 39: Do you think the Zippy’s programme has an effect on the children’s academic achievement?

	N	%
Yes	17	77.3
No	5	22.7

Use of Zippy’s Friends strategies in other areas of teaching

With regard use of the strategies being used in other areas of teaching, 19 out of the 24 teachers (79.2%) said that they use the Zippy’s strategies. Five teachers said they do not use the strategies in other areas of teaching.

Table 40: Do you use Zippy’s strategies in other areas of teaching?

	N	%
Yes	19	79.2
No	5	20.8

Recommended changes to the programme

Four main changes were recommended by the teachers in order to improve the programme in the Irish setting (Table 41). A number of teachers stated the need for additional hands-on activities. Some teachers suggested shortening the lessons. In addition, it was suggested that the programme would be run over one academic year and that a follow up programme would be taught in the senior end of the primary school. One teacher wrote: *“I think it would be a fantastic idea if a programme for the senior end classes was compiled also. In order for the Zippy’s Friends programme to be successful I believe that it needs continuity”*. Two teachers emphasised the need for a whole school approach: *“Will work best if taken on as a whole school approach with everyone being aware of the strategies”*, *“To have a programme that runs through the whole school so there would be a young lead-in or introduction to the programme and then at the other end of the spectrum they would have other challenges as they approach puberty”*. One teacher recommended the use of letters to inform parents about what was being taught in the individual modules.

Table 41: Recommended changes (N=23)

	N
Hands-on activities	5
Implement over one year	4
Whole school Approach	3
Shorten the lessons	3
Letter to inform parents	1

Of the 24 teachers that completed the questionnaire, 23 teachers said that they would teach the programme again. Some of the comments included: *“I feel very lucky to have been part of Zippy and the whole area of improving the mental health of children”*, *“I found this programme extremely valuable and fills the gap in the SPHE curriculum as a core resource”*. The one teacher who said she would not teach the programme again did not give a reason for her answer.

Perceived Strengths and Weaknesses about the Programme: Teachers' Focus Group Review Sessions

The purpose of the review session was to ascertain the teachers' views about the programme in terms of their experience of teaching the programme, factors that affected programme implementation, the effects of the programme and possible areas for improvement. A coding frame, which included six sections was applied across the six transcripts. The sections are outlined below and the common themes that emerged across the transcripts are described under each section. Sample quotes are provided.

Experience of Teaching Zippy's Friends

Section 1: Teachers' Views on Delivering the Programme

Within this section the teachers discussed their overall experience of teaching the programme. They teachers who were trained in September '09 discussed their experience of teaching the second half of the programme only. The teachers were also asked about their experience of teaching the programme in a multi-grade setting.

- **Content**

The teachers said that the programme was very easy to teach. A number of teachers said that one of the reasons it was so easy to teach was because the children could relate to the stories and the problems/difficulties that the characters in the stories experienced: *"I thought it was really easy to teach because it was so relatable to the children. All the stories had something that they had probably experienced. They understood what it was about, they didn't think it was just a story"*.

- **Resources**

The variety of resources (role play, mystery box, stories, making puppets and drawing) was commented on by the majority of teachers. The teachers said that varied activities and resources made the programme easy to teach, as the children were engaged and more willing to take part as a result: *"The resources were good too, that made it an awful lot easier to teach, there was something different for them to do most days. So it really helped them, they knew that there was something exciting coming at the end of the lesson too"*. Another teacher said: *"I thought the lessons were great, they were very very detailed and you weren't trying to put things in yourself, it was well laid out and structured"*.

Section 1.1: Experience of teaching half of the programme

In total 16 teachers who taught the first half of the programme were unable to teach the second half of the programme as they did not follow through with the children into second class. This resulted in the training of 16 second class teachers to teach the second half of the programme. These teachers discussed their experience of joining the teaching of the programme half way through its implementation. Two main themes emerged from the teachers' comments.

- **Children's enthusiasm**

The majority of teachers who were trained in September '09 said that although it took a while to become accustomed to the programme, it was the children's enthusiasm that motivated and encouraged them. One teacher said: *"The kids loved telling me about this story and that story. They knew exactly what they had done, they could tell you what happened in the modules"*. Another said: *"I thought*

it would be a lot different. I suppose I thought you would be starting off from scratch but it was amazing how much they retained, you know the way after the Summer you would be thinking they have forgotten everything but I think the fact that there was Zippy and this was something to think about, that's what helped them to remember. And once you mentioned Zippy they were delighted".

- **Revision lessons**

The revision lessons for Module 1, 2, 3 appeared to be an important resource for the teachers who had not taught the first half of the programme. A number of teachers commented on the usefulness of these lessons: *"I just picked it up. When you recap on the previous lessons using the revision lessons it really helps and it was no problem".*

Section 1.2: Experience of teaching in the multi-grade setting

Several teachers taught the programme in a multi-grade setting. The majority of multi-grade teachers taught the programme to children in first and second class. However, some teachers taught the programme to children in junior infants, senior infants and first class. Other multi-grade teachers taught the programme to first, second and third class children. One teacher taught the programme to children in first, second, third and fourth class.

In terms of teaching the programme to the junior classes, most of these teachers said that they taught the programme to first and second class children when the infants had gone home as the concepts and strategies were too advanced for the infant children. A number of teachers who taught the programme to first and second class children said that the programme was more suited to children in second class. The majority of teachers remarked that the children in second class were able to concentrate for longer periods of time: *"The first class, it was a bit beyond them, you didn't really get the same response from them, there were maybe one or two able children but second class were able to sit and focus and contribute and really get involved. I thought it was a very good age".* A number of teachers said that first class children *"loved the pictures and stories"*. All of those who taught the entire programme said that the children were more able for the programme when they were in second class: *"I had them (the children) last year but I thought this year they were more able for it, being in second class, definitely they were more receptive. They opened up to me more this year than they did last year and they kind of understood it more, maybe it was the extra year of maturity"*.

The teachers who taught the programme to second and third class children commented on the suitability of the programme for the children in both classes. A number of teachers said that the children in third class may have benefited from it more than the children in second class: *"I think that they were able to take more of the terminology and even remembering the stories... They had more of an interest I think, their attention was better, the programme was able to sustain their attention better"*. One teacher said that it was *"in no way babyish for third, they got as much out of it as the rest of the class"*. Another teacher who taught the programme from first to fourth class commented on the benefits for each class grouping in their own way: *"Every single one of them loved it and they all use the strategies, it was just as beneficial with first as fourth"*.

Case study of the implementation of Zippy's Friends in the multi-grade setting (Neary, 2009)

In Ireland up to 40% of primary school classes are multi-grade classes (Mulryan-Kyne, 2005). Several intervention schools in this study taught the programme in a multi-grade setting. A study investigating the implementation of Zippy's Friends in two multi-grade classes was carried out (Neary, 2009). The purpose of this research was to examine the effect of the multi-grade setting on programme implementation using a case study approach. Participatory workshops with children, semi structured teacher interviews and questionnaires for parents were used to investigate the experience, knowledge and attitudes of the people involved in the implementation of Zippy's Friends in these two multi-grade classes.

School A was a small rural school with 64 pupils divided between three classrooms. The programme was taught to children in 1st, 2nd and 3rd class (N=13). School B was a small rural school with 74 pupils divided between three classrooms. The programme was taught to children in 1st, 2nd, 3rd and 4th class (N=22). Results from this study show that the all classes displayed (a) knowledge of the programme and (b) a wide repertoire of emotional vocabulary and problem solving coping strategies. Older members of the multi-grade class (2nd, 3rd 4th class) displayed greater knowledge of the programme and acted as peer mentors for the younger children in that the older children reminded the younger children of the strategies taught in Zippy's Friends throughout the day and also out in yard. Both class teachers perceived the programme as beneficial to all children in the multi-grade class. One of the teachers noted that the children in 2nd class benefited the most from taking part in the programme. No problems were reported in terms of implementing the programme in the multi-grade setting. Both teachers reported a lack of awareness of the programme throughout the school and a lack of parental involvement. Results from the parents' questionnaire highlight the positive attitudes of parents towards the programme and also the awareness among parents of the need for greater parental involvement in the implementation of the programme in the future.

Overall, the knowledge, positive attitudes and use of skills throughout each class level points to the success of the programme with all children in a multi-grade class. The teachers' positive attitudes and ease with implementation in the class setting further advocates for future implementation within this class dynamic. Results from this study also support the possibility of adopting a more holistic approach that involves the active participation of all key stakeholders in the implementation of Zippy's Friends in the Irish setting.

Zippy's Friends and SPHE

The teachers were asked to comment on the Zippy's Friends programme in relation to SPHE. They were asked specifically about how the programme compared to other resources and how the programme fits into the SPHE curriculum.

How Zippy's Friends compares to other resources

- **Comprehensive**

The most frequently cited difference between Zippy's Friends and other SPHE resources was the comprehensive nature of Zippy's Friends. Several teachers said that unlike other SPHE resources the Zippy's Friends programme deals with each topic in depth and there is continuity between topics. One teacher noted: *"It's (the Zippy's Friends programme) very different, you have a full module on death and a full module on conflict resolution, whereas with the other SPHE resources everything is just skimmed over"*. Speaking about other SPHE resources one teacher said: *"There is no continuity, it's just like you're taking a lesson here on fire safety and another lesson there on friendships"*.

- **Teacher friendly**

Several teachers referred to the programme as being more ‘*teacher friendly*’ than other SPHE resources. One teacher remarked: *“The stories make it so easy, you know if you were doing another aspect of SPHE you would have to look up and find a story, find resources and all that”*. Another teacher said: *“I just loved to be able to go to it and say yeah we’re going to do this, this and this, it’s so simple and it’s all structured and you know what to do. I think it helps especially if you are in a multi class situation to have structure where everything is laid out for you”*.

- **Child friendly**

As well as being a teacher friendly resource several teachers also referred to it as a child friendly resource. Referring to another SPHE resource, one of the teachers said: *“It is probably the one I use the most but it’s a little bit advanced for them, like with the smoking, you’re writing a letter to Niamh. These are second class children and the Zippy’s Friends is more at their level. It’s more child friendly I think and the resources, they love them and it’s all kind of visual. Whereas the other one is all talk, there are pictures alright but they wouldn’t be as child friendly as Zippy”*.

How Zippy’s Friends fits into SPHE curriculum

- **Planning**

There was a general consensus that the programme needs to be made a part of the SPHE curriculum and in order to do this, each individual school needs to plan what parts of the SPHE curriculum Zippy would cover and what other parts of the curriculum would need to be taught over the two year cycle. One teacher remarked:

“There is no way you can do Zippy and Walk Tall and Stay Safe and RSE in the one year, you couldn’t be tossing and turning. What you would have to do is sit down and say right this, this and this I want to do and you’d have to be picking from a menu. I do think that Zippy would be a powerful backbone to build other things out of, especially at that younger age. And children find it much easier with the story and situation cards”.

- **Whole school approach**

Some teachers said that the programme needs to be seen as something more than 24 lessons in the SPHE curriculum and that it should be a part of the school ethos with the strategies being reinforced throughout the day. One teacher said:

“You don’t have to do every single bit of it all the time to get the message through if it’s being reinforced throughout the school day. That’s the one thing I find that if you leave it as just SPHE time and that’s it, you never mention it again, it won’t be as effective as if you are actively looking for them to use the strategies throughout the day. If you take like PE, like picking teams, picking captains, because you are aware of where the strategies are it can be carried out right throughout the day and that way you are not spending all the time saying I have this class only to get through all this work”.

Factors Influencing Programme Implementation

The teachers were asked about factors that helped the programme to run smoothly and factors that hindered the implementation of the programme. A number of factors were highlighted by the teachers.

