



Whole School Approach to Emotional and Mental Well-being: What Works Toolkit Roots of Empathy

Public Health Wales | Date of Review: 2021

This summary is part of a series produced for the Whole School Approach to Emotional and Mental Well-being What Works Toolkit. They are intended to help schools make informed decisions when choosing interventions to improve and promote mental well-being. The interventions reviewed are not endorsed by Welsh Government or Public Health Wales.

Public Health Wales, on behalf of Welsh Government, have examined the best available evidence for interventions to find out if they are effective in improving mental and or emotional well-being outcomes in learners or staff, when delivered in a school setting.

Further information about the methodology and how using evidence can support decisionmaking is presented as supplementary information.

Roots of Empathy

The aim is to develop empathy and emotional literacy. The programme seeks to foster social and emotional understanding, promote pro-social behaviours e.g., sharing, kindness, fairness, and reduce bullying and aggressive behaviours.

A local infant and parent visit the classroom throughout the school year, and a trained Roots of Empathy Instructor coaches learners to observe the baby's development and to label the baby's feelings. In this experiential learning, the baby is a lever which the Instructor uses to help children identify and reflect on their own feelings and the feelings of others.

Roots of Empathy was developed in Canada by social entrepreneur, Mary Gordon.

Further information about the programme is available from https://rootsofempathy.org/ programs/roots-of-empathy/

Evidence rating:

Public Health Wales reviewed the best available evidence of effectiveness for this intervention in Autumn 2021. An expert panel concluded that there is **some promising** evidence that Roots of Empathy may have a positive effect on health and well-being, but further research is needed.

Further information about how consensus on this evidence rating was reached is available within supplementary information.

Implications for practice:

This intervention requires a significant investment in terms of financial cost and curriculum time. Therefore, schools should think carefully about what they expect this intervention to achieve and how they will make a judgement about whether or not it has worked.

As with all programmes of this type, delivering all of the programme components as the developer intended is usually critical to success. Schools and their partners should ensure they can commit the time required before starting the programme.

If already using this intervention, schools should think about how they might assess the impact for participants and the wider school community.

Aspect(s) of well-being it intends to support:

Roots of Empathy supports the emotional dimension of well-being by developing emotional intelligence and social awareness. Both are important factors in promoting and protecting mental well-being.

Find out more about mental well-being and the things that influence it here.¹

Mechanism of action:

The developers describe the Roots of Empathy model as drawing on research and theory that emphasises emotional and social understanding as critical to children's interpersonal relationships and behaviours.

Through teaching emotional literacy, emotion regulation and infant development the programme aims to increase empathy. This helps children to recognise and respond appropriately to the way they feel and how others might be feeling, resulting in the development of prosocial behaviours such as sharing, helping and including others. Developing knowledge and skills that increase empathy is also seen as key to reducing bullying and aggression and helping children to maintain positive relationships.

Intended recipients:

Delivered by a third party

It is suitable for all children. It is usually delivered to a whole class/group of learner

Age range: 4 years – 14 years

There are separate versions of the programme for children aged 5-6 years; 6-9 years; 9-12 years and 12-14 years of age.

Resource requirement:

- 1 class per week for 27 weeks. Each class lasts 30-40 minutes.
- Intervention curriculum is divided into 9 themes, with 3 classroom visits supporting each theme.
- A trained Roots of Empathy Instructor coaches learners through the process.
- A local infant and parent must be willing to visit the school as per the intervention schedule.
- The Roots of Empathy Instructor provides the school with a Learning Materials Kit, Family Visit Kit and a programme Start-up Kit.
- The classroom teacher supports the instructor and the visiting family, attends and supports facilitation of the classes.
- Delivery of 1 course, including all equipment and resources costs circa £3000.
- To deliver 2 courses in an academic year, with the same instructor, costs circa £3500. Running the intervention for a second academic year, with the same instructor, reduces the cost to £1000 for 1 course and £1500 for the delivery of 2 programmes in that year.²

Language:

Intervention delivery resources are available in English, Welsh, French Canadian, Traditional Chinese, Dutch, Spanish (Mexican), German and Japanese.

