

Exploring the Experience of Implementing a Whole School Peer Led Emotional Self-
Regulation Programme.

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Summary

This document is organised into three sections: a review of the literature, an empirical chapter, and a reflective account on completing the thesis. The literature review begins with an overview of mental health in children and young people and how the research sits within this context. The review goes on to look at how schools are supporting the development and promotion of emotional wellbeing through social, emotional programmes. The empirical chapter details the qualitative study carried out, where the views of adults and children involved in a peer led emotional self-regulation breathing practice were gathered. Semi-structured interviews and focus groups were used to gather participants views, with the aim to understand what both supports and hinders the implementation of a peer led whole school emotional self-regulation programme. Following data analysis implications for school staff and Educational Psychology practice are discussed, along with future research directions. The reflective chapter provides an account of the researcher's journey of completing the thesis. Covering the initial stages of design and the epistemological approach of the research, through to a discussion on the implications of the study, and how it relates to Educational Psychology practice.

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Literature Review

1.1 Introduction

The Department for Education (DfE, 2021) recognises that taking an evidence-informed approach to mental health and wellbeing in schools leads to improved pupil emotional health and wellbeing, helping readiness to learn. Within the current climate the Public Health England COVID-19 mental health and wellbeing surveillance report (2021) suggests whilst some evidence shows children have generally coped well during the pandemic, other evidence suggests some children have experienced greater negative impacts on their mental health and wellbeing. Deighton et al. (2019) carried out a large-scale community-based data set of 28,160 adolescents to explore school-based prevalence of mental health problems and characteristics of the increased odds of experiencing them. Their findings indicated that the scale of mental health problems in England is much higher than previous estimates, with two in five young people scoring above thresholds for emotional problems, conduct problems and hyperactivity. Their findings were consistent with other reports of increasing rates of mental health problems in children and adolescents (Fink et al., 2015; Pitchforth et al., 2018). These increases may reflect potential improvements in reporting accuracy by young people because of greater recognition of mental health issues (Pitchforth et al., 2018), or may represent an actual rise in difficulties (Deighton et al., 2019). It is important to note that results of studies such as these may be influenced by the types of assessment used, and who completed the assessments (Polanczyk et al., 2015). There is low to modest agreement between different reporters of child mental health problems (Cheng et al., 2018), with some assessments potentially increasing the likelihood of false positives

(i.e., identification of mental health problems where there are none) and false negatives (no identification of mental health problems where these do in fact exist) (Goodman et al., 2000). Through their green paper, the Department for Health, and Department for Education (DfE, 2017) recognise that schools are in a potentially powerful position to deliver effective interventions to support children and young people's wellbeing, due to them providing long-term and near universal access to support. Furthermore, given that children and young people spend significant amounts of time in school, schools can provide an environment that promotes mental health with programmes being implemented as part of a preventative approach at relatively low costs, compared to more intensive and targeted interventions.

Conversely, the Children's Commissioner reported in 2019/2020 that availability of support and access to targeted children's mental health services was found to not be adequate with only 4% of children accessing mental health support during this time (Gilhooly & Clarke, 2021). The DfE (2017) paper on children's mental health set out a target for children and adolescents to experience a 4-week waiting list. The Children's Commissioner report found only 20% of children referred to mental health services started treatment within 4 weeks (Gilhooly & Clarke, 2021). Most existing interventions linked to emotional wellbeing position adults as the agents of change. Building on understanding alternative avenues to supporting emotional wellbeing, the DfE (2017) commissioned a review of the current peer support initiatives implemented within schools, to identify ways to increase and improve the quality of peer support for mental health made available for children and young people by schools.

There is an increasing evidence base that school level interventions can enhance resilience and functioning of young people, and for young people living in

deprived areas such interventions may be particularly important (Charlton et al., 2020). Weare and Nind (2011) conducted a systematic review of mental health work in schools and found targeted skills work alone is not enough and that for optimal impact, skills work should be embedded within a whole-school, multi-modal approach which includes school ethos, education of teachers, liaison with parents/carers, parenting education, community involvement and coordinated work with outside agencies. Taking a well implemented whole school approach was therefore found to be more effective regarding outcomes in comparison to a skill focused, curriculum-based approach alone. There is growing interest in mindfulness-based interventions (MBI) in schools (Tudor et al., 2022) to develop intrinsic emotional regulation to positively enhance the cognitive, behavioural, and mental health outcomes of children (Dunning et al., 2019). However, there is also increased awareness of issues related to implementation of these and other programmes, which are likely to impact interventions and lead to variations in outcomes.

This review aims to consider existing literature around universal emotional wellbeing interventions in schools aimed at improving the emotional wellbeing of children and young people, including theoretical underpinnings and subsequent implications for implementing interventions of this kind in schools. There will be a focus on literature reviewing mindfulness-based approaches in schools, as well as considering the effectiveness of peer led interventions as an alternative approach to implementation. The review will be divided into three main sections. The first will explore: universal wellbeing interventions with a focus on mindfulness-based approaches within schools and importantly, consideration of implementation issues which are likely to impact the evidence base of these. The second section will focus on emotional self-regulation and the link to emotional wellbeing, and how schools

implement programmes to help in the development of self-regulation. The third aspect of the review will focus on peer led programmes within schools and consider the viability of this approach.

1.2 Literature Review Approach

This review will take a narrative approach as opposed to a systematic one, as this will allow for discussion and organisation of relevant themes and theoretical concepts that are important for the exploration and understanding of this under researched area (Snyder, 2019). A thematic approach to structuring a literature review means organising the literature by theme or category (Averyard, 2018). An extensive search of the literature was carried out between October 2021 and October 2022 to inform this review. The search encompassed the following academic databases: PsychInfo; ScienceDirect; Springer Nature; Taylor & Francis along with the use of Google Scholar. The following key words and combinations of them were used as the search terms: 'mindfulness-based interventions', 'self-regulation breathing practices', 'peer led interventions', 'peer mentoring', 'self-regulation in schools', 'peer influence on self-regulation', 'implementation of whole school approaches' and 'Implementation Science'. The stage within school, so primary or secondary education as a search term was excluded from the search criteria. Although the focus of this research is within primary schools, to ensure a breadth of research literature was reviewed, both stages of education were included. In addition, a search was conducted on two theories relevant to self-regulation and peer led programmes. These were 'Polyvagal theory' and 'self-determination theory'. Reference lists and citations of included studies also helped to identify additional areas of research, which could then be included within this review.

Both quantitative and qualitative research methodologies were included when reviewing the existing literature, to provide balance to the analysis and evaluation. UK based research was the primary focus of this review as the current study will take place in UK schools. This has not prevented the inclusion of some studies which were based on the educational systems in the USA and Australia. This is due to some areas of the review looking at the link between peers and the development of self-regulation. The research base investigating this link was sparse and therefore the literature search needed to expand to cover any relevant studies conducted. Along with this, mindfulness-based interventions have also developed in popularity within both the USA and Australia. Therefore, relevant research from these countries has also been included to help provide a more extensive review, as mindfulness within schools is a relatively new phenomenon. Research published and peer reviewed within the last 10 years was preferred however, due to a limited amount of research in some aspects of this literature review, some older studies were included which provide insights and relevance to the areas being investigated.

1.2.1 Universal School Interventions for Emotional Wellbeing

Historically, several interventions were developed to address emotional wellbeing either embedded in school curriculum or as part of PSHE lessons. One of these was Social, Emotional Aspects of Learning (SEAL) introduced by the English government in 2005. SEAL is a whole school approach to promote social and emotional skills which underpin effective learning, positive behaviour, regular attendance, staff effectiveness, and the emotional health and wellbeing of all who learn and work in schools. Lendrum et al. (2010) review of SEAL found a mixed picture regarding how effectively SEAL was implemented within schools along with

finding it did not significantly impact on pupils' social and emotional skills, general mental health difficulties, pro-social behaviour, or behavioural difficulties. Humphrey et al. (2010) concluded the data was not congruent with the broader literature of school-based social and emotional learning (SEL) programmes, which does suggest they can lead to significant improvements in a range of outcomes (Durlak et al., 2011). Humphrey et al. (2010) suggested SEAL lacks certain characteristics which successful SEL programmes have. Successful SEL programmes have a high level of structure and consistency in programme delivery. Their delivery is carefully monitored and underpinned by a level of financial and human resources, which they concluded may not have been available to the schools in their study evaluating SEAL. Another example of SEL curriculum is the Promoting Alternative Thinking Strategies (PATHS), which is a whole school emotional literacy intervention intended for primary schools, originating in the USA. PATHS was developed to 'provide teachers with a systematic developmental procedure for enhancing social competence and understanding in children' with the school environment being of central importance where change can take place (Meyers et al., 2019). The curriculum claims to have a positive impact on children's behaviour and academic attainment (Honest & Hunter, 2014). Humphrey et al. (2018) investigated the implementation, impact, and cost effectiveness of PATHS in a cluster randomised controlled trial across 45 UK primary schools. A very small but statistically significant improvement in children's psychological wellbeing was found but there were no lasting improvements in outcomes observed at 12- or 24-month post intervention follow up. PATHS was well implemented but competing priorities and pressure to focus on the core academic curriculum meant the programme was not implemented at the recommended frequency. Significant improvements in psychological wellbeing

were associated with higher levels of implementation quality and participant responsiveness. Further to this, a systematic review of school climate interventions concluded those aiming to promote social-emotional learning and school wide positive behaviour programmes seemed more effective than those focusing on bullying, community development or teachers' working conditions (Charlton et al., 2020). However, of the 18 experimental studies within this review few were sufficiently methodologically rigorous. Another systematic review concluded that there was a clear association between school climate and pupils' mental health, but a causal relationship could not be claimed due to the studies being observational and cross-sectional (Aldridge & McChesney, 2018).

1.2.1.1 Mindfulness Based Approaches to Wellbeing. More recently, there has been interest in an alternative approach to addressing emotional wellbeing in schools based on using approaches linked to mindfulness. Mindfulness has been defined as 'the awareness that emerges through paying attention on purpose, the present moment and non-judgmentally to the unfolding of experience' (Kabat-Zinn, 2003, p.145). The origins of mindfulness are rooted in Buddhist philosophy and date back around two and a half thousand years. Kabat-Zinn (1982) (as cited in Kabat-Zinn, 2003) developed one of the earliest formalised mindfulness-based interventions. The Mindfulness-Based Stress Reduction (MBSR) focused on helping individuals learn to cope with and manage illness, pain, and stress. Further mindfulness-based interventions (MBI's) based on the principles of MBSR followed in subsequent years, such as Mindfulness Cognitive Therapy (MCT) which focuses on trying to prevent the recurrence of depression (Segal et al., 2003, as cited in Dunning et al., 2019). Research with adults does suggest MBI's have a positive effect on both mental and physical health, such as reducing anxiety, stress, and

depression (Khoury et al., 2013). Although there are methodological concerns regarding some past studies relating to insufficient construct validity of outcome measures used, intervention methodology, how the data is interpreted (Dunning et al., 2019), and the benefits identified for adults, has led to universal adaptations of mindfulness programmes being developed for school settings. There has been an interest in implementing MBI's in schools which has grown over the past decade (Tudor et al., 2022) and MBI's have become a popular method of attempting to improve the cognitive, behavioural, and mental health outcomes of children (Dunning et al., 2019). The rationales for introducing mindfulness to young people include enhancing core cognitive skills to support academic and social functioning. Self-regulation develops markedly during childhood and adolescence (Blakemore & Choudhury, 2006) suggesting that practicing mindfulness during this period could be valuable. Self-regulation is the ability to regulate one's emotions, attention, behaviour, and cognition (Gagne et al., 2021). Self-regulation will be discussed in further detail within the next section of this literature review.