Factors that helped the programme to run smoothly

- **Circle**

Several teachers said that putting the children in a circle is an important part of each lesson. Some teachers noted an improvement in children with behavioural difficulties:

“In particular I have quite a number of children with behavioural difficulties and you could see for the first few weeks that they wanted to misbehave in the circle but after a while they actually started to contribute to the lesson so I found that brilliant”. Other teachers commented on the effectiveness of the circle for quieter children who would be less likely to speak: *“I have a lot of very quiet wee girls and I found that the girls were more willing to speak in the circle”.*

- **Personal Experience**

A number of teachers commented on the positive effect of telling the children about their own personal experiences during the lesson. The teachers said that by contributing to the lesson, the children were more likely to contribute as a result. One teacher gave the children an example of a time when she felt jealous: *“So that they knew that being jealous was ok, I gave them an example of a time that I was jealous and then they started opening up and talking about times when they were jealous cause at the start they thought oh no that’s wrong, you’re not supposed to be jealous”.* Another teacher spoke to the children about a time when she felt nervous: *“I told the story of when I started my first day here and that I was very nervous in the staffroom and that myself and Ann didn’t know anybody but that we made friends and they were really surprised to hear that somebody else, or even an adult would be feeling the same way... I think when an adult tells them that they feel the same way as them, you know, they can’t believe it. But they definitely become more comfortable with themselves”.*

- **Training**

The training, according to some teachers was most useful in terms of providing an overview of the programme and motivating the teachers before implementing the programme. One teacher remarked: *“It’s good to get the overview of the programme to talk to other teachers and to get enthused about it and to get motivated”.* Another teacher said: *“You probably wouldn’t have the same enthusiasm if you were just handed the pack and told to go do it. Whereas you got to know Zippy and the pack and you knew what it was about”.* Several teachers commented on the benefits of getting to talk to other teachers who teach the same class level. One teacher said: *“I suppose, to focus everybody, you were talking to everybody else and you could hear what kind of situations they were in and you could get ideas from others. Yeah you could take the pack and just go off but it’s much more beneficial to talk with others just to get ideas”.*

- **Prepared**

Being prepared for each lesson was regarded as an important factor that helped the programme to run smoothly. One teacher said: *“You need to have looked through it all the night before”.*

- **Lesson**

The lessons, in terms of the variety of activities and the structured nature of the lessons also helped the implementation of the programme. Some of the teachers comments included: *“The activities throughout helped. When you break up the lesson, they’d listen to the story and then they might do an activity and then come back again. So that worked well”* and *“Things like the role play, you knew that the minute Zippy was starting they might get a chance to come up – they loved that”.*

- **Consistency**

Some teachers highlighted the importance of implementing the programme every week and having a set time to implement the programme. One teacher remarked: *“I did it regularly once a week and they knew once a week that it was Zippy time and they were familiar with the routine. If you had a huge gap between the lessons it might not have run as smoothly”*.

Factors that hindered the implementation of the programme

- **Time**

Time was the most frequently reported problems associated with implementing the programme. The teachers said that it was difficult to find time during the day when all of the children were present: *“I have like 11 of my children going out to resource and learning support, I found it so hard to get an hour. I had to say to the other teachers Zippy’s is at this time, you’re not allowed to take any of the kids out for this hour. And I found that really difficult and it was difficult to find a time when there would be no interruptions at the door”*. Another teacher remarked: *“My big problem with the whole thing was the time constraint. We had so many lessons to do and with various things and I erred on the side of caution. I really made the mistake in that I didn’t do the lesson unless I had 100% attendance and I left myself under serious pressure at the end to get the lessons completed and it took from the enjoyment of it. Whereas if you had started it at the beginning of the year you could do it at your leisure and not feel that awful pressure.”* Also, some teachers commented on the fact that second class is a busy year with first confession and first holy communion at the end of the year and that preparation for both meant that there was a lot of interruptions to the regular classroom timetable during the year.

- **Size of room**

Lack of space in the room meant that some teachers were not able to put the children into a circle for Zippy time. Teachers found this to affect the programme negatively. Some of the comments included: *“But the one thing that hindered the lesson was space in the classroom, we were all cramped in. It would be ideal if you had a multi purpose room that you could move to for the lesson. Cause they liked the idea of Zippy space rather than just staying where they were”* and *“One day I left them in their seats and they weren’t at all as interested as when they were in the circle, cause they love sitting in the circle and being able to look at each other. Yeah the day I did it in their seats, it was kind of a bit of a dry run.”*

- **Multi-grade Teaching**

Teaching the programme in a multi-grade setting over two years was problematic for some teachers. One teacher explained: *“Having multi classes is kind of difficult, you know I have a class leaving now and half a class coming in that is missing the first half of it and they will be doing the second half of it and it’s not the kind of thing that you can do, you need to know the beginning of the story. I would think if I was doing it I would do it through the full school year”*. Another teacher suggested doing it every second year in the multi-grade setting to overcome this problem.

- **Conflicting parents’ views**

One teacher spoke about the issue of conflicting parents’ view about topics such as conflict resolution. She said that it was difficult *“... to change the mindset of a child who is being told by their parents how to behave”*. She gave the example of some children in her class being told by their parents if they are being bullied by someone to bully that person back.

Perceived Effects of the Programme

The teachers were asked for their opinions about the effects the programme had on the children, themselves as teachers and the wider school environment and community. They were also asked specifically if certain children benefited more than other children and in what way. The teachers' responses are summarised into key themes below.

Effect on children

- **Relationship with each other**

According to the teachers, there was a significant change in the children's relationship with each other as a result of the programme. Several teachers observed a change in the children's interaction in the yard in terms of the way they look out for each other and make an increased effort to include all children in games: *"They look out for each other that bit more since the programme began, like if anything happened they'll make sure the other child is alright or they'll make sure that somebody else is told, like the teacher on yard or myself"*. One teacher gave the example of a child who rarely played with anyone in yard: *"I had a boy who is very much out on his own and even on the yard he wouldn't have wanted to play with other children but now he has somebody to play with and is making more of an effort himself to have somebody to play with and the other children will make sure that there is nobody left out"*. Some teachers also noted a change in friendship dynamics in the class over the course of the year: *"I can see different friendships forming like in my class. There would be a group of girls that would always play together and that would have been the way it was for the past three years but I can see different girls joining and you would hear 'Oh I'm going to her house' and I thought that would never have happened. But they are now close and you can see them playing in different groups"*.

The majority of teacher observed a reduction in problems in the yard since the start of the academic year. The teachers also commented on the children's ability to sort minor disputes amongst themselves as a result of the programme: *"At the start of the year there were a lot of small arguments. A lot of that has stopped. You would hear the odd thing now, like you wouldn't hear of a small thing, it's only if something serious has happened. They seem to be able to solve small disputes amongst themselves"*.

- **Awareness**

The teachers also spoke about the effect the programme had on the children's awareness of their own feelings and their behaviour. Some teachers said that before the programme the children had difficulty expressing their feelings and that this resulted in them *"taking it out on other children or the teacher"*. One teacher gave an example of the changes that occurred in one child with behavioural difficulties as a result of the programme:

"I have a boy in my class and he is a very angry boy and he said at the end of the programme 'I used to be very different, I used to hit people but I know now I shouldn't' and he's so funny, on a daily basis he would say 'Múinteoir such and such would have made me angry but I knew that it wasn't a good thing to hit him back'".

Another teacher said *"now they see that it's wrong to do certain things, they understand what's right and wrong"*. The teachers also said that the children are more open and confident as a result of the programme. In relation to the stories in the programme one teachers said: *"The kids can really relate to it, they can relate to it in the same way (as the characters). I think it was good for them to talk about what was wrong with them. I think they are more open to talk to you than they were before"*. Another teacher said: *"There are a few in my class that would argue a lot in yard but they got better with that, kind of sorting things out for themselves and then talking about coping, their coping skills improved during the year and being able to express things better"*.

- **Children with particular difficulties**

There were conflicting views about children that benefit the most from the programme. Several teachers noted improvements in children with behavioural and anger management difficulties. One teacher spoke about the effect of the programme on a particular child in her class: *“He has anger management issues and at the start of the year before Zippy came around he would have just lost it if he didn’t get the colour he wanted but now there are rules on the wall – you stop, you take a breath, you think about the situation and I can see the other kids when he is about to blow, the kids will say ‘Paul remember, remember’ and they will all remind him of the rules and you can see him thinking ok this is what I have to do and very often it just diffused the whole situation, so that is one thing I have found in a huge way it has helped”*. Other teachers observed positive changes in introverted children in terms of them opening up and sharing their experiences in the circle and becoming more confident. One teacher explained: *“I had a child with selective mutism who had her hand up the most asking the questions and talking in a very informal setting”*.

Effect on teacher

- **Improved child teacher relationship**

The majority of teachers commented on the improved relationship they had with the children as a result of the programme. Speaking about the effect the programme had on herself, one teacher said: *“I think the bond I have with my class this year, the relationship, Zippy’s Friends has helped with this closeness. I think there is a sharing there, I would have shared my experiences with the children like jealousy, I would have told them ‘well I was jealous when this happened’ and they loved to hear that I was jealous, it was one thing they remembered weeks on”*. Another teacher explained that programme helped her to relate to the children and that the children realised that the teacher was there to listen. One teacher referred to the teaching of the Zippy’s Friends programme as *“an hour of closeness with the children”*.

Effect on wider community

- **Lack of parental knowledge**

All of the teachers said that there was very little awareness about the programme among the parents: *“The parent’s really didn’t know what Zippy’s Friends was, they didn’t know it was a mental health programme. Even our secretary in the school, her little boy is in my class and I had him last year and she said ‘I have no idea what Zippy’s Friends was about’ and she is in the school”*. Some schools, however, held a Parents Evening to introduce the parents to the programme and the topic of mental health promotion. Speaking about the Parents Evening one teacher said: *“I think the parents really benefited from attending the session, she (Health Promotion Officer) did an awful lot on their own mental health too”*. Another teacher said: *“All those that came were really receptive towards the programme. Very interested in it, thought it was fantastic, great idea and again just wondered about a programme in the senior end of the school to follow on from Zippy’s Friends. That was the only disappointment”*.

- **Lack of school awareness**

Most of the teachers said, with the exception of the teachers who taught the programme last year and the resource teacher who took children out of class for additional help, there was little awareness of the programme throughout the school. One teacher said that level of school awareness *“depends on the principal”*.

Teacher Training

The teachers were provided with two days training before implementing the programme. This workshop was designed to explain the goals of the programme, the theoretical background to the programme, the components of the programme and the structure of each session. The teachers also take part in a variety of role play situations taken directly from the programme. During programme implementation the Health Promotion Officers and the resource teachers observed a sample of teachers implementing a Zippy's class lesson. On completion of the first half of the programme the teachers in each county were invited to meet up and discuss the implementation of the programme with the researcher. Further training was provided for the second class teachers who did not implement the first half of the programme. The teachers who implemented the first half of the programme were invited to attend this training also. During the implementation of the second half of the programme the Health Promotion Officers and the researcher visited another sample of schools and observed a Zippy's class lesson. During the focus group review session, the teachers were asked about how useful they found the teacher training. Two themes in relation to the teacher training emerged repeatedly.

- **Confidence**

All of the teachers said that the teacher training was important in terms of providing them with background knowledge about the programme and also guiding them through the implementation of the programme which in turn increases their confidence while teaching the programme. One teacher said: *"I think you need that background to know if you're doing it properly. I know there is not real set right and wrong way but at least if you have some sort of idea. It gives yourself a bit of confidence"*.

- **Continued contact**

Several teachers spoke about the importance of continued contact (trainer visits to the schools) and how this further boosted their confidence during the year. Speaking about a visit from one of the Health Promotion Officers to the school, one teacher said:

"It was handy to have that as well, just to be able to chat and see what they thought of them because sometimes you don't realise how good or otherwise children are until you can watch somebody else with them because when you're doing it and when you're in it, it's kind of hard to see how good they are and it was like a check but they didn't see it like that. You know you can see what they learned".

In relation to the importance of teacher training in mental health promotion one teacher said:

"I do think that when you're dealing with young children you're not really thinking about their mental health, you're thinking about physical health and academic, but you're not really thinking down the line how is this going to impact on them or how are they going to cope so it's actually interesting to sit back and well, actually they need to have these coping skills early on."

Recommendations

Three key recommendations emerged from the focus group discussions with the teachers.

