



# Whole School Approach to **Emotional and Mental Well-being:** What Works Toolkit

The Blue's Programme

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.

# The Blue's Programme

The aim is to support young people, aged 13-19 years, to acquire the tools they need to look after their emotional well-being. The programme teaches emotional resilience and develops the skills needed to manage and reduce low mood and anxious thoughts.

The intervention includes a wide range of activities delivered through group sessions and tasks completed at home that allow learning to be put into practice.

The Blue's Programme was developed by Professor Paul Rohde and Dr Eric Stice in the US. In the UK, Action For Children hold the license for delivering the programme and are currently delivering throughout England and Wales. Further information about the programme is available from: https://www.actionforchildren.org.uk/our-work-and-impact/children-and-families/ good-mental-health/blues-programme/

#### **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 evidence** from studies that The Blue's Programme is likely to have a positive effect on health and well-being but this is not conclusive.

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

#### Implications for practice:

The Blue's Programme is delivered by third party trained facilitators. This means that schools can be confident in the quality and consistency of delivery and running the intervention would not impede upon school staff time.

The intervention is designed for learners with early signs or symptoms of anxiety or depression and is not usually delivered as a single one-off programme. Schools will need to think about the needs of their school population and whether making this intervention part of a core offer is feasible and sustainable.

Local Authorities, Health Boards and Regional Partnerships could consider how they might be able to facilitate access to the programme for all schools in their area in order to embed delivery into the local system offer to support the health well-being of young people.

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

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

The Blue's Programme supports an understanding of emotions and their triggers which is important to protecting individual mental well-being. It also supports development of social relationships, another crucial factor in promoting positive well-being.

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

#### Mechanism of action:

Often those at risk of developing anxiety or depression can focus on negative thoughts. This intervention aims to help participants notice and change their negative thinking patterns. The programme also teaches learners to develop response plans to future life stressors, aims to build group rapport and increase participant involvement in pleasant activities.

The developer states that the intervention is based on an approach which has theoretical roots in cognitive behaviour therapy (CBT). The NHS describes cognitive behavioural therapy as a talking therapy that can help manage problems by changing the way people think and behave.

# **Intended recipients:**



#### **Indicated** (for those with early signs/symptoms)

The intervention is suitable for learners with early signs or symptoms of anxiety or depression, or those at risk of developing these conditions. The programme is not suitable for those who have clinical depression or those experiencing suicidal thoughts. A validated survey is used to identify leaners who may benefit from the intervention.

**Age range:** 13-19 years



Student

# Resource requirement:



Delivered by a third party

- 1-hour long sessions delivered in term/curriculum time over twelve weeks.
- 6 group sessions for up to 10 learners are delivered fortnightly.
- Schools required to provide a 'link worker' responsible for administrative and organisational tasks associated with the programme and to act as the safeguarding link.
- Intervention is delivered by trained Action for Children facilitators, no training or formal preparation time is required for school staff.
- Workbooks and resources are provided by the facilitator within the cost of the programme.
- Estimated cost for 1 programme is circa £2000. Action for Children were unable to give an accurate estimate for the cost of delivering individual programmes because this varies depending on how many programmes are delivered at a school over an agreed period of time, schools usually opt for multiple courses, which reduces the unit cost.<sup>2</sup>

#### Language:

Intervention delivery and all resources are available in English and Welsh language.

The Blue's Programme <sup>2</sup> All estimate costs dated 2021

**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.
- The evidence ratings used in the review were:

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.

 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><sup>3</sup>. 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' 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.

<sup>&</sup>lt;sup>3</sup> https://phw.nhs.wales/topics/promoting-individual-and-community-wellbeing/