Adolescence is also a vulnerable period for the onset of mental health difficulties. Jones (2013) recognised that establishing age of onset of mental health disorders is methodologically difficult, but concluded there is substantial evidence to support the assertion that a significant proportion of adult mental health disorders begin in adolescence, and that mental health difficulties in adolescence are not only associated with social, emotional, and behavioural difficulties during this period of time, but they can also be a predictor of mental health difficulties in adulthood (Solmi et al., 2022). These vulnerabilities are associated with reduced attentional, behavioural, and emotional regulation (Blakemore, 2008). Therefore, the development of programmes to reduce the risk of mental ill health and the promotion

of wellbeing at an earlier stage (such as in primary school) is vital. There has been a move towards implementing universal preventative approaches for improving mental health in young people (Fusar-Poli et al., 2021), with the aim of reducing risk factors that are shared across multiple mental health conditions, whilst also promoting protective factors that can facilitate coping strategies across different environments and experiences. Therefore, universal mental health promotion holds potential for reducing risk at the population level (Greenberg & Abenavoli, 2017).

One example of school-based universal mental health promotion is school based mindfulness training (SBMT). While SEL programmes are focused on supporting children and young people to manage their emotional states, develop empathy, maintain positive relationships, and make responsible decisions, SBMT is mainly focused on training awareness and cognitive processes that are central to mental health and academic performance, in addition to caring for others and personal growth. The distinction between the two approaches is SBMT involves the practice of mindfulness (Tudor et al., 2022). Mindfulness approaches are informed by science, education, and contemplative practices and teach foundational skills of attention and self-regulation (Crane et al., 2017). Some examples of mindfulness-based interventions in schools include the Mindfulness in Schools Project (MiSP). The MiSP offers mindfulness curriculums for different ages; dots 3-6 year olds, Paws b 7-11 years olds, and .b 11- 18 year olds. The MiSP programme trains teachers in the skill of mindfulness before they deliver it within their classrooms, with the aim being to support teachers to embed the practices into their own lives before they teach the practices to children and young people. The MiSP was developed as a universal intervention for young people. The intervention is designed to be applicable to young people experiencing stress or mental health difficulties as well as for young

people who are flourishing. Teaching mindfulness as a way of managing everyday stressors, participants across this range can potentially benefit. Kuyken et al. (2013) carried out a non-randomised controlled feasibility study, investigating the acceptability of the programme for teachers and students aged 12-16 years old. The MiSP was taught as a 9-week programme by the original course developers and by those who had been trained by them. The study aimed to look at the MiSP's efficacy in terms of wellbeing and mental health, immediately following the programme and then 3 months later. They reported children who regularly took part in the practices reported lower levels of stress, in comparison to peers who did not take part.

Dunning et al. (2019) carried out a meta-analysis of randomised controlled trials (RCT) on the effectiveness of MBI's on children's cognition and mental health. They found small but significant positive effects of MBI's across all RCT's, reinforcing the efficacy of using them to improve the mental health and wellbeing of children.

However, the effect size reported was smaller than the average effect sizes reported in previous meta-analyses, suggesting there may have been an overestimation of the effects of MBI's in these previous meta-analyses which included non-randomised controlled trials (Savovic et al., 2017, as cited in Dunning et al., 2019). However, providing such interventions in schools can enable many pupils to access them (Webster-Stratton & Reid, 2010). For example, the MiSP curriculum is a universal intervention therefore minimising inequalities in accessing the intervention and the acceptability, stigma, and social comparison that often arises when targeting interventions at subgroups of young people within schools (Kuyken et al., 2013). This universality may provide an increased likelihood that strategies are transferred into day-to-day life (Arden, 2016). Dunning et al. (2019) recommended future RCT

evaluations should incorporate scaled-up definitive trial designs to further evaluate the robustness of MBI's accessed by young people.

Ford et al. (2021) carried out a cross-sectional secondary analysis of baseline data collected as part of the 'My Resilience in Adolescence' (MYRIAD) Project, which was a cluster randomised controlled trial evaluating whether school-based mindfulness training improves the mental health of young people. They found schools accounted for only 1.4% - 2.4% of the variability in mental health of early adolescents, which is consistent with the previous limited research on this area. They did however report a small but significant effect that a more positive school climate was associated with better mental health. While direct influence of schools on mental health seems to be small, this does not negate schools as a setting in which mental health can be improved via universal and targeted interventions. Due to the mixed findings of previous research Montero-Marín et al. (2022) set out to explore the effectiveness of SBMT and what influences outcomes. They aimed to investigate if there are differences between subgroups on who may and who may not benefit, along with how implementation impacts results. They carried out an RCT, with UK secondary schools taking part in the MYRIAD project who were running the SBMT intervention, the control group were schools carrying on with social-emotional teaching as usual (TAU). It was a large-scale study including 84 schools, with 8376 students aged 11-13 years old. They found SBMT compared to TAU resulted in worse scores on risk of depression and wellbeing in young people who were at risk of mental health difficulties, at both post intervention and 1-year follow up, although these differences were small and not clinically relevant. Montero-Marín et al. (2022) concluded these results question the use of this SBMT as a universal intervention due to potential iatrogenic effects for young people with existing or

emerging mental health difficulties. Regarding implementation, the MYRIAD trial observed good fidelity and dose of the SBMT, along with considerable reach and quality of delivery. However, these implementation factors were not significantly related to young people's mental health and wellbeing at 1-year follow up, which may be due to the low intensity of the programme – 10 sessions with four booster sessions the following year. Furthermore, young people's engagement with the mindfulness practice during and after the intervention was low. Montero-Marin et al. (2022) concluded there is growing acknowledgement that young people should co-design interventions to maximise accessibility, engagement, and effectiveness. The authors also recognise factors such as a more engaging format, shorter but more frequent sessions with more highly trained teachers may have been more accessible, engaging, and effective. Teachers have been found to benefit from mindfulness training, which can potentially benefit young people through improvements in teacher wellbeing, classroom instruction, and school climate (Kuyken et al., 2022). Farias (2022) stated there can be useful lessons to be learned from the MYRIAD trial, ethical considerations are needed when promoting techniques which have the potential for harmful effects, along with careful consideration on how research funding is used. The author explained the literature on mindfulness predates by centuries trials on its clinical effectiveness. Therefore, more thorough discussion on potential adverse effects of mindfulness should have taken place, leading to an increased awareness that children are typically not taught mindfulness within Buddhist or other religious traditions. Farias (2022) concludes the funding for the MYRIAD trial could have been used more wisely in assisting with the mental health of children and young people, this is a pertinent point particularly when

considering the difficulties highlighted earlier in this review in accessing agencies supporting young people's mental health.

To summarise the above literature, there is an apparent increase in children and young people's mental health difficulties, with challenges for young people in accessing agencies which target and support mental health. Therefore, schools have been identified as potential environments where universal support for mental health and emotional wellbeing can be put in place. There have been various whole school approaches implemented, with aims of supporting and developing positive mental health, one of these which has seen a recent development is the use of mindfulness-based approaches.

1.2.1.2 Implementation of Social, Emotional, Learning Programmes. The continued establishment of programmes and interventions aimed at supporting children and young people's mental health, along with how the measurable outcomes of them are becoming clearer, has led to a growing recognition that variations in the impact of these interventions and programmes may have as much to do with how a programme is implemented as they do with the programme itself, leading to an increased interest in implementation strategies in schools (Weare, 2019). Implementation Science is the study of methods to promote the systematic uptake of evidence-based interventions and practices into routine practice (Eccles & Mittman, 2006) and involves establishing the key attributes and activities of people who engage in or support processes of change. This has led to an understanding of how people, organisations, programmes, and interventions can be enhanced using flexible approaches to create change across a range of contexts (Kelly, 2017). It includes the study of implementation processes, intervention adaptation and fidelity,

and the influences on behaviour. Implementation studies aim to understand what supports the application of evidence-based interventions into real world settings (Proctor et al., 2011) with a key aspect of Implementation Science being if and how change has occurred. Interest in implementation developed in the context of political science in the 1960's and 1970's, with recognition that policy design and focus had little impact on successful implementation of policies (Pressman & Wildaway, 1984 as cited in Kelly, 2017). Lipsky (1980) (as cited in Kelly, 2017) recognised the link between the behaviour, beliefs and values of the practitioner involved in direct implementation of programmes and interventions could have an impact on the outcomes seen. Several themes were identified, which are now incorporated into implementation frameworks, such as the difficulties of limited resources. The knowledge of implementation and its value in facilitating or inhibiting the effectiveness of evidence-based practice, has developed an awareness, and understanding that the quality of implementation of interventions and their sustainability over time consists of several factors which require consideration on how they are acted on (Aarons 2004). Therefore, when studying universal prevention programmes the implementation of them is an important consideration.

A key aspect of Educational Psychology practice is supporting processes of change. EPs using Implementation Science can guide organisations such as schools to utilise and embed programmes and interventions. This can be done using flexible approaches that enhance the potential of people and organisations, supporting change across a wide range of contexts. Alongside this EPs can use knowledge regarding implementation and its application to the interpretation of empirical evidence, and how the context of organisations and the people within those environments play an important role in the interpretation and application of

interventions and programmes (Kelly, 2017). EPs not only focus on the intervention to be implemented but they play a vital role in recognising and communicating how effective implementation is impacted by the behaviour and responses of the individuals and organisations involved. Therefore, EPs are in a position where they can support school staff to understand this and recognise how successful implementation of an intervention or approach will require careful planning prior to being put into practice. An EPs skill set enables them to facilitate the use of Implementation Science within various contexts, supporting practitioners' delivery of all aspects of interventions in school, from policy to consultation, to individual case work (Kelly & Perkins 2012).