- **Activities**

It was recommended that more activities would be included in the sessions, in particular hands on activities. One teacher said: *"I think a lot of them like activities, say when we were doing the puppets and*

making the crowns they thought this was great because they were actually doing stuff. And some of the earlier sessions were just like discussion they were a bit fed up". Another teachers said: "They love the drama, the mystery box, they loved coming up and doing stuff.

- **Whole school approach**

A number of teachers suggested implementing the programme throughout the school. The majority of teachers spoke about the need for a programme in the senior classes of primary school and some teachers suggested having a pre-Zippy programme for the infant classes. One teacher said that for practical reasons all teachers in a school should be trained in the programme:

"Other teachers that were told about incidents out in yard wouldn't have had the background of Zippy's Friends or the strategies, whereas any time I was told something I would kind of refer back and like how should you have dealt with it and we could have come up with ways to cope whereas I was the only member of staff that was able to do that with them so maybe, yeah, if more teachers were involved in the school".

- **Parental involvement**

Several teachers commented on the need for parental involvement in the programme. Some teachers suggested that a letter could be sent home to the children's parents informing them about the topics being dealt with each module and the strategies being taught. Others suggested the use of a workbook at home that would reinforce the strategies taught each week.

The School Context: Impact of the Zippy's Friends Programme on the Teaching of SPHE Curriculum

A questionnaire was developed and administered across intervention and control schools in order to explore the extent to which the teaching of Zippy's Friends impacted on the delivery of the SPHE programme.

SPHE: Strand units completed

As part of the SPHE questionnaire the teachers in both the intervention and control groups were asked to indicate the strand units they (i) fully implemented (ii) partially implemented or (iii) did not implement during the year. The results from this question allowed a comparison between the extent to which the SPHE curriculum was implemented by the intervention and the control group teachers. It also allows further examination of whether the teachers in the intervention group only taught the Zippy's Friends programme for the year and if there was a pattern of strands/strand units being 'left out' by the intervention teachers as a result of the implementation of Zippy's Friends.

Table 42 indicates the number and percentage of teachers in the intervention and control groups who reported that they had fully implemented, partially implemented or did not implement each strand unit. Looking at the percentage of teachers that fully implemented the strand units, a greater number of teachers in the intervention group fully implemented all of the strand units with the exception of one strand unit "Safety and Protection". In some cases there is a significant difference between the percentage of control and intervention teachers that fully implemented the strand units. Looking at the strand unit "Relating to Others", 91.6% of the teachers in the intervention group fully implemented this strand unit, this is in contrast to 36.4% of the control teachers. 83.7% of the teachers in the intervention group fully implemented the strand unit "Self Identity", while only 45.4% of the control teachers reported fully implementing this strand unit. Full/partial implementation of

the strand unit Media Education was low amongst both the intervention and control teachers. With the exception of this strand unit, 73% of the teachers fully implemented the other eight strand units, which is in contrast to 53% of the control teachers that fully implemented these strand units.

Table 42: Number & percentage of intervention and control teachers that implemented each SPHE strand unit in full, partially or not at all

Strand Unit	Implementation	Intervention (N=12)		Control (N=11)	
		Frequency	Percent	Frequency	Percent
Self Identity	Full	10	83.7	5	45.4
	Partial	2	16.7	4	36.4
	Not implemented	0	0	2	18.2
Taking care of my body	Full	8	66.6	6	54.5
	Partial	3	25.0	3	27.3
	Not implemented	1	8.4	2	18.2
Growing and changing	Full	7	58.3	5	45.4
	Partial	3	25.0	3	27.3
	Not implemented	2	16.7	3	27.3
Safety and Protection	Full	6	50	8	72.7
	Partial	5	41.7	3	27.3
	Not implemented	1	8.3	0	0
Myself and my family	Full	11	91.6	7	63.6
	Partial	1	8.4	2	18.2
	Not implemented	0	0	2	18.2
My friends and other people	Full	10	83.3	7	63.6
	Partial	2	16.7	4	36.4
	Not implemented	0	0	0	0
Relating to others	Full	11	91.6	4	36.4
	Partial	1	8.4	5	45.5
	Not implemented	0	0	2	18.1
Developing citizenship	Full	7	58.3	5	45.4
	Partial	2	16.7	3	27.3
	Not implemented	3	25	3	27.3
Media education	Full	1	8.3	0	0
	Partial	2	16.7	2	18.2
	Not implemented	9	75	9	81.8

Barriers to teaching SPHE

The teachers were asked about the kind of barriers that exist for them in the teaching of SPHE in their school. Table 43 presents a summary of the main themes. The most frequently cited barrier to teaching SPHE was curriculum overload/lack of time during the week to teach the curriculum. One teacher commented that the biggest barrier for her was “... the need to concentrate so much on the core subjects”. Another teacher wrote: “Time constraints in a jam packed day can sometimes tend to push SPHE down the list of vital subjects and the discreet time is not adhered to”. A similar comment was made by another teacher: “Time factor. The curriculum is over loaded and SPHE is often ‘slotted in’ where there is time”. Three teachers cited the lack of support from parents as a barrier. One teacher noted: “A lot of what is done at school is not followed through at home”. The lack of resources and lack of continuity within the resources was also recognised as a problem: “With the SPHE material – RSE, Walk Tall and the Stay Safe programme they are individual lessons and have very little continuity”. A teacher in one of the control schools said that there is a lack of resources and as a result a lot of resources have to be hand made. Two teachers noted the difficulty of teaching SPHE in the multigrade setting. One of the teachers wrote: “Multigrade- very difficult to teach all strand units and resources are hard to find to suit. Also, time constraints in a multi-grade situation”. Three intervention teachers said there were no barriers to teaching SPHE. One teacher wrote: “None this year as Zippy covered quite a bit of the programme”.

Table 43: Barriers to teaching SPHE (N=23)

	No of teachers
Curriculum overload	8
Lack of support from home	3
Lack of resources and continuity	3
Multigrade teaching	2

What could assist in teaching SPHE?

The final question in the SPHE questionnaire asked the teachers what could be done to assist in the teaching of SPHE. Table 44 outlines the key themes. The need for more resources was mentioned most frequently. One teacher commented on the need for more resources that “are easy to use and things which the children find interesting”. Another teacher wrote: “Zippy’s Friends is an excellent resource as all the materials/visual aids are included – programmes and resources like this would assist”. Two teachers commented on the need for a comprehensive workbook for the children to use. In relation to this, a number of teachers said that there was a need for one programme with continuity that would run throughout the primary years. One teacher wrote: “One book with Zippy’s Friends, RSE, Stay Safe, Walk Tall all in one”. Another said: “Having a programme like Zippy’s Friends that incorporates many different themes around one story. The children in my opinion would benefit more from a programme like this where there is continuity throughout”. In addition, some teachers noted the need for parental involvement with the teaching of SPHE: “More help from parents in following through with class work”. Two teachers said there was a need for teacher training in relation to the teaching of SPHE programmes. One teacher said there was a need for:

“In-service for new programmes that are being developed and whole school knowledge of programmes that are being used in the school as some years you may be teaching a different grade and unless the in-service is offered to all staff it would be hard to deliver the programme effectively”.

Table 44: Teachers' responses to "What could assist in teaching of SPHE?" (N=23)

	No of teachers
More SPHE resources	6
One programme with continuity	4
Parental involvement	2
Teacher training	2
Classroom management programme	1

The School Context: Ethos Questionnaire

The teachers in the intervention (N=30) and control group (N=10) completed an Ethos Questionnaire. The purpose of this questionnaire was to examine the environmental context within which the Zippy's Friends programme was being implemented in the intervention schools and to compare this with the control schools.

Policies

The teachers were asked about their school and the number of policies that had been drawn up in the school. Of the nine policies listed, all of the schools (control and intervention) reported having a policy on bullying. 29 out of 30 intervention schools and nine out of ten control schools stated they had a policy on 'Welfare and Discipline' and 'Reported or suspected child abuse'. However, the number of schools reporting to have a policy on the 'Referral of suspected child health problems' was significantly lower (Intervention N=14, Control N=1). The majority of control and intervention schools also had policies on 'Gender equity / discrimination / harassment' and 'Administration and safe storage of medication for children'. In relation to new students, 17 intervention schools and eight control schools had a policy on the 'Integration of new students into the school'. Similarly, 17 intervention schools and six control schools had a 'Critical incident policy'. The number of schools reporting to have a policy on 'Staff health and welfare' was notably low (Intervention N=9, Control N=4).

Table 45: School Policies

	Intervention N=30	Control N=10
Bullying	100%	100%
Integration of new students into school	56.7%	80%
Welfare and Discipline	96.7%	90%
Gender equity / Discrimination / Harassment	70%	80%
Critical incident policy	56.7%	60%
Reported or suspected child abuse	96.7%	90%
Staff Health and Welfare	30%	40%
Referral of suspected child health problems	46.7%	10%
Administration and safe storage of medication for children	86.7%	100%

The teachers were asked about their familiarity with the policies. Some 80% of the teachers in the intervention schools said they were familiar with the school policies. 30% of the teachers in the intervention group (N=9) and 10% of the teachers in the control group (N=1) reported that the school policies were revised and updated on a yearly basis.

School Procedures

This section of the questionnaire was designed to investigate the procedures within the school in relation to staff student interaction, emergency procedures in place, support being available for teachers and students and the value of counselling and talking things through. (See Appendix D for teacher's responses to all questions)

All of the teachers in the control and intervention schools said that boys and girls have equal access to the school's resources such as staff time, sports time and safe spaces. Over 80% of the teachers in the intervention and control schools said that the following occur always / often in their school: (i) Staff members act as role models by their positive interaction with children, other staff and parents (ii) there is a procedure that allows all students to voice concern about inappropriate / abusive behaviour in school (iii) school provides adequately for the welfare needs of the children and staff. Interestingly, 33% of intervention teachers and 60% of control teachers said that support is always/often available for teachers who have been involved in stressful incidents. This is in contrast to the 60% of intervention teachers and 70% of control teachers that said support is always/often available for children who have been involved in stressful incidents. In terms of the children's health, 70% of the intervention teachers and 80% of control teachers said that promoting children's health is always/often a priority of the school plan. In relation to this, 67% of the intervention teachers and 70% of the control teachers said that "counselling and talking things through is always/often recognised as a high priority in this school". However, just under half of the teachers in the intervention group and only one teacher in the control group said that staff always/often seek help when feeling stressed.

Social Personal Health Education and Mental Health Promotion

The teachers views of Social Personal Health Education (SPHE), the allocated time and their ability to teach the curriculum was ascertained in this section. The majority of teachers (93% intervention and 80% control teachers) said that adequate time is allocated to SPHE. More teachers in the control group than intervention group said that their school shows consideration of people's cultural backgrounds when dealing with positive mental health (Intervention 57%, Control 70%). There is also a slight difference between intervention and control teachers' views about the SPHE curriculum coverage of mental health. 63% of intervention teachers and 80% of control teachers said that the SPHE curriculum gives sufficient coverage to aspects of mental health. In contrast to this, more intervention teachers than control teachers feel adequately equipped to educate children about positive mental health (73% intervention and 40% control teachers). There appears to be a lack of encouragement for staff to attend training programmes on emotional wellbeing and mental health across all schools (33% intervention and 40% control schools).

Environment and Ethos

In terms of the environment, 70% of the intervention teachers and 80% of the control teachers said that the physical environment of the school contributes to the positive mental health of children and staff. Over 90% of intervention and control teachers said that opportunities are provided for children to experience success in a variety of ways and that the school actively discourages violence. 83% of intervention teachers and 90% of control teachers said that their schools ensure the valuing of all cultures. More control teachers than intervention teachers (63% intervention, 80% control) said that positive mental health skills are promoted through the academic curriculum. In relation to the children's role in the school, just under 44% of intervention and control teachers said that children

are encouraged to participate in decision making process of the school. Similarly, less than 44% of teachers said that the school caters for children who experience periods of mental health problems.