There is authorised Welsh translation of all training and delivery resource material for both facilitators and participants.

3

Student

Supplementary Information

In March 2021 Welsh Government published the '**Framework on Embedding a Whole School Approach to Mental and Emotional Well-being'**, with the objective of supporting schools to meet the mental health and well-being needs of their students and staff (Education Wales, 2021). One of the ten key requirements and actions documented in this framework was that schools should ensure they only implemented well-being interventions with a 'sound or innovative and developing evidence base'. The What Works Toolkit aims to provide a summary of the evidence of effectiveness to help schools make informed decisions when choosing interventions.

Methodology

- Information was gathered about the intervention from documentary sources or through direct contact with the provider/developer.
- A review of the best available evidence found in the published literature was undertaken.
- A multidisciplinary panel of experts from health, academia and education agreed on the evidence of effectiveness and an evidence rating statement to support it.
- To reach consensus on an evidence rating, the outcomes considered are those that the intervention intends to improve. Mental and emotional well-being outcomes can include self-confidence or self-esteem, emotional intelligence, and relationship skills, as well as more clinical outcomes such as anxiety.

Rating	Evidence
++	There is good evidence from reliable studies that this intervention is likely to have a positive effect on health and well-being.
+	There is some evidence from studies that this intervention is likely to have a positive effect on health and well-being but this is not conclusive.
+/-	There is some evidence from studies that this intervention may have a positive effect on health and well-being but further research is needed.
0	There is no research evidence on the effectiveness of this intervention or, what is available has significant methodological weaknesses preventing conclusions on effectiveness to be drawn
-/+	There is some evidence from studies that this intervention may be ineffective in improving health and well-being outcomes but further research is needed.
-	There is some evidence from studies that this intervention is likely to be ineffective at improving health and well-being outcomes but this is not conclusive.
	There is good evidence from reliable studies that this intervention is likely to be ineffective at improving health and well-being outcomes.

• The evidence ratings used in the review were:

 A full technical report with detailed information on the methods, findings, conclusions and recommendations is available upon request. Please email: <u>hi-programme.support@wales.nhs.uk</u>

Understanding mental health and well-being

Public Health Wales has developed a <u>Conceptual Framework for Mental Well-being</u>³. This demonstrates the relationship between mental well-being and other health determinants as well as describing areas for action to promote and protect well-being. The framework presents the building blocks of individual mental well-being, how we think; how we understand our feelings and those of others; how we form relationships; how we understand and make sense of life experiences and how we see our place in the world.

It also recognises the importance of community mental well-being which arises from the connections, networks, and sense of belonging within a community; the shared identity and experience that comes from place, and from how power is experienced and shared.

The **'Framework on Embedding a Whole School Approach to Emotional and Mental Wellbeing**'⁴ covers a pathway from prevention and promotion of good mental well-being to treatment of mental ill health. It is important that when considering interventions schools can understand where on the pathway an intervention is trying to act, and what aspects of mental well-being an intervention aims to improve.

Understanding and using evidence

There are many different types of evidence. It can come from formal research and evaluation, expert opinion, or lay knowledge and experience.

Certain types of research and more helpful than others in understanding whether an intervention or programme actually makes a difference. Usually, to answer that question fully, you need to compare those pupils, classes or schools who received a programme with those that did not. Other forms of evidence are really important to understand whether people found the programme helpful; whether it was easy to deliver or use.

The number of studies which have been carried out and the number of participants involved in a study are also important. We would have more confidence in a study on hundreds of people than one on 20 or 30 for example. The quality of the research, and how well it was carried out, are also important. We can be much more confident that the findings of a good quality study are true rather than by chance than we can poor quality studies.

Using evidence to understand whether an activity is achieving the aims it set out to helps to make the best use of available resources. Basing decisions on published evidence supports credibility and gives schools confidence in the approaches taken.

³ https://phw.nhs.wales/topics/promoting-individual-and-community-wellbeing/

⁴ https://gov.wales/framework-embedding-whole-school-approach-emotional-and-mental-wellbeing