It has been observed that implementation factors impact the efficacy of school-based social and emotional learning (SEL) programmes. Durlak et al. (2011) reviewed 213 universal SEL programmes which demonstrated that the presence of implementation problems substantially reduced effect sizes. Implementation refers to the execution of an evidence-based programme in practice. Five main aspects of implementation include fidelity (the extent to which the delivered programme corresponds to the original programme); dosage (how much of the original programme has been received); quality (how well different programme components are delivered); participant responsiveness (the degree to which the programme engages and stimulates the interest of participants); and programme differentiation (the extent to which programme theory and practices can be distinguished from other programmes) (Durlak et al., 2011). Tudor et al. (2022) scoping review on SBMT included an examination of classroom-based programmes, i.e., 'stand-alone' interventions delivered over a period of weeks. Evidence from the SEL literature highlights the importance of school-wide approaches, where the whole school

community aims to integrate and embed SEL into daily interactions (Jones & Bouffard, 2012, as cited in Tudor et al., 2022). Goldberg et al. (2019) carried out a meta-analysis with the aim of determining the effectiveness of social, emotional interventions which adopted a whole school approach. They reported small, but significant positive effects on social and emotional adjustment, behavioural adjustment, and internalising symptoms. However, these were smaller effect sizes in comparison to those reported in previous meta-analysis' such as Durlak et al. (2011). Goldberg et al. (2019) recognised that implementation may have a significant role to play in the lower effect sizes, as Durlak et al. (2011) reported that interventions implemented with high quality produced larger effect sizes. Goldberg et al. (2019) discuss how whole school interventions or approaches require substantial planning, as skill development extends beyond the classroom, connecting and extending learning through the ethos of the school and its environment. One of the programmes included within their meta-analysis was Social, Emotional, Aspects of Learning (SEAL), which was found to have no impact on student's social and emotional skills (Wigelsworth et al., 2012, as cited in Goldberg et al., 2019). A process evaluation found that a lack of buy in from school staff, along with insufficient training were related to the variability in the level of implementation of the programme (Lendrum et al., 2013, as cited in Goldberg et al., 2019). Goldberg et al. (2019) concluded there is a need for implementation guidelines and tools to support how whole school interventions and programmes are successfully embedded.

CASEL's School Theory of Action (School ToA) is a framework which provides specific resources for setting up and sustaining whole school approaches to social and emotional learning. This tool addresses factors known to help sustainability such as, ongoing professional development, assessment and

evaluation, infrastructure and school-wide integration, partnerships with families and communities and ongoing communication (Oberle et al., 2016). Tudor et al. (2022) proposed SBMT should consider this whole school approach to the implementation of daily mindfulness interactions with all students and staff, to ascertain if this results in more positive outcomes. Opalinski and Martinez (2021) reported mindfulness sessions for staff empowered them to then intentionally role model, utilise the strategies and reinforce the practices within weekly sessions with children. The MiSP was also designed to fit into the school curriculum, and following appropriate training, be taught by teachers embedded in the schools. This approach may help in practices being sustained over time, compared to MBI curriculums that do not include the wider staff team and run for a set number of sessions before concluding. McKeering and Hwang (2019) conducted a systematic review of MBI's with early adolescents, looking at both the enablers and barriers to the successful implementation of MBI's in schools with the aim of developing practical and educational implications for educators working within an evidence-based practice framework. The studies they reviewed delivered programmes which varied in content, format, structure, and duration. The core elements of mindfulness, 'present moment awareness' and 'breathing awareness' were highlighted in most of the studies, however that was where the main similarities ended. McKeering and Hwang (2019) reported that who facilitated the MBI played an important role in the successful implementation of it. Teachers identified a range of enablers which helped the school environment to be conducive to the successful implementation of an MBI. One was the teacher's ability to embody the mindfulness practices themselves and collaborate with fellow teachers. Barriers identified included time pressures, along with incorporating the programme into an already crowded curriculum, which suggests the curriculum-

based format of current MBI's may be difficult for schools to embed and prioritise. Tudor et al. (2022) concluded SBMT has the potential to be delivered universally to improve mental health and well-being. The implementation of SBMT has outpaced research on its potential effectiveness across diverse school contexts and pupil characteristics. Their review suggests the field is in its infancy regarding understanding the impacts of SBMT, the processes through which SBMT exerts its effects, and the influence of implementation factors. Gender, mindfulness, self-regulation, and student mindfulness practice were the most studied moderators, mediators, and implementation factors. As the use of SBMT for adolescents continues to grow, more evidence is required relating to their differential effects across students and school contexts, alongside their pathways of change, and the relative importance of implementation quality. Emerson et al. (2020) carried out a systematic review aiming to synthesize the literature on the implementation of school based MBI's and explore the degree to which interventions align to standards for MBI's. They reported a poor alignment to all standards and found feasibility studies failed to adequately assess organisational factors that influence implementation. Organisational factors within school systems were not considered, including the goals, culture, and infrastructure of the school setting. Emerson et al. (2020) concluded these factors will affect the implementation of an MBI, and that future work on MBI's within schools needs to consider the quality of and factors known to impact on implementation. When researching the effective implementation and sustainment of MBI's in school settings, it is important to consider this at a multi-level approach. Implementation Science is therefore an important factor when working with schools due to the complex barriers' they may experience when attempting to embed programmes and interventions effectively (Kratochwill, 2007). There needs to

be an understanding of the diversity across school contexts, organisational factors, and school climate, as these pose challenges for effective change to take place (Kelly & Perkins, 2012).

In summary, the implementation of whole school approaches supporting children and young people with mental health and emotional wellbeing is important and vital to consider, as factors which impact implementation may affect the overall success and viability of an approach. Supporting schools to implement and embed change across organisations is a key role for EPs. Creating and sustaining positive change can be facilitated by EPs through the understanding and application of how change can be achieved. Implementation Science provides a basis from which evidence-based interventions can be applied to real world contexts, with EPs using this evidence to develop frameworks from which the use of psychology can not only be applied effectively but embedded and sustained over time.

1.2.2 Self-regulation and the Link to Emotional Wellbeing

Self-regulation consists of affective and cognitive control over emotion and behaviour (Blair & Diamond, 2008). The development of self-regulation requires integration of underlying cognitive, emotional, and behavioural skills; with emotional and cognitive regulation developing in a mutually reinforcing fashion (Blair & Diamond, 2008). The ability to self-regulate can be viewed as the way in which individuals adapt to and influence their environment, so self-regulation is not a fixed individual trait, but a state in which individuals must be flexible in to adjust behaviours and mental schemas to respond effectively and productively to environmental demands (Blair & Diamond, 2008). Correspondingly, the development of self-regulation is shaped by life experiences, beginning at birth, through complex

interactions across multiple levels of biological and social influences (Blair & Diamond, 2008). The ability to self-regulate is associated longitudinally with developmental advantages. These include improved physical health in childhood and adolescence (Bub et al., 2016; as cited in Pahigiannis & Gos, 2020); increased capacity to manage critical milestones and challenges, such as school readiness and academic achievement, and long-term educational outcomes (Blair & Diamond, 2008). It is important to note that the ability to self-regulate is a protective factor against the consequences of adverse experiences (Banyard et al., 2017, as cited in Pahigiannis & Gos, 2020). In addition, consequences of poor self-regulation are evident in research linking difficulties in mental, emotional, and behavioural outcomes across the lifespan (Calkins & Keane, 2009). Due to its importance in a child's development and outcomes across the lifespan, self-regulation has been a focus of universal prevention programming aimed towards children (Blair & Diamond, 2008).

1.2.2.1 Mindfulness Breathing Practices and Self-Regulation

A child's ability to self-regulate is a critical component for their adaptive functioning. Emotion related self-regulation is defined as the 'processes used to manage and change if, when, and how one experiences emotions and emotion-related motivational and physiological states, as well as how emotions are expressed behaviourally' (Eisenberg et al., 2007, p.288, as cited in Gagne et al., 2021).

Emotional regulation can be divided into intrinsic and extrinsic regulation (Gross, 2013, as cited in Gagne et al., 2021). Intrinsic emotional regulation refers to an individual's ability to regulate their own emotions independently, so a self-regulatory process. Extrinsic emotional regulation refers to an individual's dependence on someone to help them regulate their emotions for example, a parent regulating the

emotions of their child through soothing them. Research has led to a growing evidence base for the contribution of mindfulness to the wider field of social and emotional learning, and for the impact it may have on social emotional skills such as emotional regulation (Weare, 2019). Klingbeil et al. (2017) carried out a meta-analysis of 76 studies, concluding that MBI's had positive effects on young people's internal emotional regulation. While the purpose of this literature review is to examine the research investigating the implementation of self-regulatory breathing practices such as MBI's rather than the efficacy and impact of these programmes, it is important to provide a context and background as to how breathing practices are linked to self-regulation and specifically the practice and development of emotional regulation. A theoretical framework from which to approach this research is from the biopsychosocial model. The model recognises that biological, psychological, and social factors influence health outcomes (Engel, 1977 as cited in Williamson, 2022). When considering how this applies within the current research context, there is the understanding that breathing practices result in a physiological response and could support emotional self-regulation, but this may not be working in isolation and psychological factors which influence our ability to emotionally self-regulate will interact with the physiological response. Alongside this, the social factor of peer support and who is facilitating the breathing practices could also be affecting the overall experience and its impact on emotional self-regulation. Therefore, within this framework interactions between biopsychosocial factors can be theorised coherently, as existing in the same ontological space (Williamson, 2022). Polyvagal theory (Porges, 2001) provides a framework for understanding the physiological basis of emotional regulation. The autonomic nervous system (Langley, 1903, as cited in Gerritsen & Band, 2018), is a dual system of the sympathetic and parasympathetic

nervous systems. The sympathetic nervous system is responsible for the fight and flight response, it raises heart rate, blood pressure, and indirectly respiration rate. The parasympathetic nervous system acts as an opposing force and lowers heart and respiration rate. The vagus nerve is positioned for relaying relaxation from the central nervous system to the body and is modulated by respiration. It is suppressed during inhalation and facilitated during exhalation and slow respiration cycles (Chang et al., 2015). Therefore, breathing practices which slow respiration and extend exhalation stimulate the vagus nerve, resulting in parasympathetic nervous system dominance over the sympathetic nervous system (Gerritsen & Band, 2018). Hastings et al. (2008) examined how vagal regulation was related to emotional regulation, positing that vagal regulation reflects children's appropriate reactions to the contexts they encounter. Hastings et al. (2008) explain how maintenance of cardiac respiratory sinus arrhythmia (RSA) which is heart rate variability during inhalation and exhalation, should support emotion regulation. They conducted a short-term longitudinal study of 94 pre-school aged children and reported that along with appropriate parental socialisation children with relatively higher RSA displayed better behavioural self-regulation in socially challenging contexts. These findings support the proposal of polyvagal theory that cardiac regulation by the vagus nerve supports calm and positive social engagement (Porges, 2007). However, Polyvagal theory is not without its critics and vagal regulation should be recognised as one of many physiological systems contributing to emotional regulation (Porges, 2007). Liem and Neuhuber (2021) stated that while the vagus complex may be an important component of the underlying social engagement system, this is only part of a more complex neurobiological system responsible for coordinating fight and flight responses that may influence behaviours. Therefore, the neurobiological basis for

social behaviours likely involves whole brain systems that are continually shaped by several ontological factors, going beyond the polyvagal complex (Porter et al., 2022).