Support and Local Services

Over 75% of intervention and control teachers said that their school was receptive to approaches from community services. Interestingly, there is a notable difference between intervention and control teachers' responses to the statement 'the school is committed to regular exchange of information between families, local community and school regarding health services in the area (Always/Often: Intervention 37%, Control 80%)'. The percentage of schools that work with local mental health community services is low across both intervention and control schools (Always/Often: Intervention 27%, Control 40%). Similarly only 13% of intervention teachers and 30% of control teachers said that staff are always/often provided with information about local mental health services. On a more positive note, 73% of intervention teachers and 90% of control teachers said that support staff work closely with teachers in promoting positive mental health.

Parents

The teachers' responses in relation to the parents and their involvement in school activities are very positive. 80% of the intervention and control teachers said that parents are always/often interested and supportive of the school. 90% of the teachers said that parents are encouraged to help their children to consolidate their learning at home. Over 80% of the teachers said that parents are consulted when sensitive content areas in health are to be addressed. In addition, 90% of the teachers in the control group and 73% of the teachers in the intervention group said that parents regularly ask questions about their children with the teacher and/or principal. In terms of parental involvement, 50% of the intervention teachers and 70% of the control teachers said that a broad range of parents are involved in school life. In addition, 53% of intervention teachers and 60% of control teachers said that parents are given an opportunity to participate and learn about the SPHE content.

In relation to the teaching of SPHE, all of the teachers in the intervention group and nine out of ten teachers in the control group said that they teach SPHE to their class. Out of a total of 30 intervention teachers and ten control teachers, one intervention teacher teaches SPHE twice weekly, 23 intervention teachers and seven control teachers teach the curriculum once a week, five intervention teachers and two of control teachers teach it every fortnight. One intervention and control teacher teaches SPHE once a month.

Support available in schools

The teachers were asked about the support measures available for students in distress in their school. A total of 17 intervention teachers and four control teachers said that support is available in their school. Four intervention and two control teachers did not answer this question. When asked about the type of support available several school personnel were identified as the primary measure of support. The Home School Liaison Officer was most frequently cited. One teacher wrote: "*A home school liaison officer works closely with the children who have distress problems. She will contact outside agencies for additional help*". Some teachers said their principal or other members of staff such as the support teacher or resource teacher. One teacher wrote: "*We have a resource teacher who deals with issues as they arise*". Four teachers said parents would be contacted. Three teachers said the class teacher was the main form of support. Three other teachers identified outside agencies such as local

doctor, NEPS psychologist, public health nurse, social services. One teacher said that their school would “*discuss individual case with child’s parents first then GP*”. Three teachers made reference to the departmental guidelines: “*1. Teacher, 2. Principal, 3. Parents and 4. Board of Management*”. One teacher explained the use of a relaxation room in their school: “*We have a room called ‘Suaimhneas’. This is a relaxation room where students go to unwind and relax*”.

Teaching emotional wellbeing in primary schools

All of the teachers in the control group and 28 out of the 30 teachers in the intervention group said that there is a need to teach emotional wellbeing in primary schools. Two intervention teachers did not answer this question. Several teachers commented on the need to teach mental health promotion because of the increasing number of difficulties children face at home and at school. One teacher wrote: “*Children face so many difficulties and are not getting help at home to deal with their emotions*”. Another teacher commented on the changes in society:

“Society is changing so fast – selfish me, insecurity, relationships, permanent contracts, independence, gay... and messages in the media, green issues and dependence etc. – so many issues out there causing so much instability and lack of hope and yet so much silence, picture no sound, living, no communication”.

Several teachers also recognised the benefits of teaching children coping skills at a young age: “*A lot of children suffer in silence if they/their families are having difficulties. Also if children are taught how to cope from a young age they will be more equipped when they’re adults*”. Another teacher wrote: “*Because I remember what it was like and I believe a lot of mental health problems developed in the teenage years could be avoided if things are dealt with in the earlier years*”. One teacher commented on the need for teachers to help children who have difficulty coping: “*There are always children in your class that do not cope well with emotions and emotional situations. As a teacher you often feel at a loss as how to help and support these children*”. Some teachers wrote about the need to move beyond a sole focus on academic achievement and the need to view all aspects of health as equally important. One teacher wrote about disadvantaged schools specifically:

“I teach in a disadvantaged school where young children have to deal with very complex issues from an early age. The teaching of emotional wellbeing is vital for these children”.

Barriers to teaching emotional wellbeing in schools

Time was the most frequently cited barrier to teaching mental health promotion in primary schools. Several teachers wrote about the overload of curriculum subjects. One teacher noted: “*Although time is allowed for teaching SPHE (half an hour per week) it’s hardly enough time to deal with such an important area as emotional wellbeing. It can only be delivered when taught in a thematic approach through other curricular subjects such as English / Science / R.E*”. Another teacher wrote a similar comment: “*Time?? But feel it can be taught in cross-curricular – Religion, English etc*”.

The need for teacher training and support was the second most frequently cited barrier to teaching mental health promotion. One teacher wrote that there is a “*Lack of staff training, lack of support from health services*”. Another said that teachers were not fully aware of how to tackle the situation. One teacher said that there were “*no barriers, all teachers very anxious and willing to help but we need guidance*”.

Similar to the previous theme several teachers noted the need for improved links between the school and support services. One teacher noted the lack of “*Local/community mental health involvement/initiatives etc*”. Another teacher wrote: “*Lack of specialist knowledge and lack of information and services from HSE*”.

Other barriers included lack of parental support, class sizes, multi-grade teaching, the need for a whole school approach and lack of resources. In relation to the resources one teacher commented: “*Existing SPHE programmes don’t cover coping strategies for difficult situations e.g. death*”.

Two Case Studies of the Implementation of the Zippy’s Friends programme in Irish Primary Schools (O’Sullivan, 2008).

The purpose of this study was to explore the implementation of the Zippy’s Friends programme in the context of a whole school approach. Two schools, one rural and one urban were selected and a variety of qualitative and quantitative methods were used to explore the factors at school level that affect programme implementation. School A was a large urban school with a multicultural profile. School B was a smaller almost monocultural, rural school close to the border with Northern Ireland. Both schools were designated disadvantaged but the nature and impact of this on the two schools was quite different. In the larger urban School A, the perceived lack of social cohesion in the local community with a high percentage of lone parents and ethnic minority families, many of whom were unemployed and had low levels of education, contributes to the lower level of parent and community involvement in the school. In contrast to this, School B held a central position within its local community and was perceived as a focal point for parents, teachers, the clergy and members of the wider community. Parents were actively involved in the school activities and the school was committed to its involvement with the local community. Both schools were faced with very different challenges. School A was confronted with multiple disadvantage and the issue of the overall busyness of the school as a result of receiving extra resources to combat the disadvantaged nature of the school and community. In contrast to this, School B was concerned with progressiveness and the need to keep up to date with the latest educational resources. Both schools recognised the importance of an emotional wellbeing programme in primary schools and both schools shared the view that a whole school approach is necessary for effective implementation.

The case studies provide a useful insight into the reality of programme implementation in two disadvantaged schools and exemplify how the local contexts for programme implementation can differ so much. The findings reveal that many of the factors which affect programme implementation are whole school practices whose particular combinations create a unique school culture within which programme implementation occurs. This indicates the need to see the school as a starting point and to understand the complex interaction of factors operating at the classroom, school and wider community level that impact on programme implementation.

ZIPPY



Annexe 18
Rules about Bullying
We do not have the right to bully someone
If we are bullied, we can ask for help from someone we trust

Annexe 19
Rules for Helping a Friend

- Listen to your friend
- Respect your friend
- Find solutions together
- Help your friend to ask for help

Rules about Bullying

- We do not have the right to bully someone
- If we are bullied, we can ask for help from someone we trust

Rules for Helping a Friend

- Listen to your friend
- Respect your friend
- Find solutions together
- Help your friend to ask for help

Steps to a Good...

- Listen to your friend
- Respect your friend
- Find solutions together
- Help your friend to ask for help

Rules

- Put your hand up if you want to speak
- Talk one at a time
- Listen to each other
- Don't say nasty things
- Think of nice things to say to each other
- You don't have to say anything if you don't want to

Choose the best solution that

- makes me feel better
- respects others

Talk one at a time

Listen to each other

Don't say nasty things

Think of nice things to say to each other

You don't have to say anything if you don't want to

DISCUSSION



It is clear from the evaluation findings that the Zippy's Friends programme has been very well received by both the school teachers and the pupils. The programme has been implemented successfully in the Irish primary school setting and has resulted in a number of significant positive effects for both pupils and teachers, including improved emotional and behavioural wellbeing and enhanced coping skills for the children.

The main findings will now be considered in relation to the initial aims of the evaluation study and the implications of the findings will be discussed within the context of the Irish primary school setting and in the light of previous research.

Assessing the Impact of the Programme

The positive impact of the programme is supported by findings from both the standardised scales and from the qualitative reports of teachers and pupils.

Programme Effects on the Children

The evaluation results indicate that the programme had an overall significant positive effect on the children's emotional literacy skills. Post-intervention scores from the *Emotional Literacy Checklist* showed a significant increase in the children's self-awareness, self-regulation, motivation, empathy and social skills when compared with the control group. Previous evaluations of the programme (Holmes & Faupel, 2004, 2005) report a similar trend in findings, (increase in the intervention group's emotional literacy scores and decrease in the control group's scores) however, unlike the findings from the present study, these differences did not reach significance. The significant positive findings from the *Emotional Literacy Checklist* are supported by the teachers' comments during the focus group review session about the effect of the programme on the children. The teachers referred to the children's heightened awareness of their own feelings and their willingness to open up and discuss difficult situations as a result of completing the programme. In addition, the teachers also spoke about the positive effect the programme had on the children's relationships with each other. The children were more empathic towards others, they were more willing to look out for each other and include others in their games. Several teachers said there was a notable reduction in the number of minor disputes and that the children were more able to sort out issues and resolve conflicts for themselves. The results from the end of programme weekly questionnaire further supports these positive findings with the majority of teachers (over 90%) observing improvements in the children's social skills, verbal communication skills, ability to manage their feelings and in the children's relationships with each other.

Results from the children's participatory workshops also reinforce the positive findings from the *Emotional Literacy Checklist*. When the children were asked about what they have learned from Zippy's Friends, 'being nice/kind to others', 'friendship' and 'feelings' were amongst the most important things that the children reported to have learned over the course of the programme. In addition, the results from the Feelings Activity show that the children in the intervention group had a more elaborate and wider vocabulary for articulating feelings. They were also more likely than the control group to explain the reasons why people felt a certain way and to suggest what they could do to make the situation better. It is clear that the qualitative results from the children's participatory workshop support the quantitative findings from the *Emotional Literacy Checklist* and that there was a significant improvement in the intervention group's emotional literacy when compared with the control group. These findings are particularly encouraging in light of previous research about the effects of social and emotional learning. Greenberg and colleagues (2003) assert that learning social and emotional skills is similar to learning other academic skills in that the effect of initial learning is enhanced over time to address the increasingly complex situations that children face. This also highlights the importance of a continued, coordinated approach to the teaching of social and emotional learning throughout primary and secondary school.

In terms of the children's coping skills, few significant changes emerged from the *Schoolagers' Coping Strategy Inventory* apart from the finding that the children in the intervention group were more likely to rate stress-coping strategies such as trying to relax and stay calm as being more effective following completion of the programme. The results from the Draw and Write Activity indicate that there was an increase in the use of problem focused coping strategies among the intervention group and that the coping strategies used were aimed at directly addressing the problem. There was no significant change in the type of coping strategies used by the control group post-intervention. Results from the participatory workshops complement the positive findings from the Draw and Write Activity. At post-intervention the intervention group had a wider repertoire of coping strategies when compared with the control group. Combining these results with the results from the *Emotional Literacy Checklist*, it appears that as the children became more emotionally literate they engaged in the use of more problem focused coping strategies. Interestingly, problem focused and engagement coping has been found to be associated with better adjustment during childhood and adolescence, whereas emotion focused coping and disengagement coping have been found to be related to poorer adjustment (Compas et al., 2001).

The results from the *Strengths and Difficulties Questionnaire* show that both the intervention and control groups' total difficulties scores decreased over time. However, examination of the subscales revealed that post-intervention there was a significant decrease in the intervention group's hyperactivity levels when compared with the control group. These findings are consistent with those reported in the Southampton study (Holmes and Faupel, 2004) and indicate that participation in the Zippy's Friends programme resulted in a significant positive effect on the children's hyperactivity levels. Also, similar to the Southampton study, an unexpected trend in the children's conduct problems score was found. Post-intervention, the control group evidenced a significant decrease in conduct problems in contrast to a non-significant reduction in the intervention group's conduct problems score. These findings are in contrast to reports from the teachers about the children's antisocial behaviour in the end of programme review questionnaire (83.3% of teachers strongly agreed/agreed that the children's antisocial behaviour had improved as a result of the programme). Several teachers also spoke about the positive effect the programme had on specific children who experienced difficulty managing their

anger. One possible reason for this unexpected result could be that the control teachers, who were not teaching the emotional wellbeing programme, had a greater focus on improving the children's externalising behaviour throughout the year. Research has shown that behaviour problems are a major concern for teaching staff in schools (Vinson, 2002). In the intervention group, however, the teachers received specific training in an emotional wellbeing programme and it is possible that the teachers were, as a result more stringent in their assessment of the changes in the children's behavioural/ conduct problems. Overall, the results from the *Strengths and Difficulties Questionnaire* indicate that there was no significant difference between the intervention and control groups' total difficulties scores and prosocial scores post-intervention. It is important to note that the *Strengths and Difficulties Questionnaire* is a broadband questionnaire and, therefore, it is probable that the questionnaire is not discriminating enough to pick up on the specific positive changes in the children's behaviour, such as those reported by the teachers during the focus group sessions.

Programme Effects on the Teacher

In addition to the positive effect of the programme on the children, the teachers also reported that the programme had a positive effect on themselves, in terms of raising their awareness about the children's emotional wellbeing, providing them with strategies to help the children deal with difficult situations and enhancing their relationship with the children. These findings are consistent with the findings from previous evaluations of the Zippy's Friends programme in Denmark, Lithuania and Southampton. In both Denmark and Lithuania, Mishara and Ystgaard (2001) reported that teachers felt that the programme helped them to talk to the children openly and also to handle everyday problems in the classroom. Similarly, in Southampton the programme had a positive effect on the teachers' awareness of the children's emotional wellbeing. The teachers were also more confident in helping the children deal with difficult situations (Holmes & Faupel, 2003). The results from this study and previous evaluations of Zippy's Friends confirm the positive effect of the programme on the teachers and their relationship with the children. Given the importance of children having a supportive relationship with at least one adult who is not part of the family (Doll & Lyon, 1998; Howard & Johnson, 2000; Lynch Geller & Schmidt, 2004), the results from this study and previous evaluations of Zippy's Friends are most significant. The quality of children's relationships with teachers has been found to be a major component of adaptation in school (Pianta et al., 1995). In addition, Bagdi and Vacca (2006) state that a nurturing supportive educational environment with supportive teachers can be especially important for children living in high-risk circumstances for whom relationships may be compromised.

Programme Effects on the School and Wider Community

In terms of the effect of the programme on the school as a whole most teachers said there was a lack of 'whole school' awareness about the programme and as a result broader effects of the programme throughout the school were not found. Several teachers commented on the need for whole school training, i.e. the training of all staff, so that the strategies that are used in Zippy's Friends could be reinforced with all children in classroom through cross-curricular activities and also in the school yard. Teachers also recognised the need for parental involvement in the programme so that what is taught in class can be reinforced in the home environment and in the local community. Hauf and Bond (2002) state that good collaboration with all key stakeholders facilitates desired programme outcomes and supports the functioning and development of the people, organisations and agencies that are committed to promoting mental health in their communities. Community collaboration it is argued,

promotes the development of trust and strong social relationships which are the essential elements of social connectedness or cohesiveness in the broader community context (Rowe et al., 2007). This further indicates the importance of adopting a whole school approach, where all key stakeholders (pupils, teachers, parents and the wider community) have an active role to play in the implementation of the programme. When classroom instruction is combined with efforts to create environmental support and reinforcement from peers, family members, school personnel, health professionals and other concerned community members, there is an increased likelihood that children will adopt positive social, emotional and health practices (Osher et al., 2002; Weissberg & Greenberg, 1998). Research had shown that children benefit most when all key stakeholders work together to strengthen each other's efforts rather than working independently to implement programmes that attempt to compensate for perceived deficits in social settings (Weissberg et al., 2003). In terms of parental involvement, Alvord & Grados (2005) assert both formal and informal communication with parents is vital for ensuring a supportive, consistent and caring environment for young children.

Assessing the Process of Programme Implementation

Programme Fidelity

In terms of the process evaluation, programme fidelity results indicate that the programme was implemented with good adherence. The teachers in Intervention Type I (full implementation) and Intervention Type II (partial implementation) fully implemented over 86% of the programme. The fact that Intervention Type II teachers, who were given the option to implement the programme as a resource, implemented the programme with such integrity indicates the level of commitment and support for the programme. The teachers' comments about the programme during the focus group review sessions and the end of programme questionnaire give some indication as to why the programme was implemented with such compliance. The structured user-friendly nature of the programme, the suitability of the content for the children and the variety of engaging activities that were used throughout the programme were all cited as reasons why the teachers enjoyed implementing the programme. Previous research has shown that ease of administration and a user friendly manual with clear instructions have been found to positively influence programme fidelity (Bauman et al., 1991; Fullan and Pomfret, 1977; Gottfredson, 1984).

The high level of fidelity amongst the teachers in Intervention Type II also suggests that the level of teacher 'buy in' in terms of their acceptance of the intervention was achieved early on. Several teachers spoke about the need for an emotional wellbeing programme particularly in disadvantaged areas when the necessary supports are often not available at home. Other teachers spoke about not having the skills and resources to help support children in distress before being trained in Zippy's Friends. It is clear from the teachers' comments that they saw a need for an emotional wellbeing programme like Zippy's Friends. Several authors state that teachers' sense of efficacy and judgments of the acceptability of an intervention programme significantly influence their interest and willingness to implement a programme and the degree to which they implement the programme with fidelity (Han & Weiss, 2005; Domitrovich et al., 2008). The high level of programme fidelity reported in the present study, together with the teachers' comments about programme implementation, strengthen the conclusions that can be drawn about the programme's role in producing change. In addition, strong programme adherence amongst the teachers who were given the option to use the programme as a resource indicates the likelihood of future faithful replication of the programme in the Irish school setting.

The teachers' ratings of the programme in terms of their enthusiasm for the sessions, content appropriateness, achievement of aims and pupils' enjoyment and understanding of the sessions were consistently positive and highlight the level of teacher satisfaction with the programme. It is interesting to note that the teachers' overall ratings of the programme was higher in Ireland (M=8.75 / 10) than in Denmark (M=4.1 / 5) and Southampton (Year 1 M=3.9 / 5; Year 2 M=3.81). With regard to the modules that were the most successful (Module 5: Dealing with Change and Loss and Module 3 Making and Breaking Friendship), the suitability of the content to the children's daily lives, the child centered activities used in the sessions (role play, making puppets, drawing pictures) and the practical nature of the lessons, were the most frequently reported positive aspects of these modules. A number of teachers commented on the way the programme facilitated them in approaching difficult topics, such as death, parental separation and conflicts with the children, in a child friendly manner. Of the modules that received the lowest ratings (Module 1: Feelings and Module 2: Communication), lack of activities and over use of teacher talk were consistently reported. The results from the Weekly Questionnaire and the focus group review sessions accentuate the importance of activity based child-centered learning. It is clear that the children responded better when they were away from their desks and actively involved in role play / discussion. This finding is in line with previous research carried out on educational interventions. Grol & Grimshaw (2003) in a review of the literature on delivering interventions in educational settings conclude that interventions that used interactive techniques such as discussion and interactive group work are more effective than non-interactive approaches.

Evidence of high quality programme implementation was also apparent in the teachers' and children's comments about the factors that affected programme implementation. The majority of teachers commented on the importance of the children sitting in a circle. Some teachers observed a notable improvement in the quality of the lessons when the children were moved from sitting at their desks to sitting in a circle. Teachers also emphasised the importance of teacher preparation before implementing the lessons and also the need to implement the programme consistently every week. In addition, several teachers spoke about sharing their personal experiences with the children during the lessons. These findings suggest that the programme was implemented with high quality. The level of teacher preparation and use of personal resources to enhance the lesson indicates the teachers' commitment to high quality programme delivery. The quality of programme delivery is further validated by the children's responses during the participatory workshops. When asked about the programme and what they had learned the children recalled key themes from each module – 'Feelings', 'Friendship', 'Caring for others', 'Not fighting/bullying others'. 'Listening', 'Coping with your problems'. The accurate recollection of the programme content by the children suggests that they were engaged and actively learning throughout the programme. In addition, the Feelings Activity and Vignette Activity demonstrated the wide repertoire of vocabulary that the intervention group had accumulated in relation to feelings and also the notable increase in the use of active based coping strategies to deal with a problem situation. Further evidence of high quality programme implementation is apparent from the teachers' integration of Zippy's Friends in other areas of teaching (79.2% of teachers said they use the strategies taught in Zippy's Friends in other areas of teaching). Some teachers commented on the integration of the Zippy's rules in Physical Education and the cross curricular learning between Zippy's Friends, oral language development in English and Religious Education. This integrated approach is in line with recommendations from the Department of Education and Science in relation to the teaching of SPHE (NCCA, 1999).

Feedback from Teachers on Programme Implementation

The teachers made a number of recommendations to improve the implementation of Zippy's Friends. One of the most frequently reported recommendations was the need for a whole school approach. The majority of teachers commented on the need for all teachers in a school to receive training in the programme and the need for an additional Zippy's Friends programme for the senior cycle of primary schools. It is apparent that the teachers recognise the need to adopt a more holistic approach to promoting emotional wellbeing in schools. McLaughlin (1990) argues that this complex change will not occur unless teachers are encouraged to further develop their skills and are supported to take committed action. Teacher training is an essential part of the pre-implementation process. Whole school training helps teachers become familiar with each other's work, promotes networks and support between groups, and helps to reduce the problem of redundancy as a result of staff turnover (Hauf & Bond, 2002). All of the teachers who implemented the Zippy's Friends programme commented on the value of the training pre-implementation. Several teachers also spoke about the importance of the ongoing support which they received from the health promotion officers throughout the year. The teachers' views are supported by research in relation to programme sustainability. Bumbarger and colleagues (in press) argue that effective programme adoption and implementation requires initial training that is interactive and engaging, provides opportunities for behavioural rehearsal and is followed up with ongoing coaching, technical assistance and support. Furthermore, Fixsen and colleagues (2005) state that the conventional approach of 'train them and send them on their way' is ineffective in promoting high quality implementation. The need for ongoing support in addressing contextual factors in the school environment, local community and parental involvement would appear to be important in terms of effectively implementing Zippy's Friends, particularly within disadvantaged school settings.

A further recommendation from the teachers was the need for greater parental involvement. Most of the teachers recognised the need for parents to be informed about the strategies being taught in Zippy's Friends and also the need for some type of home exercise book, that both parent and child completed. Parental involvement has long been recognised as a key component of school success for low-income children. Specifically, parental involvement has been shown to be a key protective factor that fosters cognitive and emotional resilience in the face of multiple stressors (Garnezy, 1991; Waanders, Mendez and Downer, 2007). It is recommended, therefore, that parents are informed about the programme from an early stage and are provided with a means to support the implementation of the programme through the use of structured activities in the home environment.

The most frequently reported barrier to implementing the Zippy's Friends programme was lack of time. Teachers referred to the problem of finding the time to implement the lesson during the day when all the children were present. Several teachers also spoke about the issue of curriculum overload in teaching. The overall busyness of the classroom has implications for teaching a programme such as Zippy's Friends in terms of getting commitment from all teachers, finding the space, time and resources to support its implementation within an already over stretched timetable. As a solution to this problem, teachers suggested that the strategies used in Zippy's Friends (e.g. effective communication skills, listening skills, problem solving skills and coping skills) could be used as part of the overall classroom ethos. Therefore, it is recommended that a mental health promoting ethos that would support cross-curricular social and emotional learning be adopted in the classes and also throughout the school so that strategies taught in a programme such as Zippy's Friends would be reinforced throughout the curriculum and school day and not just during the 'Zippy class'.