1.2.2.2 Self-regulation Interventions

Pandey et al. (2018) carried out a systematic review of the effectiveness of universal interventions designed to promote self-regulation in children and young people (age 0-19 years). The review looked at different subgroups within this area, including studies looking at mindfulness and yoga interventions along with family-based interventions. An interesting subgroup evaluated, were interventions which included social and personal skills training in small groups. These studies found interventions were highly effective and useful for aspects of self-regulation such as delay gratification, effortful control, and attention. Pandey et al. (2018) concluded the relatively high effect size of these interventions can be explained by the focused nature on aspects of self-regulation. However, the generalisability of the research findings may be affected by the substantial number of studies conducted in the United States. Honess and Hunter (2014) studied the PATHS curriculum. The curriculum is based on a model of development that promotes the idea that children's coping, displayed through their behaviour and internal regulation can be seen as a function of their emotional awareness and social-cognitive skills (Greenberg et al., 1990, as cited in Honess & Hunter, 2014). This model is known as ABCD (affective, behavioural, cognitive, dynamic) where the key idea is that children's emotional development comes before most aspects of cognition (Kam et al., 2004, as cited in Honess & Hunter, 2014) and children experience and respond to the world at an emotional level before being able to verbalise these emotions (Greenberg et al., 2004, as cited in Honess & Hunter, 2014). Honess and Hunter

(2014) reported findings which supported earlier research such as Curtis and Norgate (2007) that teachers perceived the programme to have helped children to develop their understanding of emotions along with developing their self-control and abilities to self-calm. They also found teachers saw school as an appropriate place for the intervention, particularly in an area of social deprivation and for children whose home lives may not adequately support the development of their social and emotional functioning, which reflects the views of the authors of PATHS (Greenberg et al., 2004, as cited in Honess & Hunter, 2014). There are limitations to this research which need to be considered when interpreting the results, the sample size was small along with only qualitative data being gathered, meaning generalisability of the findings are limited. Humphrey et al. (2016) carried out a larger scale randomised controlled study on PATHS. They did find a primary effect, where teacher ratings of changes in children's social-emotional competence were identified, but they also found the control group who received normal provision on social and emotional literacy also showed reductions in teacher ratings of peer problems and emotional symptoms. Effect sizes were small across all cases, and the researchers concluded that these mixed findings suggest social and emotional learning interventions such as PATHS may not be as efficacious when implemented outside their country of origin. Most existing interventions targeting the development of self-regulation position teachers and classroom climate as the agents of change. Few have assessed potential peer influences on intervention outcomes. There does not appear to be any interventions which are built on a theoretical model emphasising peers as a meaningful influence. Combined, these factors suggest that interventionists generally view peer processes as incidental to theoretical models, emphasising adult co-regulation or structural/climatic improvements to drive change.

There are some exceptions, Tools of the Mind is an intervention which builds its theoretical model upon a peer-based structure: it focuses on the socially mediated development of self-regulation, encouraged through structured opportunities for increasingly mature and complex play (Barnett et al., 2008). However, Tools of the Mind is designed for children aged 3-6 years old and the peer aspect of the programme is the construction of play activities where children learn and develop self-regulation skills on a reciprocal basis, rather than children taking an active leadership role in the instruction or leading of self-regulation practices and skills.

Despite the high volume of interventions targeting self-regulation development in early childhood, few have intentionally targeted or measured peer processes. More broadly, little research explores the question of whether educational environments can be engineered to maximise self-regulation development. As such, it remains largely unknown how factors such as interactions among peers, classroom composition or other peer level influences beyond overall measures of classroom climate may influence the effects of self-regulation interventions (Pahigiannis & Gos, 2020).

1.3 Peer Led Interventions

Peer support is an umbrella term which encompasses a range of activities and systems within which there is potential for people to be helpful to each other. There are several types of peer support initiatives and within schools these schemes have often provided a framework of support for vulnerable children, in addition to that which is provided by a school's adult led pastoral system (Houlston et al., 2009). In 2015 findings from the 'Future in mind' report (Department of Health, 2015) found that when young people are experiencing difficulties relating to their emotional

wellbeing and mental health often one of their first choices was to discuss things with their friends and peers. Therefore, the DfE commissioned a review of the current peer support initiatives implemented within schools, to identify ways to increase and improve the quality of peer support for mental health made available for children and young people by schools. The DfE (2017) review of peer support initiatives found there is a great diversity in the various schemes used. They differ in the source of delivery, approach, activities, and the aims. Due to the difference across individual schemes, they reported it was difficult to compare and synthesise findings in a succinct way.

1.3.1 Peer Support

Peer support programmes within UK schools have gained increasing popularity as a means of promoting positive outcomes in young people (Knowles & Parsons, 2009). Research into peer led programmes has typically looked at peer mentoring and peer buddy programmes which involve older children providing support to younger children who may have academic, social, or emotional difficulties (James et al., 2014, as cited in Stapley et al., 2022). Houlston et al. (2009) found from a national mapping exercise, that cross-age peer mentoring was the most common type of peer support intervention being implemented in UK secondary schools at that time. A research study on social mobility in the UK found peer tutoring was a teaching strategy associated with schools that were more successful at raising the attainment of disadvantaged pupils (Macleod et al., 2015) whose method is endorsed in the Education Endowment Foundation (EEF) Teaching and Learning Toolkit. The evidence base is more limited regarding peer support for children and young people's mental health and wellbeing. Podmore et al. (2018)

conducted a literature review aiming to identify the characteristics of successful mentoring programmes that aim to support positive wellbeing in children and young people and to prevent emotional and behavioural difficulties. They concluded that effective mentoring programmes share five common characteristics:

1. Recruiting mentees with intermediate difficulties
2. Providing ongoing training and support to mentors
3. Matching mentors and mentees on personality styles
4. Fostering and effective mentor-mentee relationship
5. Routine outcome monitoring to ensure continual evaluation.

In early 2018 the DfE launched a pilot for a Peer Support Mental Health and Wellbeing initiative, to identify how schools, colleges and youth organisations can set up and deliver peer support to improve children and young people's mental health and wellbeing. The Anna Freud National Centre for Children and Families (AFNCCF) was chosen as the delivery partner to oversee the programme. The initiative was developed in part due to the 2015 Youth Select Committee Report concluding that young people should leave school equipped with the tools and knowledge to understand and effectively manage not only their own mental wellbeing, but also that they should understand how to offer support to friends and family members and to signpost effectively (British Youth Council, 2015). Alongside this the Children and Young People's Mental Health and Wellbeing Taskforce, Future in Mind (Department for Health, 2015) report highlighted the importance of promoting resilience, prevention, and early intervention, and explicitly called for further work to evaluate peer support schemes.

Topping (1996) discussed the potential benefits of peer mentoring, recognising peer support may benefit both the 'helper' and the 'helped'. Noting that peers have a credibility of being within the same culture without overtones of social control and authoritarianism. Peer support compared to support from adults, may be viewed as a more credible, approachable, and understanding source of help and guidance by young people (Baginsky, 2004, as cited in Stapley et al., 2022). Carter and Pesko (2008) researched a peer interaction intervention and reported peer buddy programmes were effective in developing and improving social interactions. O'Hara (2011) found peer mentoring had a positive impact on the emotional literacy competencies of mentees with low to average levels of emotional literacy at pre-intervention. Panayiotou et al. (2020) evaluated a peer led mentoring initiative 'More than Mentors' (MtM), which is a targeted cross-age peer mentoring approach aiming to improve both mentees and mentors' resilience, confidence, problem solving and goal setting skills. The approach is for secondary aged students, the mentees are in years 7-8 and the mentors are in years 9-10. Mentors receive a two-day training package along with fortnightly group supervision with a clinical psychologist. The mentoring sessions take place weekly and involve group activities and individual 1:1 mentoring. Mentors use a standardised toolkit of resources with their mentee to explore different areas they may wish to focus on, and to identify and set goals linked to the mentee's wellbeing and emotional resilience. A strength of this programme was the evaluations carried out to review how the intervention was working. Mooney (2018) carried out a qualitative review and sought the perspectives of participating pupils, youth practitioners, and school staff, and because of this several changes were made to MtM, for example the length of the mentor training was reduced with training materials being refined to support this change.

Interestingly Panayiotou et al. (2020) evaluation found a moderate and statistically significant impact of the programme on the mentors' wellbeing, but MtM did not have a statistically significant impact on mentee's wellbeing. However, mentees did report feeling more settled at school and learnt coping strategies to manage their emotions. MtM particularly benefitted mentors who had previously not been chosen for responsible roles in school as it promoted a positive view of themselves. Dantzer (2017) studied the reciprocal impact of a peer mentoring scheme through the lens of self-determination theory. The theory identifies three psychological needs – autonomy, competence and belonging. The author reported peer mentoring produces beneficial outcomes for mentors, supporting the three psychological needs through the act of supporting a younger peer meet their needs. This is consistent with Panayiotou et al. (2020) finding that mentors experienced a positive impact on their own wellbeing and links to the 'helper therapy principle' which suggests those who provide help may benefit just as much as those who receive it. Busse et al. (2018) concluded that, to date, few robust evaluations have been conducted of individual peer mentoring programmes, along with much of the research on the efficacy of peer mentoring having taken place in the USA. Findings from the UK have been mixed. A range of emotional, behavioural, relational, and academic outcomes have been assessed, which reflect the intended outcomes of the specific programmes evaluated in each study. Some studies have reported significant improvements at post-intervention in outcomes such as, mentees levels of life satisfaction and self-esteem and mentors' levels of confidence (Mentoring & Befriending Foundation; MBF, 2011, as cited in Stapley et al., 2022). However, other studies have also reported no impact or even deterioration in outcomes post-intervention. Knowles and Parsons (2009) reported declines (although not

significant) in mentees' levels of school identity, family identity, general self-worth, and behaviour, and in mentors' levels of school identity and academic attendance, along with two evaluations not finding any significant impact at post intervention on mentees' wellbeing. Despite these findings qualitative studies of peer mentoring interventions in both the UK and beyond have found mentees report multiple benefits from participating in such interventions, including improvements in their social skills, confidence, academic performance, and attitudes towards learning (Coyne-Foresi, 2015; Messiou & Azaola, 2018; Willis et al., 2012, as cited in Stapley et al., 2022). Likewise, mentors report a sense of reward and pride from helping others, increased confidence, and the development of their interpersonal and communication skills (Brady et al., 2012, James et al., 2014; Messiou & Azaola, 2018; Panayiotou et al., 2020, as cited in Stapley et al., 2022). Given the mixed findings so far on the impact of cross-age peer mentoring interventions, despite interest in a UK context of implementing such support in schools, Stapley et al. (2022) recognised the need for more mixed method research using standardised measures and in-depth interviews to examine outcomes for mentors and mentees. Stapley et al. (2022) evaluated the impact of MtM and the perceptions of the mentees and mentors on intervention impact and the mechanisms behind this. Stapley et al. (2022) found a key theme from the qualitative interviews they conducted was mentee's mental health benefitting from the provision of MtM. Mentees experienced a positive emotional shift because of taking part in the intervention, such as feeling happier, less angry, less worried, and more confident. However, quantitatively they did not find significant impact on mentees' levels of perceived stress and wellbeing, which reflects findings from other UK-based evaluations of cross-age peer mentoring interventions, which similarly did not identify any impact on mentees' wellbeing (Panayiotou et al., 2020).