A number of teachers also commented on the issue of implementing the first half of the programme too late in the academic year. It was recommended that the programme would be implemented over one academic year as it was deemed more suitable to learn about friendships (Module 3) at the start of the year as opposed to the end of the year when friendships are already formed. In addition, teachers who taught multi-grade classes recommended the implementation of the programme over one academic year so that children would receive all six modules. Several teachers spoke about difficulties in terms of some classes only receiving the first three modules and other classes receiving only the second half of the programme because it was taught over two academic years. These issues highlight the importance of understanding the local context within which programme implementation occurs. It is necessary for key stakeholders within each school to identify their own priorities and needs in terms of implementing the programme and to plan accordingly. This also underlines the importance of ongoing technical assistance throughout programme implementation so that teachers are supported in their role and empowered to make the necessary changes at classroom, school and community level.

Adapting the Zippy's Friends Emotional Wellbeing Programme to Disadvantaged Primary School Settings in Ireland

There appears to have been no major difficulties in adapting the programme to the Irish school setting. The Zippy's Friends programme fitted well in the context of SPHE for primary schools and supported the delivery of a number of strand units of the curriculum. In adapting an international programme, a key challenge is balancing the extent to which the programme is implemented as faithfully as possible to the original plan against the adaptations to the local setting that may be necessary in the course of implementation. The findings from the present evaluation suggest that the programme was implemented with a high degree of programme fidelity and that little or no adaptation was actually required. Throughout the implementation of the programme, support from the local health promotion specialists had an important positive impact and this was commented on by many of the teachers who referred to how important this support was in ensuring effective and faithful delivery. The commitment of the teachers and the support of the local health promotion staff were, therefore, critical to the successful implementation of the programme. In terms of the specific challenges in implementing the programme in the context of DEIS schools, the findings from both the SPHE and the Ethos questionnaires present some interesting insights into the local organisational context within both the intervention and control schools.

Impact on the Teaching of SPHE

The results from the SPHE questionnaire are revealing in terms of curriculum implementation. In contrast to what was expected, the teachers in the intervention group implemented more of the SPHE curriculum than the teachers in the control group. In relation to some strand units 'Relating to Others', 'Self' Identity', 'Myself and my Family', there were significant differences in the level of implementation between intervention and control group. These results indicate that as opposed to implementing the Zippy's Friends programme only, the intervention teachers implemented substantially more of the SPHE curriculum than the control group. It is possible that the intervention teachers were encouraged to teach other parts of the SPHE curriculum as a result of teaching Zippy's Friends. During the focus group review sessions one teacher spoke about the use of Zippy's Friends

as a backbone to implementing SPHE. This suggests that Zippy's Friends provided the intervention teachers with a framework and a structure within which to teach other parts of the SPHE curriculum. One of the key differences between the Zippy's Friends programme and other SPHE resources as reported by the intervention teachers is the comprehensive structured nature of the Zippy's Friends programme. Several teachers noted the lack of continuity between other SPHE resources and also the need for more structured resources in terms of having activity based lessons from which to work with. This could partially explain why the teachers in the control group did not implement as much of the SPHE curriculum as the intervention teachers. In terms of improving the SPHE curriculum, the need for more structured, child-friendly, comprehensive resources was the most frequently reported recommendation by intervention and control teachers.

The results from the case study of the two intervention schools (O'Sullivan, 2008; Clarke, O' Sullivan & Barry, in press) highlight the reality of programme implementation in disadvantaged schools and also the unique challenges faced by individual schools. The two schools were at very different stages of 'readiness' with regard to programme implementation and the study revealed that many factors which affect programme implementation are whole school practices whose particular combinations create a unique school culture within which programme implementation occurs. The findings from this case study indicate the need to understand the complex interaction of factors operating at the classroom, school and wider community level that impact on programme implementation.

The School Ethos

Overall, the results from the Ethos Questionnaire indicate that both intervention and control schools provide a positive and supportive school environment for the children and that all teachers within the schools work towards providing for the children's needs. It is clear, however, that links with the wider school community are less well established. Despite the fact that most teachers said that schools were receptive to approaches from community agencies in relation to health matters, both intervention and control schools report low levels of communication with these agencies. The majority of teacher also said that staff are not provided with the necessary information about local services. In addition, whilst most teachers said that parents are interested and supportive of the school and its governance, fewer teachers reported active involvement of a broad range of parents in school life. The results from the Ethos Questionnaire clearly illustrate the need for greater collaboration between schools and key stakeholders within the local community. Research suggests that programmes which actively involve parents, local community and key local agencies are more likely to have an impact on student behaviour, resiliency and mental health as well as learning (Durlak, 1995; Alvord & Grados, 2005; Brooks, 2006). The key challenge for schools, therefore, is to engage with key stakeholders in establishing local priorities, readiness for implementation and coordination of services across multiple levels and contexts within the community. The schools must view themselves as being a vital part of the wider community, in reaching out to and receiving support from parents and local agencies, in programmes that complement the efforts of the school to promote social and emotional learning and children's mental and social development. As Hargreaves and Fullan (1998) have suggested, it is now no longer a matter of "*whether teachers connect with what's 'out there' beyond the school, but how effectively they do so*" (p7) .

Throughout the Ethos Questionnaire the teachers in the intervention group were consistently less positive than the control group about the promotion of positive mental health through the ethos and environment of the school. More control teachers than intervention teachers agreed that (i)

the SPHE curriculum gives sufficient coverage to aspects of mental health (ii) mental health skills are promoted through the academic curriculum (iii) the school works closely with families and the local community regarding health services and (iv) that a broad range of parents are actively involved in school life. It is important to note that the intervention and control teachers completed the SPHE Questionnaire three months post Zippy's Friends training. It is possible that as a result of the intervention groups' training in mental health promotion and the implementation of the Zippy's Friends programme, the teachers were more sensitised to these issues and were, therefore, more stringent in their assessment of the degree to which mental health was promoted throughout the ethos and environment of the school.

Implications of the Research Findings

The results from the evaluation indicate that the Zippy's Friends programme had a significant positive effect on the children's emotional literacy and their coping skills. The programme also appeared to have a positive effect on the children's relationships with each other, their hyperactivity levels and on the teachers' relationships with the children. Results from the process evaluation revealed that the programme was well received by both children and teachers. The teachers commented on the activity based learning that took place throughout the programme and the manner in which the children were able to draw upon their own experiences and identify with the key themes of the programme. It is evident from this study that this type of structured child-centered, activity-based learning is an important factor in the success of a programme and is a necessary ingredient for the sustainability of emotional wellbeing programmes in schools. The call from the teachers for another Zippy's Friends programme at the senior end of primary school suggests the need to adapt the methodologies and strategies that have been used and proven to be effective in Zippy's Friends and apply them to the senior classes in primary schools. The recognition by teachers of the need for parental involvement and whole school training in the programme further supports the need for a more holistic approach to implementing social and emotional learning in primary schools. Collaboration among school staff, pupils, parents and community stakeholders is essential for developing capacity to support sustainable change. To help with this process, other interventions (such as MindMatters, The Gatehouse Project) have recruited a 'programme champion' and/or a core team whose role is to manage the project and act as the link with the wider community and external networks of support (Bond et al., 2001; Wyn et al., 2000). Building such a relationship, for example, with the home school liaison officer who has already established links with parents and the wider community, could be a valuable resource in developing sufficient capacity for effective implementation of the Zippy's Friends programme.

A major implication emanating from this study is that the assessment of implementation is essential in programme evaluation. The accurate assessment of programme outcomes is dependent on information on the level of programme fidelity and the quality of implementation. In addition, the study of programme implementation enhances an understanding of how the programme operates in specific contexts, e.g. in disadvantaged school settings, and the factors that assist and hinder effective programme implementation. This wealth of information in turn advances knowledge on best practices for replicating, maintaining and diffusing programmes such as the Zippy's Friends programme in an Irish setting.

This study employed a combination of quantitative and qualitative techniques. The teachers completed questionnaires in addition to taking part in focus group review sessions. The children also

completed a questionnaire, along with taking part in the Draw and Write Activity and participatory workshops. The use of a triangulation of methods greatly increases the credibility and validity of this study's finding. The findings from the children's participation in the study complement and support the teacher's views about the programme and programme effectiveness. Future evaluation of emotional wellbeing programmes in schools should consider the value of child participation and also the use of quantitative and qualitative methods in assessing the process of implementation and outcomes of an intervention.

Schools today are hard pressed to meet the many demands they face. Recent years have witnessed greater interest and growing pressure regarding student achievement. Some teachers referred to this issue in the SPHE questionnaire and commented on the pressure on teachers to focus on core subjects with the result that non-academic focused subjects are 'slotted' in where there is time. Given the pressure on teachers, it becomes important for programmes to be able to demonstrate their impact on academic performance. Recent research has provided clear and compelling evidence that not only shows the strong positive associations between social and emotional learning and academic success but also shows that emotional and behavioural health problems are significant barriers to learning (Payton et al., 2008; Adelman & Taylor, 1999; Waxman et al., 1999). In a review of 180 school based studies Payton and colleagues (2008) conclude that students who received social and emotional learning (SEL) programmes demonstrated improvements in multiple areas of their personal and academic lives. SEL programmes had a positive effect on students' social-emotional skills, attitudes towards self, school and others, social behaviours, conduct problems, emotional distress and academic performance. Notably SEL programmes were found to yield an average gain on achievement test scores of 11 to 17 percentile points.

The findings from the present study on the effect of Zippy's Friends on the children's academic achievement are positive, with the majority of teacher's observing improvements in the children's self-confidence, oral language, communication and listening skills. Further analysis of the effects of the programme on the children's academic achievement is planned at the twelve month follow-up. Children in primary school complete standardised reading and mathematics tests each year. The intervention and control children's standardised results from 1st, 2nd and 3rd class will be collected and analysed. A comparison between changes in the control and intervention groups academic scores will be made. Further analysis will be carried out to determine if there is a correlation between ratings on the *Emotional Literacy Checklist* and the *Strengths and Difficulties Questionnaire* and scores on the standardised academic achievement tests. With schools under significant pressure to perform academically it is becoming increasingly important to demonstrate the links between emotional and behavioural wellbeing and learning and to include a focus on academic and school success outcomes in assessing the effectiveness of emotional wellbeing programmes in schools.

Study Limitations

In considering the findings of the present study, it is important to also discuss the limitations of the study. Firstly, the programme was implemented over two academic years with the result that not all of the intervention teachers who taught the children in first class continued with them into second class. The change over of teachers resulted in different teachers assessing the children at the baseline and end of programme. Another limitation of this study is the lack of parental input / assessment of the effects of the programme on the children. It would also be useful to understand how parents view

their involvement in their child's education and more specifically their child's emotional wellbeing. Research carried out by O'Sullivan (2008) points to the need for schools in this study to encourage and assist in the involvement of parents in school activities. Further research in the area of parental involvement in education is required. Finally, the Ethos Questionnaire was completed by the teachers in the intervention and the control group three months after the teachers in the intervention group received the two day training in implementing Zippy's Friends. Had the teachers in the control and intervention schools completed the questionnaire before teacher training took place it is likely that this would have resulted in a more accurate comparison between control and intervention responses.

Conclusions

The findings from this pilot implementation of the Zippy's Friends programme indicate that the programme was successfully implemented in DEIS primary schools in the west of Ireland and lead to a number of significant positive effects for the pupils and teachers. The programme significantly improved the emotional literacy and coping skills of the children, reduced their hyperactivity levels and lead to improved relationships in the classroom. The programme compliments the teaching of the existing SPHE curriculum and has lead to a greater awareness of the importance of social and emotional learning in the curriculum. The planned twelve month follow-up of the programme effects, including the assessment of the programme impact on the children's academic performance, will clearly strengthen the conclusions that can be drawn regarding the longer term impact of this programme. However, at this stage, it is clear that the encouraging evaluation results support the broader roll out and sustainability of the programme within the primary school setting.