However, the mentors that were interviewed spoke about the positive feelings that they had experienced through helping their mentees. They also described multiple areas of personal development because of taking part in the programme, including enhancing their communication and interpersonal skills. Therefore, this could suggest that these outcomes may be more relevant to measure for mentors than change in their mental health. Mentors also showed significant improvements in relation to their sense of school connection and participation in home and school, although mentees did not (Stapley et al., 2022).

The current peer led roles used within schools appear to be largely based on mentoring younger children and focus on 1:1 models of working. The above research literature suggests peer models of support within schools can have a positive impact on the young people taking on roles of responsibility to support others, but the success of these programmes is dependent on the structure, planning and consideration of implementation factors.

1.3.1.1 Peers and Self-Regulation Development

There is an emerging body of research beginning to look at how a child's interactions with their peers may affect the development of self-regulation. The role for peers in this development is supported by a relational view in which self-regulation development is influenced by reciprocal interactions between a child's characteristics, social relationships, and the broader social and environmental context (Calkins & Keane, 2009). A body of research links early peer social dynamics to measures of health, adaptation, and social competence across the life course (Halpern et al., 2015; Hartup, 1996, as cited in Pahigiannis & Gos, 2020). Alongside this there is emerging evidence from longitudinal studies across childhood

supporting an independent effect of peer interactions on the development of a child's self-regulation abilities (Holmes et al., 2016). Furthermore, social relationships become increasingly important within the school setting and may have significant influences on a child's ability to self-regulate (Pahigiannis & Gos, 2020).

1.3.1.2 Implementation of Peer Led Programmes

Panayiotou et al. (2020) carried out qualitative analysis of MtM, investigating the facilitators and barriers to implementation of the programme. They conducted interviews with mentors, mentees, school staff and youth practitioners across three schools, with a total of 19 participants. Facilitators to implementation took two strands:

1. Mentor training, resources, and supervision
2. The value of peer support.

Regarding the first strand, mentors found the training equipped them for the role, with aspects such as role-plays to practice mentoring and receiving feedback from the practitioners helped guide them to being ready. The second strand of the value of peer support found that both school staff and mentees were positive about the programme. Mentees spoke about valuing working with an older mentor who shared their experience of school, and they could discuss their difficulties with school more openly compared to when speaking with an adult. The mentee-mentor relationship was described as key to the success of the intervention and suitable matching of mentees to mentor's was vital. Challenges to implementation included intervention fidelity, identifying appropriate young people, and service organisation. The first point regarding intervention fidelity related to difficulties with delivery of the programme

across different schools. The youth practitioners spoke about how they lacked guidance on dealing with issues they encountered during delivery, along with no mechanisms to quality assure delivery. Although there was a shared understanding of MtM, there were different approaches to delivery across schools. The DfE (2017) review on peer support initiatives also found that several studies noted the importance of the programmes being well run, with a clear focus, strong leadership, and support throughout the school, interestingly they found several studies stressed the value of co-production of the schemes with children and young people themselves. For example, Houlston and Smith (2009) found a strength within a peer counselling programme was the peer supporters were given the opportunity to help shape the development of the project within their school. The second point of identifying appropriate young people and the method of this selection was not always clear to the youth practitioners. Selection of mentors was generally considered appropriate, however youth practitioners thought that not all mentees selected met the criteria specified. This is an important point as the identification and matching of mentors and mentees was viewed as pivotal to the success of the intervention. The third aspect of service organisation focused on the difficulties arising from not having a senior lead specifically assigned to the intervention to discuss and problem solve issues that arose during delivery. In addition to these observations the DfE (2017) report found that one of the risk factors associated with a peer support programme failing was issues relating to conflicting priorities within a school and a lack of time to dedicate to the programme, this links to the points which McKeering and Hwang (2019) found when studying MBI's that time constraints within the school day were a barrier to the successful implementation of these programmes.

1.4 Take Five Programme

Take Five is an approach based on practicing breathing, grounding, and awareness (Appendix 2). It is a whole school universal and targeted intervention for all ages which emerged from Each Amazing Breath, an organisation founded by Helen Whitney and Mark Lilly. The approach enables children to be trained in facilitating the breathing practices to their peers. Take Five differs to MBI's as it focuses solely on the self-regulatory practice of breathing. Mindfulness approaches such as the SBMT studied within the MYRIAD research require substantial metacognitive abilities; the ability to reflect on the nature and contents of one's conscious awareness (Montero-Marin et al., 2022). Take Five does not require this level of metacognition, as the focus remains on the physical practice of breathing within the moment. For mindfulness to be effective it requires regular practice, and as reported in the Montero-Marin et al. (2022) research young people's engagement in practicing mindfulness approaches on completion of the lessons was low. In comparison Take Five is a daily breathing practice and rather than following a curriculum-based programme, it incorporates the practices within the school day, therefore providing children the time for daily practice. Take Five has been chosen as the focus of this research due to both children and school staff learning and practicing the exercises, which may help in it becoming embedded within a school. Research on Take Five has been carried out showing positive impact on children's resilience and readiness to learn. However, all research was commissioned by Each Amazing Breath and has not been published in a peer reviewed journal. These impact reports are small scale, focusing on individual schools implementing Take Five and caution should be taken when considering the results. Therefore, an examination of its implementation in schools will contribute to our understanding of

how combining peer led programmes and self-regulation practices may work and how these aspects could potentially be extended to other relevant programmes. Implementation Science is the study of the processes involved in the transfer and uptake of practices into routine everyday practice. Its aim is to support the understanding of relevant contextual processes and improve the quality and effectiveness of what is delivered as psychological intervention (Kelly & Perkins, 2012). When schools implement Take Five one or two adults receive two days of training from Each Amazing Breath and become the Take Five Champion, their role is to lead the programme and recruit children into the Ambassador role. It is a whole school approach, where the staff team receives a two-hour information and training session on the breathing practices from the Champion, and they learn how to carry out the breathing practices with their classes. Children who become Ambassadors undergo training sessions to develop the skills and understanding needed to then lead breathing practices to their peers, as a daily whole class practice. Schools may differ on their approach to recruiting Ambassadors, but it is designed to be open to any child within the school. Ambassadors will typically complete an application form and undergo an interview with the school's Champion to establish if they are suitable to take the role on. Exploring the experiences of Take Five Ambassadors leading breathing practices to their peers will help begin to research the gap identified. What ensures success and barriers to this peer led programme and how do the Take Five Champions provide the foundations for the Ambassadors to flourish? Gaining a greater understanding of implementation factors will help support and sustain the impact and effectiveness of programmes and interventions in schools (Kelly & Perkins, 2012).

The researcher's interest in Take Five developed from a previous role prior to embarking on the doctorate. They had been trained in using the breathing practices and were part of facilitating and embedding the programme within a school. It is important to note this prior involvement and interest in Take Five as this could lead to bias in the researcher's approach to data gathering, and within the data analysis. The issue of researcher bias and what steps were taken to mitigate against this will be discussed within the methodology section of the empirical chapter of this thesis. While the researcher had an interest in Take Five based on experience, the rationale for exploring the implementation of Take Five was developed from wider reading of the literature on whole school mindfulness-based approaches, and how peer led programmes aimed at promoting emotional self-regulation could potentially be put into practice.

1.5 Contribution to Educational Psychology Practice

Having a sense of agency is important for young people's development and increasing this may be a vital aspect in improving young people's involvement and engagement in their own development and within their school communities, which in turn may contribute to a sense of fulfilment in life (Welzel & Inglehart, 2010). Being able to have an impact within a community setting such as a school and experiencing some control over outcomes may be crucial for psychological wellbeing (Deci & Ryan, 1985). The focus on agency may help facilitate educational psychologists' (EP) work with school staff when discussing and coordinating the implementation of peer led interventions and programmes within a school. Sharp (2014) reported on the importance of raising the aspirations of young people and using approaches which enable them to engage in reflecting on their meaningful

motivations and developing cultures which promote and develop positive relationships. Sharp (2014) suggested the key to understanding and enabling agency is through building these positive relationships, where young people can view themselves as individual agents as well as forming support networks. Sharp (2014) recognised that social learning and interactions may not always be an explicit goal within educational settings, and EP's may play a role in promoting this aspect of development and ensuring it is made more apparent. Focusing on empowering young people may not only support their future but may positively impact on a community's future through the young people's actions transforming the context and culture in which they live. Regarding supporting implementation EPs are in a position where they can take a strategic role when working with schools. As the Education Endowment Foundation (EEF) implementation guidance report recognises, schools can benefit from support which is constructive and collaborative (Sharples et al., 2019). EPs can apply psychological theory and problem-solving frameworks, while working collaboratively with school staff (Chidley & Stringer, 2020). Taking a strategic approach means understanding how a school system works, with insight into the relationships and culture of the organisation, EPs are then able to use this knowledge to support schools to recognise how new initiatives can be successfully implemented and embedded within a school. In addition, EPs may be in a position where they are developing new peer led initiatives, this research will support the knowledge base from which to work from when EPs are taking on such projects. There is also a role for EP's in facilitating the relationship between adults and children, particularly regarding the support an EP can provide for implementing peer led interventions and their potential success. The research will contribute to how EPs understand what enables peer led programmes to be successfully embedded, along

with increased knowledge on how self-regulation practices may be successfully peer led. This increase in knowledge and understanding could equip EPs with the information needed to support and educate school staff when working with them on such projects.

1.6 Future Research Directions

This literature review has considered the basis and implementation of both mindfulness-based interventions and peer led programmes within schools, with a focus on how these relate to the development of emotional self-regulation. While there is mixed evidence for the effectiveness of MBI's within schools, along with research beginning to explore the implementation factors of these interventions, there is a gap in the research looking at how children and young people could lead emotional self-regulation practices for their peers. Peer led programmes have traditionally focused on peer mentoring or peer buddies, where older students provide an advisory or guidance role to younger pupils. Despite the high volume of interventions targeting self-regulation development in early childhood, few have intentionally targeted or measured peer processes. More broadly, little research explores the question of whether educational environments can be engineered to maximise self-regulation development. As such, it remains largely unknown how factors such as interactions among peers, classroom composition or other peer level influences beyond overall measures of classroom climate may influence the effects of self-regulation interventions (Pahigiannis & Gos, 2020). The novel aspect of Take Five is that children are trained to deliver and lead self-regulation breathing practices to their same age peers. It is important to understand how such programmes can be

successfully implemented within a school through exploring the factors which both help and hinder this process.

1.7 Identified Gaps in the Research

This review has highlighted several gaps in the literature. Previous research has mainly focused on evaluation of outcomes of interventions. As emotional wellbeing interventions become more common place in schools there is also a need to focus on principles which are likely to impact the outcomes of these types of interventions, such as implementation issues. Secondly, while there are several MBI and self-regulation-based interventions which are primarily adult led, this review has highlighted a gap in the research looking at peer led self-regulation practices. These areas are particularly important to research further, for interventions and whole school programmes to be successful how they are organised and implemented will be important to understand. Given these gaps, the focus of this current research will explore the implementation of the self-regulatory breathing practice Take Five, which is a school wide, peer led programme and links to the aspects of mindfulness based on breathing and self-regulation.

1.8 Aims and Research Questions

The aim of the research is to explore the implementation of Take Five as a peer led emotional self-regulation programme. Researching the experiences of children in the Ambassador role along with looking at how the Take Five Champion guides and supports the Ambassadors to embed this peer led practice across a school. The following overarching research question will be explored to specifically identify aspects linked to implementation factors which may facilitate or impede

successful universal embedding of an emotional self-regulation programme. With two additional research questions exploring the specific experiences of the Ambassadors and the Champions. These two additional questions will feed into answering the overarching research question.

RQ. What aspects linked to implementation factors are relevant to embedding the Take Five whole-school peer led emotional self-regulation breathing programme?

RQ1a. How do Take Five student Ambassadors experience supporting their peers through peer led breathing practices?

RQ1b. How do adult Champions ensure successful embedding of the Take Five programme?

2.0 Empirical Chapter

2.1 Abstract

The aim of this qualitative study was to explore the implementation of a whole school peer led emotional self-regulation breathing practice within primary schools. It is thought two in five young people score above thresholds for emotional difficulties (Deighton et al., 2019) and the Department for Education recognises schools can provide an environment where interventions can be effectively used to support wellbeing, with interventions implemented as part of a preventative approach (DfE, 2017). This research used semi-structured interviews and focus groups to gather the views and experiences of adults and children involved in the implementation of Take Five, a peer led emotional self-regulation breathing practice. Aiming to further understand what both supports and hinders implementation across a school. Adult participants (n=3) engaged in semi-structured interviews, and child participants (n=14) took part across three focus groups. Transcripts were analysed using reflexive thematic analysis (Braun & Clarke, 2022). The findings provide further understanding of how schools can implement and successfully embed a peer led whole school programme. Recommendations for future research are discussed, along with the implications of the findings on Educational Psychology practice.

2.2 Introduction

Research has found that the scale of mental health problems in England for children and young people (CYP) is potentially higher than previous estimates, with two in five young people scoring above thresholds for emotional problems (Deighton et al., 2019). Public Health England (2021) conducted a mental health and wellbeing surveillance report within the context of COVID-19, to explore the impact on CYP.

They found the experience of the pandemic for some CYP had a negative impact on their mental health and wellbeing. Within this current context how CYP are supported is an important area for research to explore. Schools can provide an environment where interventions can be effectively used to support CYP's wellbeing, with interventions implemented as part of a preventative approach (DfE, 2017). There are various programmes and interventions used within schools to promote positive mental health and wellbeing, such as the PATHS curriculum (Meyers et al., 2019) and Youth Aware of Mental Health, or the Mental Health and High School Curriculum Guide, which are approaches for promoting the mental health and wellbeing literacy of year 9 pupils (Hayes et al., 2019). Along with the suggested increase in rates of mental health difficulties, there are reported difficulties in CYP being able to access support from targeted children's mental health services, with only 4% of children being able to access support in the year 2019/2020 (Gilhooly & Clarke, 2021). Schools can provide an environment that enables the delivery of effective interventions due to providing near universal access to support (DfE, 2017) and implementing both individual targeted interventions, as well as whole school approaches, therefore, the school environment can be central to ensuring positive change can take place (Meyers et al., 2019). One area of focus within schools has been supporting the development of emotional self-regulation due to the ability to self-regulate being associated with developmental advantages, such as improved physical health (Bub, Robinson, & Curtis, 2016; as cited in Pahigiannis & Gos, 2020); increased capacity to manage critical milestones and challenges, such as school readiness and academic achievement, and long-term educational outcomes (Blair & Diamond, 2008). In addition, consequences of poor self-regulation are

evident in research linking difficulties in mental, emotional, and behavioural outcomes across the lifespan (Calkins & Keane, 2009).

2.2.1 Emotional Self-Regulation

Emotional self-regulation has been defined as the ability to modulate emotions, including the intensity and speed of escalation, to enable individuals to function optimally (Bunford et al., 2015). Emotional regulation can consist of both intrinsic and extrinsic regulation (Gross, 2013, as cited in Gagne et al., 2021). Intrinsic emotional regulation refers to an individual's ability to regulate their own emotions independently, so a self-regulatory process. Extrinsic emotional regulation refers to an individual's dependence on someone to help them regulate their emotions for example, a parent regulating the emotions of their child through soothing them. Emotional self-regulation support within schools covers a range of programmes. One aspect of emotional self-regulation support is using mindfulness-based interventions (MBI's). Research has led to a growing evidence base for the contribution of mindfulness to the wider field of social and emotional learning, and the impact it may have on social emotional skills such as emotional regulation (Weare, 2019).

2.2.2 Mindfulness-based Interventions

MBI's have grown in popularity within schools as a method of developing intrinsic emotional self-regulation (Tudor et al., 2022). There have been mixed findings on the effectiveness of MBI's on the mental health and emotional wellbeing outcomes of CYP. Dunning et al. (2019) reported small but significant positive effects of MBI's on children's cognition and mental health, when conducting a meta-analysis

of interventions across primary and secondary age pupils. In contrast Montero-Marin et al. (2022) conducted a randomised controlled trial of UK secondary schools carrying out the mindfulness .b intervention, compared to schools carrying on with a social, emotional, teaching curriculum as usual. Results indicated young people already at risk of mental health difficulties had worse scores on risk of depression following the .b intervention. Although these differences were small and not clinically relevant the authors concluded these results question the use of this MBI as a universal intervention due to potential iatrogenic effects for young people with existing or emerging mental health difficulties, where the intervention may possibly exacerbate difficulties rather than help to alleviate them. The differences in results across the studies referenced above has led to an increased awareness of issues related to implementation of these and other programmes which are likely to impact interventions and lead to variations in outcomes. McKeering & Hwang (2019) reported that who facilitated the MBI played an important role in the successful implementation of it. Teachers identified a range of enablers which helped the school environment to be conducive to the successful implementation. One enabler to implementation was the teacher's ability to embody the mindfulness practices themselves and collaborate with fellow teachers. Barriers identified included time pressures, along with incorporating the programme into an already crowded curriculum, which suggests the curriculum-based format of current MBI's may be difficult for schools to prioritise and embed.

2.2.3 Implementation of Social and Emotional Wellbeing Approaches

The implementation of social, emotional programmes and interventions is an important area to consider when thinking about how such programmes can be

effective and successfully embedded within a school. There has been recognition that variations in the impact of interventions such as MBI's may relate to how they are implemented, leading to an increased interest in implementation strategies in schools (Weare, 2019). Implementation Science is the study of the processes involved in the transfer and uptake of practices into routine everyday practice. Its aim is to support the understanding of relevant contextual processes and improve the quality and effectiveness of what is delivered as psychological intervention (Kelly & Perkins, 2012). It has been observed that implementation factors impact the efficacy of school-based social and emotional learning (SEL) programmes. Durlak et al. (2011) reviewed 213 universal SEL programmes which demonstrated that the presence of implementation problems substantially reduced effect sizes. Humphrey et al. (2018) studied the implementation of Promoting Alternative Thinking Strategies (PATHS), which is a whole school emotional literacy intervention intended for primary schools. They found significant improvements in psychological wellbeing were associated with higher levels of implementation quality and participant responsiveness. Tudor et al. (2022) conducted a scoping review on school-based mindfulness training programmes, looking at both 'stand-alone' interventions which were delivered within a specific amount of time, along with school-wide approaches embedded into the school's approach to social and emotional wellbeing. The authors reported there is evidence to support school-wide approaches, where the aim is to embed social, emotional learning into daily practices and interactions (Jones & Bouffard, 2012, as cited in Tudor et al., 2022). Goldberg et al. (2019) found small but significant positive effects on social and emotional adjustment where a whole school approach had been implemented. The authors recognised implementation may have a significant role to play in the fact they had found lower effect sizes, in comparison

to previous meta-analyses such as Durlak et al. (2011), where it was reported that interventions implemented with high quality produced larger effect sizes.

2.2.4 Peer Support Initiatives

Peer support is an umbrella term which encompasses a range of activities and systems within which there is potential for people to be helpful to each other. Peer support initiatives have been growing in popularity within UK schools, with the aim of developing positive outcomes for young people (Knowles & Parsons, 2009). The DfE (2017) commissioned a review of peer support initiatives used within schools. They found a range of programmes implemented, which differed in their delivery, approach, activities, and the aims. Research has found children taking on a peer lead role and supporting other children has benefits for both parties involved. Panayiotou et al. (2020) found older students supporting younger students in a mentoring capacity experienced a significant benefit to their own wellbeing. Topping (1996) noted peers may have a credibility of being within the same culture, and therefore peer support compared to support from adults, may be viewed as a more credible, approachable, and understanding source of help and guidance by young people (Baginsky, 2004). Peer support programmes have typically focused on older children providing support to younger children who may have academic, social, or emotional difficulties (James et al., 2014, as cited in Stapley et al., 2022), largely through mentoring or buddy programmes. There is a gap in the research literature exploring how children can support same age peers with emotional self-regulation practices.

2.2.5 Aims and Rationale of Current Study

Given the context and research highlighted above, the current research will explore the implementation of a peer led emotional self-regulation breathing practice called Take Five in a primary school context. Take Five is a practice which aims to develop a CYP's intrinsic emotional regulation through practicing breathing, grounding, and awareness. It links to the aspects of mindfulness based on breathing and self-regulation. Primary schools were chosen as the focus of this research due to the researcher's knowledge and understanding of where Take Five was currently being implemented. Take Five is a whole school universal and targeted intervention for all ages which emerged from Each Amazing Breath, an organisation founded by Helen Whitney and Mark Lilly, <https://www.eachamazingbreath.org.uk>. The approach enables children to be trained as Take Five Ambassadors to facilitate breathing practices to their peers. When schools implement Take Five one or two adults receive two days of training from Each Amazing Breath and become the Take Five Champion, their role is to lead the programme and recruit children into the Ambassador role. It is a whole school approach, where the staff team receives a two-hour information and training session on the breathing practices from the Champion, and they learn how to carry out the breathing practices with their classes. Children who become Ambassadors undergo training sessions to develop the skills and understanding needed to then lead breathing practices to their peers, as a daily whole class practice. Schools may differ on their approach to recruiting Ambassadors, but it is designed to be open to any child within the school running it. Ambassadors will typically complete an application form and undergo an interview with the school's Champion to establish if they are suitable to take the role on. Exploring the experiences of Take Five Ambassadors leading breathing practices to

their peers will help begin to research the gap identified. What ensures success and barriers to this peer led programme and how do the Take Five Champions provide the foundations for the Ambassadors to flourish? Gaining a greater understanding of implementation factors will help support and sustain the impact and effectiveness of programmes and interventions in schools (Kelly & Perkins, 2012).