Making the programme available at a national level as a resource for enhancing curriculum delivery will require the support and collaboration of the national education and health agencies in the coordination of teacher training, ongoing support and quality assurance to ensure effective implementation at the local level. The Zippy's Friends programme is recognised by the teachers in this study as being a valuable resource to support the delivery of the SPHE curriculum. The need for a whole school approach, mechanisms to facilitate greater parental involvement, and an extension of the programme into the senior cycle years in primary school are all highlighted in the present study as being critical considerations for the future implementation of this programme. Supportive organisational and system-level policies and practices are needed in order to ensure the sustainable integration of the programme as a resource for enhancing the school curriculum.

The positive evaluation findings clearly indicate the benefits of the Zippy's Friends programme for the children and teachers in DEIS schools who participated in this study. These findings are in keeping with a broader base of international evidence on the benefits of emotional wellbeing programmes for children's emotional and social functioning and improved academic performance. Schools have an important function in nurturing children's social and emotional development as well as their academic and cognitive development. The integration of social and emotional learning into the school curriculum supports schools in achieving their educational mission. The increasing recognition that enhancing children's social and emotional competencies also improves their ability to learn and achieve academically supports the value of programmes such as Zippy's Friends and their incorporation into the school setting.

Zippy's Friends National Advisory Team

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	Dr. Treasa Kirk	Senior Inspector
Health Service Executive	Ms. Mary Kilraine-Hannon	Health Promotion Officer, HSE West
	Ms. Anne McAteer	Senior Health Promotion Officer, HSE West
	Ms Biddy O'Neill et al. (Susan Broderick in attendance)	National Health Promotion Programmes Manager
	Ms Anne Sheridan	Mental Health Promotion / Suicide Resource Officer, HSE West
National Educational Psychological Service Agency (NEPS)	Ms. Anne-Marie Sheehan	NEPS Psychologist
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	Ms. Aleisha Clarke	Researcher

APPENDICES



Appendix A. Zippy's Friends Child Participatory Workshop

1. Group Warm Up

2. Rules (Group Agreement)

3. Brainstorming (Intervention Group only)

Children are split into two groups and the teacher and researcher acts as scribe for the two groups. Four questions will be written on 4 sheets of poster paper. Children will brainstorm their ideas and their thoughts are written down on poster paper. The two groups will share their thoughts after the brainstorming and a discussion about what was written down will ensue.

Four Questions:

- What is Zippy's Friends all about?
- What did you like about Zippy's Friends?
- What did you not like about Zippy's Friends?
- What kind of things has Zippy's Friends taught you?

4. Voting

Based on the children's responses to the last question in the brainstorming session, the children are asked to decide the two most important things that the Zippy's Friends programme has taught them. They will each be given two post-its and have to stick their post-it on the poster of their choice. A number of posters will be hung up around the room, with the children's responses to the question: *What kind of things has Zippy's Friends taught you?.*

(Researcher emphasises the point that there is no wrong answer).

5. Recognition of Feelings (Control and Intervention Group)

Children have to state how the people in each scenario are feeling:

Scenarios I gave the children last year...

- Tom was pushed in yard
- Michael was going to Spain for four weeks
- Gráinne forgot to do her spellings last night
- Sharon said that nobody would play with her in yard.

- Paul’s brother took his PS2 from him and wouldn’t give it back to him
- Ronan’s sister got a new bike and he didn’t.

6. Vignettes Problem Solving Activity

- a. Louise took her basketball to school and it disappeared from under her desk before break. When Louise went out into yard, she saw that another girl in her class was playing with a basketball that looked just like her ball.

Questions:

- How did Louise feel?
- What could Louise do?
- Who could she tell?
- If you were Louise’s friend what would you do to help her?

- b. Ryan’s friends are all going to the cinema for Paul’s birthday. Ryan asks his Dad if he is allowed to go but his Dad says no because he got a note home from Ryan’s teacher today to say that Ryan is messing in class and not doing his work properly.

Questions:

- How does Ryan feel?
- How does Ryan’s Dad feel?
- How do you think Ryan reacts when his Dad says no?
- What could Ryan do to feel better when his Dad says he is not allowed to go?

7. Closure (Game and Group Yell)

Appendix B.

Script for the Schoolagers Coping Strategy Inventory

Hello everyone. My name is ... and I work in Sligo/Galway/Donegal. My job is to go around visiting all the schools. For the past two weeks I have been asking the boys and girls in first class if they would help me. I would like to find out all about what it's like being a child nowadays because it is a long time since I was your age.

Now, so far all the boys and girls in the other schools have been really good at helping me. They all really tried their best but your teacher Ms... was telling me she thinks your going to be the best little helpers ever . She also told me that you're the best listeners in all of Sligo/Galway/Donegal.

What I need you to do today is to fill in this sheet. It's all about you. I will show you what you have to do in a minute but don't worry if you don't understand, both myself and Ms ... are here to help. Before I give you out the sheets I want to tell you about the school I visited yesterday. I asked the children in first class to think of a time when they were worried or nervous about something. Would you like to see some of the things they came up with?

- Pictures of the 3 stories are put up on the board and discussed one by one.
1. One little boy said that he was worried about his granny. She is very sick and had to go into hospital last week. He was worried about her because she didn't give him a hug like she always did and she wasn't very chatty.
 2. Another boy said that he went shopping with his Mum at the weekend and he was looking at the toys in the shop but when he turned around his Mum was gone. He thought she had left without him and he was really worried.
 3. One girl said that one day she came into school his teacher called her for her homework. She went to take out her homework copy and reader, but when she looked in her bag she couldn't find it. She was worried because she was afraid her teacher might think she didn't do it. She thought his teacher might be really cross with her.

Now boys and girls what I want you to do is to think of times when you were worried. I want you to think of them in your head for a few seconds. I am going to stop talking and we are all going to be really quiet and think of times when we were worried about things just like the children in the school yesterday. It doesn't have to be like their worries, it can be totally different. I know I can think of lots of things I worried about before. You can put your head down and think about them if you like... ..

- 30 second pause

Right instead of telling me about times when you were worried, I want you to keep those thoughts in your head and we are going to fill out this sheet. This sheet is asking you questions about your worries. Before we do this sheet we are going to do a practice sheet. While I am handing out the sheets will you get your pencil ready. You do not need a rubber.

- Sheets are handed out (the first page is a practice sheet).

Does everyone see where it says Name at the top of the page? Will you write your name on the line please. You see underneath Name it says Boy and beside this there is a box. There is also the word Girl and beside that there is a box, if you are a boy will you tick the boy box and if you are a girl will you tick the girl box.

Underneath this you will see some writing and some empty boxes. Now I need you to listen carefully to what you have to do. At the top it says "How often do you do this?" Can everyone put their finger on the No. 1... Excellent. I will read what is says beside this. It says: "Share my sweets with my friends". Now they are asking you how often do you share your sweets with your friends. You have four options "Never, Once in a while, A lot or Most of the time" Can you put your finger on never... once in a while... a lot... and most of the time. Well done! Now you have to decide how often you share your sweets with your friends. Remember there are no right or wrong answers. What matters is that you are saying what you do. Some of you might never share your sweets and that's fine and some of you might share them most of the time and that's fine too! If I wanted to say I never shared my sweets, where would I put a big tick?... Well done. If I wanted to say I share my sweets a lot, where would I put a tick? Excellent.

- Researcher models putting a tick in the Once in a while box and asks the children to choose a box to tick.
- Researcher asks the teacher how often she shares her sweets with her friends. Teacher gives a different answer to the researchers (modeling that both answers are fine, there are no wrong answers)
- Researcher repeats this process of explanation for the second example "Go to the beach when it is sunny" and moves around the classroom to ensure all the children understand what they are doing.
- Researcher asks the children to put up their hand when they have completed each one so that she is able to identify children having difficulty.
- Researcher emphasises that there are no right or wrong answers.
- Children turn to page two.
- Researcher explains what they have to do.

Now this page is the exact same as the last page you just filled in except there are more of them. Remember I asked you to think about times when you were worried about something, just like the children in the other school yesterday. Have you all thought of something. Now I want you to try and remember how often you did these things when you were worried.

Put your finger on No. 1... Excellent. It says 'Be by myself, be alone'. So when you were worried about things how often did you go off into a quiet corner or room so that you could be by yourself? Was it "Never", "Once in a while", "A lot" or "Most of the time"? Remember there are no right or wrong answers but it is very important that you tick the right box for you. If you never go off to be by yourself when you are worried about things tick the box under 'Never'. If you do it once in a while tick the box under 'Once in a while'. If you do it a lot, tick the box under 'A lot' and if you like to be by yourself most of the time when you are worried, tick the box under 'Most of the time'. Put your hand up when you have this done. Well done!

- Teacher and researcher circulate the class and ensure everyone has filled out the first one appropriately.

We will now move on to number 2. It says... ..

- The researcher moves onto the second statement and explains it in the same way.
- Researcher and teacher circulate the room and check that each pupil is on the correct line and looking at the appropriate boxes to tick.
- When the 26 statements are completed the researcher congratulates the pupils on doing so well and she tells them that we are half way there and they are doing so well.
- Researcher asks the children to turn to page 4.

Now if you can all turn to page 4. Look for the number 4 at the bottom of the page. This page looks like one we have done before doesn't it? But look there is something different. This time we are being asked "How much does this help?". Can everyone put their finger on No. 1. It says "Putting a plaster on my knee when I fall". So they are asking how much putting a plaster on my knee when I fall helps? We can tick only one of the four empty boxes The first box says 'Never do it'. So if you never put a plaster on your knee when you fall you tick this box. The second picture says 'Does not help'. So if you have put a plaster on you knee when you fell and it did not help you tick this empty box below it.. The third one says 'Helps a little'. If you have found a plaster to help a little you tick the box below this and the last one says 'Helps a lot'. So if you think a plaster helps a lot you can tick this box.

Again there are no right or wrong answers, Some of you might tick the never box because you don't use plasters when you fall. Some of you might tick the helps a little box because you find the plaster helps the pain to go away. Both answers are correct. If I was to answer this box I would tick Helps a little like this. Teacher models ticking this box.

Ms (teacher), what box would you tick? Teacher says a different answer to highlight both answers are right

- Researcher asks the children to tick the box most appropriate for themselves.
- Teacher and researcher move around the class to ensure the children understand what they are doing.
- The same process of explanation is repeated for the second example and researcher ensures all the children know what they are doing before moving to the next page.
- Researcher asks the children to put up their hand when they have completed each one so that she is able to identify children having difficulty.
- Children are asked to move on to page 5 when everyone is finished.

Now children, this is the exact same as the last page only there are more on the page. You are being asked How much does this help. You have 4 options. Can everyone put their finger on the first option 'Never' ... the second one 'Once in a while' the third option 'Helps a little' and the last option 'Helps a lot'.

Right I need you to think back to times when you were worried about something. Great! Can everyone put their finger on No. 1 please. It says be by myself, be alone. So when you are worried about things how much does it help if you go off into a corner or into a room on your own. How much does it help you to feel better. If you don't go off on your own, you can tick the box below Never do it.. If you do it and you find it does not help you tick the box below where it says Does not help. If you like to be by yourself and find it helps a little you can tick the box below where it says Helps a little. If you find it helps a lot you can tick the box below where it says Helps a lot.

- Teacher and researcher move around the class and ensure the children know what they are doing.
- Researcher asks the children to put up their hand when they have completed each one so that she is able to identify children having difficulty.
- Children are asked not to move on to the next one until we are all ready.
- Researcher reads out the 26 statements and ensures that everyone is keeping up and able to understand the exercise.
- When everyone is finished the researcher thanks the children after collecting all the sheets and praises their ability to listen and carry out such excellent work.
- Researcher asks the children would they like to hear the rest of the children's stories from yesterday.
- Researcher explains:
 1. The little boy who's Granny was sick decided to go home and make his Granny a card for her. He made a really nice one for her and he felt much better after making the card because he drew a lovely picture of him looking after his Granny in hospital. His Granny loved the card and has it beside her bed for everyone to see.
 2. Remember the boy who was lost in the shopping centre. He was really worried his Mum had left him but he told himself not to cry and to have a look around the corner. He called her and when he looked around the corner he saw that she was right there looking at some books that she was going to buy him. He was so thrilled and hugged and hugged his Mum.
 3. Remember the little girl who forgot her homework and was really worried the teacher would be cross with her. Instead of crying she decided to ask her friend could she borrow her book. She went up to the teacher and showed her her schoolbag with only her lunch box in it. She explained how she forgot her homework but she did it all and she did her reading from her friend's book. Her teacher was so happy that she told the truth and that she had borrowed her friend's book to do her reading. This little girl was so delighted with herself for the day!

So you can see the boys and girls in the school yesterday had lots of little worries just like we all have but they came up with different solutions that helped make them feel better just like we can all think how to best solve our worries.

I really think you were all fantastic today! You were the best group of workers I have ever visited. I think your teacher is very very lucky to have you, what do you think?

I would really really love to come back and visit you later on in the year, would you mind if I come back?

- Researcher thanks the children for working so hard and tells them is looking forward to seeing them later on in the year.

Appendix C.

Script for the Draw and Write Activity

Hello everyone. My name is Aleisha and I have come from the University in Galway. I am going around to lots of different schools in Donegal, Sligo and Galway and I visit the children in first class. I want to find out what its like being 7/8 years old because I can't really remember so I need your help.

I'm going to ask you if you would draw two pictures for me today. I brought colouring pencils and paper with me. The drawings won't take very long and while you are drawing I will come around and ask you about your drawing. You don't have to tell me if you don't want to but I would love to know.

Before I hand out the sheets, I am going to tell you about something that happened to a little girl in first class in another school last week. The children came in from yard and a little girl (her name was Elenor) came up to me while the other children were taking off their coats. Elenor said that she was with her friends at the start of break and they were about to play a game together. They had to pick teams but another girls in her class said that she couldn't play because she wasn't fast enough. All her friends agreed and so Elenor had nobody to play with while all her friends played her favourite game. Elenor stood there all alone, she didn't know what to do.

Now, what I would like you to do is to think of a time when just like Elenor you were sad or upset about something. It doesn't have to be a time in the yard. It might be something that happened at home or in the classroom or a friend's house. I want you to think quietly about this time when you were sad or upset in your head first. You can put your head down and picture it in your mind.

Now I am handing you out your sheets and colouring pencils. Just stay on the first sheet for now. On the first sheet I would like you to draw the time something difficult happened to you. Think about this time and draw it for me. I will go around to each of you and you can tell me about your drawing.

- Children are given 10 minutes to draw their picture
- Children write a sentence about a time that they felt sad underneath the picture.
- Researcher will act as scribe for children who choose not to write.

Your drawings are excellent, you all put so much effort into that! Well done. I have just one more thing to ask you to do. You see how you have a second page, well can you all turn over to this page please. On this page I would like you to draw picture about how you could make things better. In the first picture you drew about the problem, for the second picture I'd like you to draw about how you could make things better. If we think about Elenor for a second, her first picture was about her friends playing in one corner of the yard and she in the other on her own. For the second picture she would have drawn what she could have done to make things better for herself. I would like you to draw what you could do to make things better for you in your problem situation. I will come around and you can tell me what you are drawing.

- Researcher praises the children for their efforts and thanks them for being so helpful
- Researcher explains to the children that she would like to tell then what happened the following break when Elenor went back into the yard.

Now before we finish up I would really like to tell you about what happened to Elenor when she went out to yard for lunch break. Well she was really worried that she would be left on her own for lunch break so she decided she needed to do something about it. She thought to herself “*There is no point in getting mad at my friends because they definitely wouldn’t let me play then*”. So she decided to talk to them. She said “*I don’t think its fair not letting me play, I really love playing that game and anyway I have my runners on my today so I can run fast. I really don’t want to be on my own for this break. Please can I play?*” The girls looked at each other and all said yes she could play and they even said they were sorry for not letting her play during first break.

So you see just like the way you drew a picture about how you could make things better, Elenor thought of a way too and see how happy she was when she did it!

Feedback Sheet

Ok, that’s the end of today’s activities but I have one more job to ask you to do. Can you please turn to the very last page of your worksheets and you will see 3 faces on it. I would like you to think about how much you enjoyed doing what I asked you to do today. If you really enjoyed it you can colour the smiley face. If your not sure you can colour the middle face and if you didn’t like it you can colour the sad race at the end. Does everyone understand. Please colour one face only.

Questions and responses for the Draw and Write

Scribing Question

Can you tell me about your drawing?
Who is in your picture?
Where are you?
What is happening?
How did you feel?

Children who can’t think of what to draw

- **Picture one**

Remember I was telling you about Elenor, what happened to her in yard?
Have you ever had a problem like Elenor at home or at school?
Has anything ever happened at home or at school that you didn’t know what to do?

- **Picture two**

What do you think Elenor could do to make things better the next time she went out into the yard?
Ok, you drew a picture of the time you , now what do you think you could have done to make things better for yourself?

Children who are unable to think of anything after discussing it with them

- **Picture one**

If you can’t think of anything don’t worry, just draw a picture about Elenor in the yard when her friends said she couldn’t play.

- **Picture two**

If you can't think of anything don't worry, maybe you would like to draw a picture about Elenor and what she could do to make things better for herself out in the yard.

Children who demand more attention than others

Your drawing is very good, well done. Now I must go around and hear about all the other beautiful drawings.

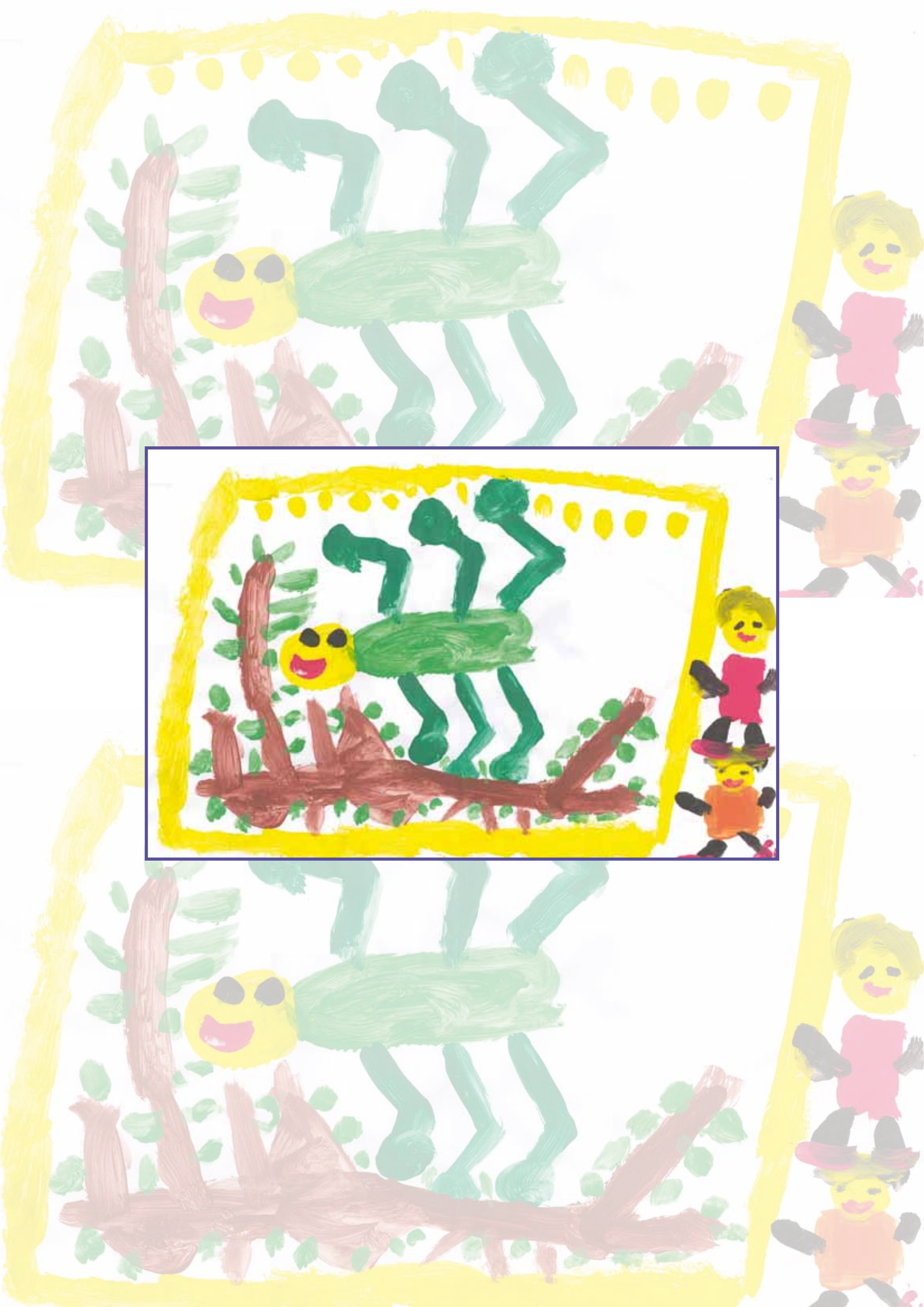
Appendix D.

Ethos Questionnaire Results

Percentage of teachers in Intervention and Control group that said the following occurs in their school always / often

	Intervention (n=30)%	Control (n=10)%
How often do these occur in your school?		
1: Staff members act as role models	96.7	90
2: Girls and boys have equal access to schools resources	100	100
3: Staff seek help when feeling stressed	46.7	10
4: Staff have clear understanding about emergency procedures	83.3	60
5: Staff rehearse evacuation plan	43.4	60
6: Promoting children's health is priority of school plan	70	80
7: School provides for welfare need of children and staff	90	80
8: There is procedure that allows children to voice concerns about inappropriate/abusive behaviour	80	90
9: Support available to children in distress	60	70
10: Support available to teachers in distress	33.3	60
11: Value of counseling is recognised as high priority in school	66.7	70
SPHE and Mental Health Promotion		
1: Adequate time allocated to SPHE on our school	93.3	80
2: SPHE curriculum gives sufficient coverage to aspects of mental health	63.3	80
3: I feel well equipped to educate children about positive mental health.	73.3	40
4: The work in the school shows consideration of peoples cultural backgrounds when dealing with positive m health.	56.7	70
5: Staff encouraged to attend training programmes about mental health .	33.3	40
6: Children develop skills in help-seeking and communication.	80	80
Environment and Ethos		
1: Physical environment of the school contributes to positive mental health of children and staff.	70	80
2: Positive mental health skills are promoted through the academic curriculum.	63.3	80
3: Opportunities provided for staff children and parents to develop positive relationships	63.3	60
4: All children encouraged to participate in decision making process of school.	43.3	40

5: Opportunities are provided for children to experience success in variety of ways.	93.3	90
6: School discourages violence	96.7	90
7: School ensures valuing of all cultures.	83.3	90
8: School caters for children who experience periods of mental health problems.	43.3	40
Support and Local Services		
1: School committed to regular exchange of info between families, local community and school regarding m health services in the area.	36.7	80
2: Staff at school are clear about procedures for identification and referral of children with specific mental health problems.	53.3	60
3: Support staff work closely with teachers in promoting positive mental health.	73.3	90
4: School works with local mental health community services	26.7	40
5: Staff are provided with information bout local mental health services	13.3	30
6: School is receptive to approaches from community services.	76.7	80
Parents		
1: Parents are interested and supportive of school	80	80
2: Broad range of parents are involved in school life.	50	70
3: Parents are encouraged to help their children consolidate their learning at home.	90	90
4: Parents are given opportunity to participate and learn about SPHE content.	53.3	60
5: Parents are consulted when sensitive content areas in health are to be addressed.	90	80
6: Parents regularly ask questions about their children with teacher/principal	73.3	90





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