The aim of this current research is to explore the implementation and experience of Take Five as a peer led emotional self-regulation programme. The research will explore the experiences of child 'Ambassadors' leading breathing practices for their peers along with looking at how the Take Five adult 'Champion', implements, guides, and supports the children to embed this peer led practice across a school. It is anticipated that an examination of the implementation of Take Five in schools will contribute to the evidence base linked to understanding of how combining peer led programmes and self-regulation practices may work and how these aspects could potentially be extended to other relevant programmes. The following research questions will be explored to specifically identify aspects linked to implementation factors which may potentially facilitate or impede successful universal embedding of an emotional self-regulation programme. There will be an overarching research question to specifically identify aspects linked to implementation factors which may facilitate or impede successful universal embedding of an emotional self-regulation programme. With two additional research questions exploring the specific experiences of the Ambassadors and the Champions. These two additional questions will feed into answering the overarching research question.

RQ. What aspects linked to implementation factors are relevant to embedding the Take Five whole-school peer led emotional self-regulation breathing programme?

RQ1a. How do Take Five student Ambassadors experience supporting their peers through peer led breathing practices?

RQ1b. How do adult Champions ensure successful embedding of the Take Five programme?

2.3 Methodology

2.3.1 Design

2.3.2 Epistemological Stance

A qualitative design was chosen, employing focus groups (for child *Ambassadors*) and individual semi-structured interviews (for adult *Champions*) to gather information for this research. The research was approached from a relativist ontology, where understanding is constructed through the experiences of the participants (Willig, 2008). Participants reflections about their experience and engagement in the Take Five programme provides this understanding. The epistemological approach is one of social constructionism, where reality refers to the subjective experience of everyday life. Knowledge of the world and the gathering of knowledge is through the study of individuals and groups of individuals who define this reality (Willig, 2008). The drive behind the research was to gather the views of children taking on a peer lead role and explore their experiences of being part of the implementation of a whole school approach. Social constructionism is the development and understanding of knowledge through our experiences, focusing on individuals' roles and interactions through listening to their narratives (Galbin, 2014;

Gubrium & Holstein, 2014). The epistemology of social constructionism can be understood within a framework where 'meaning' is a product of interaction, so meaning is not created in isolation by the subject (Gubrium & Koro-Ljungber, 2005), but through interactions within different social contexts. The existence of the Take Five Ambassadors is dependent on the social world of the school. The social practices and relations that exist in this world are constructed through human relationships that can be subject to analysis. The researcher engaged in discourse, establishing meaning, and understanding the participants involved as active social beings, with a unique opportunity to discover the meaning of experiences and events from the child's perspective (Kennedy et al., 2001).

2.3.3 Participants

The researcher approached four schools to take part in the study. The schools are in the East Midlands, and two schools agreed to take part in the research. Initial contact was made via email to the school's headteachers, participants were recruited from primary schools who had taken part in Take Five training and currently have children taking on the role of Ambassador. Purposive sampling was used to ensure participants (child Ambassadors and adult Champions) have experiences on which to draw and express views on and fill the criteria corresponding to the objectives of the study (Palinkas et al., 2015). The schools had been implementing Take Five between the range of three to five years. The prerequisite for taking part was that schools had launched the approach and Ambassadors were currently running the breathing practices.

2.3.3.1 Ambassadors. Ambassadors were recruited by the adult Champions who had agreed to take part. Champions within the two schools were asked by the

researcher to advertise the research to their Ambassadors who were aged between 9-11 years old. The researcher sent the Champions information and consent forms for the research, Champions provided these to any of the Ambassadors who had shown an interest in taking part. Consideration was given to the age of the Ambassadors included in the research, and how this would relate to the potential data gathered using focus groups. Participants were aged 9-11, as during middle childhood conversations show more 'give and take' as they start to respond to each other, along with the development of language and increased attention (Feldman, 2011). Grouping children based on age was thought to support the group dynamics and discussion and takes into consideration the power imbalance that would be present if children from lower year groups were included with older children. Greene & Hogan (2005) recommend there should be no more than a two-year age difference between participants when using focus groups therefore, when developing the structure of the focus groups the ages of the children were considered. Within the participant consent form for the children's parents/carers to sign they could indicate if their child had any additional needs to take into consideration prior to taking part in the research. This was deemed important as they may need extra time to process questions so would need to see the focus group questions in advance. However, there were no needs recorded on any of the consent forms. Children also provided their own assent to take part alongside having parental/carer permission. There was a total of 14 child participants, six from one school and eight from the second school, the demographics and organisation of participants into the focus groups are illustrated in table 1.

Table 1

Demographics of the Child Participants

| School 1 | | |
|-----------------|---------------|--------------------|
| Age | Gender | Focus Group |
| 10 | Girl | 1 |
| 10 | Girl | 1 |
| 10 | Girl | 1 |
| 11 | Girl | 1 |
| 11 | Boy | 1 |
| 11 | Boy | 1 |

| School 2 | | |
|-----------------|---------------|--------------------|
| Age | Gender | Focus Group |
| 9 | Girl | 2 |
| 9 | Girl | 2 |
| 9 | Girl | 2 |
| 9 | Girl | 2 |
| 10 | Girl | 3 |
| 10 | Girl | 3 |
| 9 | Boy | 3 |
| 10 | Boy | 3 |

2.3.3.2 Champions. In each participating school there is a member of staff who is the Take Five Lead and Champion. Within one of the participating schools the role of Take Five Lead and Champion was undertaken by one member of staff. Within the second participating school there were two members of staff working together on Take Five. One staff member took the role of the Lead, while the other staff member was the Champion. All three adults were interviewed.

2.3.4 Data collection

2.3.4.1 Ambassador Focus Groups

Focus groups were used to gather data from the Ambassadors and address research question 1a. Focus groups were thought to allow the children a forum to express their views with the aspect of multiple voices being heard, which was thought to facilitate more rounded and reasoned responses to discussion questions (Barbour, 2007). Focus groups provide a more economical way of gathering data compared to a series of interviews and according to Cohen et al. (2011) are less intimidating to the children involved. They can be used to create a safe peer environment and can help alleviate some of the power imbalances that are present between an adult and a child in a one-to-one interview (Shaw et al., 2011). The recommended duration of focus groups with children under the age of 10 is no more than 45 minutes (Heary & Hennessy, 2002); the focus groups in the current research typically lasted between 30-40 minutes. Each focus group was conducted in each participating school with children not mixing from different schools. This complied with COVID-19 guidance and was based on the thinking that children may feel safer and more willing to express their opinion if group members are familiar to them (Fielden et al., 2011). Coyne et al. (2009) reported a suitable number for child focus

groups is between 4-6. A focus group topic guide was used to encourage discussion and interaction (Barbour, 2007) along with using open-ended exploratory questions to encourage discussion (Robson, 2002). The questions asked were consistent across the groups, with each group following the same format and structure of questioning (Appendix 3). Each focus group had a member of school staff present, to follow safeguarding protocols and be available for any health and safety issues which may have arisen. Consideration was given to the role of this member of staff, and they needed to be someone who had no direct involvement in the implementation of Take Five. This was to reduce the likelihood of the Ambassadors feeling obliged to respond in a certain way. Focus groups were conducted face to face within each participating school, and were audio recorded to enable them to be transcribed verbatim following the completion of data collection. Audio recordings were deleted following successful transcription.

2.3.4.2 Champion Interviews

Semi-structured interviews were used with open-ended exploratory questions to address research question 1b (Appendix 4), with three participants being interviewed on a one-one basis. Interviews require greater involvement from the participant and therefore encourage higher levels of participant motivation in comparison to open-ended questionnaires (Cohen et al., 2011). This fits well with a social constructionist approach as the researcher and participants engaged in a dialogue together, with the researcher responding to the experiences spoken about, using the questions to encourage and guide discussion, rather than following the set structure (Robson, 2002). The interviews ranged in length, with the shortest being 25 minutes and the longest 40 minutes. They were conducted via the online platform of

Microsoft Teams using a video call and recorded to enable accurate transcription to be completed following data collection. Video and audio recordings were deleted following successful transcription.

2.3.4.3 Data Analysis

The research question looks at implementation of Take Five as an intervention and approach as a whole. With sub questions looking at the experiences of Ambassadors and Champions. Findings are integrated into one data set to provide an overview of possible barriers and facilitators to successful implementation. Therefore, consideration of the process of coding the data across the semi-structured interviews and focus groups was thought about prior to the initial stages of analysis. Due to having an overarching research question, which the two sub research questions feed into, it was decided coding and analysis of the data as one set would be appropriate. This would enable both the thoughts of the Champions and Ambassadors to feed into the themes developed, meaning the two sub research questions would support each other in addressing and answering the overarching research question and the studies aim. With the Champions and Ambassadors expressed thoughts complimenting and adding to the overall experience of being part of implementing Take Five in their respective schools.

The focus groups and interviews were transcribed verbatim and analysed using reflexive thematic analysis. Reflexive thematic analysis was used as it values the researcher as taking an active role within the analytic process, this enables the researcher to reflect on their interpretations throughout (Braun & Clarke, 2022). A deductive approach was taken, as the researcher is being driven by an interest and focus on what helps and hinders peer led programmes. Reflexive thematic analysis positions the researcher as a subjective analytic resource, as they engage with the

theory, data, and interpretation. The researcher gathers meaning and knowledge through a subjective process and is viewed as having a role within the analysis and is therefore a resource for knowledge production (Braun & Clarke, 2022). Transcripts were analysed using Braun and Clarke's 'Six Stage Thematic Analysis' (2022), the six-stage approach views the process as phases which are guidelines to follow, rather than a set of linear rules, the phases allow for a unidirectional approach to data analysis, allowing for reflection to be used throughout the process of constructing themes.

Table 2

Six Phases of Thematic Analysis (Braun & Clarke, 2022)

| Phase | Description |
|---------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|
| Phase 1: Familiarising yourself with the dataset | Consists of repeatedly reading through the transcripts to identify analytic ideas or insights. |
| Phase 2: Coding | Initial ideas identified are coded to arrange them into meaningful groups. |
| Phase 3: Generating initial themes | Collation of codes into meaningful groups that would make up themes. |
| Phase 4: Developing and reviewing themes | Reviewing of themes i.e., checking that the themes work in relation to the initial codes identified. |
| Phase 5: Refining, defining, and naming themes | Consists of naming the themes and therefore understanding what each theme is about and what aspect of the data the theme relates to. |
| Phase 6: Writing up | Interpretation of the data and discussion on how the themes identified contribute to the overall research questions. |

Phase 2 involved each transcript being coded individually (Appendix 12), with the Champion interviews being completed first in this process. Codes were assigned based on the content of the transcripts, with ideas beginning to be grouped together. Following coding of each transcript there was a process of returning to the first one and re-checking the original codes. This enabled the identification of further codes

which were then added, along with helping the process of beginning to draw links between transcripts (Braun & Clarke, 2022).

Phase 3 was the placing of codes into meaningful groups, with groups then being linked together to form more coherent ideas, which linked to the research questions. Following this there was a process where the groups of codes placed together based on their shared meanings supported the identification of sub themes. This helped the generation of an overall theme for those sub themes. This led into phase 4 and 5 where themes were reviewed and refined, ensuring the sub themes underlying them linked together in a coherent and meaningful manner.

The researcher was aware interpretation of the data could be influenced by their views from being previously involved in using Take Five, and how this could affect the analysis, through the subjective nature of coding. This awareness prompted the use of Braun and Clarke's 15-point checklist for good reflexive thematic analysis (2022) ensuring the coding process was thorough, and that time was taken to review the codes identified before moving on to the development of themes. When reviewing the transcripts, the research aim was held in mind, where it was important to identify not only what supports the implementation of Take Five, but also the barriers and difficulties experienced by the participants regarding implementation. This was vital to hold in mind as it would help mitigate against potential researcher bias regarding their previous involvement with Take Five.

2.3.4.4 Ethical Considerations

The research was granted ethical approval by the University of East Anglia (UEA) Ethics Committee (Appendix 5) and was conducted in line with the British Psychological Society (BPS) Codes of Human Research Ethics (2018). Prior to data collection and through the process of participant recruitment the researcher

considered ethical implications relating to the research. These considerations included that prospective participants may have felt an obligation to take part. The Take Five Lead and Champion within each school was approached by the Head Teacher which could have pressurised them to agree involvement. The Ambassadors may have felt obligated to take part as they were approached by their Take Five Champion. To counteract these considerations, the researcher liaised with the Head Teachers and discussed these aspects to ensure both Champions and Ambassadors understood their right to not participate. Champions provided consent to take part (Appendix 6) and Parental/carer consent was required (Appendix 7) for those Ambassadors wanting to take part, along with Ambassadors providing their assent (Appendix 8). Prior to arranging the interviews and focus groups, additional information about the study was shared with prospective participants. This included information for adult participants (Appendix 6), parents/carers (Appendix 7) and a separate child friendly information sheet for the children who showed an interest in taking part (Appendix 8). Participants were therefore given sufficient information to help them make an informed decision about whether to participate. At the beginning of each interview participants were reminded of their right to withdraw and that the video and audio recording would be deleted following transcription, along with transcriptions being anonymised. Adult participants were offered the choice to review their interview transcripts if they so wished, however no participant requested to do so. At the beginning of each focus group participants were also informed that audio recordings would be deleted following transcription. It was explained that due to them taking part in a focus group, the discussion would be within that forum and their responses would be heard within the group, however, the transcriptions would be anonymised. Data collection was managed in line with requirements from the

General Data Protection Regulation (GDPR) and the Data Protection Act 2018. During transcription of interviews and focus groups, participants were given a number, and any identifying information was redacted. Following completion of interviews and focus groups the participants were debriefed using a verbal script about the purpose of the research (Appendix 9). A final ethical consideration was safeguarding the children participating. When working with children careful consideration needs to be given to how to proceed if a child disclosed a safeguarding matter. Prior to conducting the focus groups, the researcher became familiar with the safeguarding policy of each school and knew who the designated safeguarding leads were. A member of school staff attended the focus groups, this was to ensure both safeguarding and health and safety school policies were followed.

2.4 Findings

Four themes were identified through reflexive thematic analysis (see Figure 1 for a visual representation):

1. 'Support from Senior Leadership Team'
2. 'Training & Support of Wider Staff Team'
3. 'Factors Underpinning the Ambassador Role'
4. 'Impact of Take Five in School'.

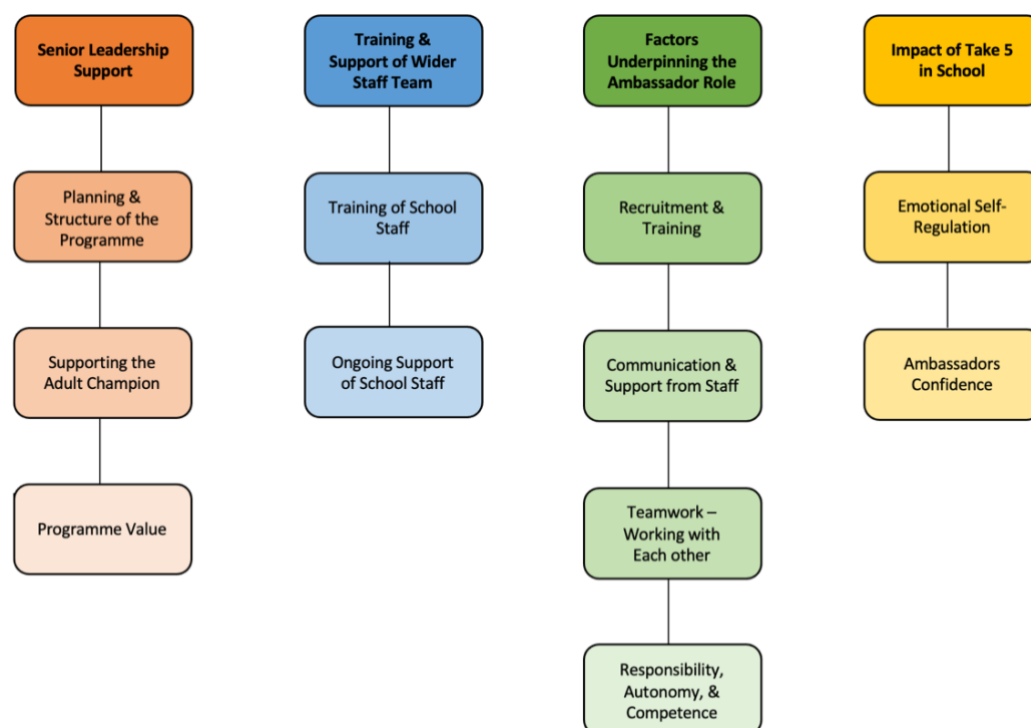
Themes 1, 2 and 3 relate to the implementation of Take Five. They address the factors which may facilitate or impede the success of implementation. Within each theme there are related subthemes which link to the overall theme. The fourth theme addresses the impact of Take Five, which while this is not directly linked to exploring implementation factors, it is important to note how all four themes relate to each

other and may influence the embedding of a peer led initiative within a school. Within this section each theme will be defined and discussed in relation to its subthemes.

Participants responses and excerpts are referenced as either: Adult Champion (AC) or Child Ambassador (CA).

Figure 1

Thematic Map Illustrating Themes and Subthemes



2.4.1 Theme 1: Senior Leadership Support

The theme ‘Senior Leadership Support’ reflects the thoughts expressed about how support from the senior leadership team (SLT) within a school is important for embedding a whole school peer led approach such as Take Five. The subthemes identified were: ‘Planning and Structure of the Programme’; ‘Supporting the Adult Champion’ and ‘Programme Value’.

Planning and Structure of the Programme. The adult Champions spoke about the need to take time and carefully plan how Take Five would be implemented within their schools prior to beginning the breathing practices:

'It's several things, several things, I think. Having a mapped-out plan for it and taking it slowly, so that you know the staff would introduce Take Five. So, I think it's not running before you can walk with it...I think that that's helped embed it, and we needed various things that we've had staff meetings on, we launched it to the whole school and I think you know, they all help embed it' (AC 3).

This excerpt illustrates the importance of thinking about how the programme would work within a school. The adult Champion explained how as a school they recognised the need to consider how it would fit into their school. Taking the time to plan the implementation of it before launching it was deemed important for its success. The interviewee expressed how embedding a new initiative within their school would take time, with a recognition that there are several factors and steps involved when attempting to implement something new. When talking about how they have timetabled it to fit into their school day, the adult Champions spoke about how they had to consider the structure of their school prior to beginning the breathing practices. The following excerpt illustrates how one Take Five adult Champion thought about how a daily breathing practice across the school could be timetabled, taking into consideration how different year groups may have different schedules:

'We found that too difficult to implement because every class has slightly different routines, and for example I'm in year one, I find that just after lunchtime is a great time for Take Five...but our lunchtime finishes at a different time to key stage two. So, we're five minutes ahead of them so it just wasn't going to work. So, in the end I

said to staff as long as you have a regular once a day practice, it's better if it's the same time every day so that the children know that it's coming, but it needs to be in the timetable once a day in a regular slot, so all the teachers have chosen their own slots and I have left them to that' (AC 1).

This excerpt highlights the need to consider the individual structure of a school day and the needs of different classes. Within the initial training for Take Five, the adults are asked to think about when a whole school daily Take Five practice can be embedded, for some schools this could be done at the same time, however as stated in the excerpts above this may not work for schools where different year groups follow different timetables. Therefore, consideration of individual school structure's is needed for the implementation of a whole school daily practice. Despite the point about flexibility of when a practice is timetabled across a school, a common thread from all three interviews was the importance of Take Five practices being at the same time each day once they have been timetabled in. A difficulty spoken about was ensuring that a timetabled practice was carried out and not forgotten:

'the only thing initially was that some staff would forget and then obviously they'll be working away and then this thing 'ohh, we forgot to do Take Five', and so it was just a matter of me going round in the first instance and just checking and popping in and saying did you remember to do your Take Five? (AC 2).

The interviewee is expressing that within the initial stages of implementation, time is required to check the breathing practices are being prioritised across the school. When considering the overall theme of 'Senior Leadership Support' this excerpt highlights the need for the adult Champion to have allocated time to check Take Five is being implemented within classes, therefore, they need the support from SLT to be

able to take this time away from other responsibilities they may hold. This links to the previous point made, that when implementing a new initiative careful planning is required to ensure there is sufficient time allocated to implementation issues. This point links to the next subtheme in how the adult Champion is supported by SLT to ensure that Take Five is being implemented across the school.

Supporting the Adult Champion. Having time to carry out their role effectively was a point made by all three adult Champions. In the excerpt above it states that in the early stages of implementation of Take Five across the school, they needed to check in with teachers to ensure they were remembering to carry out the breathing practices daily: *'just checking...and saying did you remember to do your Take Five'* (AC 2). This takes time, having time to carry out the role of Take Five Champion requires support from SLT within a school, ensuring they have allocated time and autonomy to manage their duties:

'Yeah, I had to definitely get SLT to be on board for me to do that. I mean it's same with the training program. You know, you've got to be allocated the time and I've not had a problem. I mean, a lot of the time I've not even had to run it past the head. I'll just say to the class teacher, I'm gonna start Take Five training on a Friday, and they're quite happy with it as long as they know what I'm doing and where I am. It's been absolutely fine' (AC 2).

There appears to be several points made within this excerpt. The interviewee speaks about the need to communicate effectively with SLT and class teachers, ensuring they have time to carry out their role. The excerpt also highlights the need for the Champion to have some autonomy over planning when and for how long they carry out the Ambassador training. This excerpt illustrates the need for the Champion to

not only have time allocated for them to carry out the role, but to also feel trusted by senior leaders that they can plan and use their time effectively: *'I've had whatever time I needed'* (AC 2). Communication about Take Five across the school appears to be imperative for the Champion to carry out their role effectively, requiring the understanding of both SLT and class teachers for the time they are using. This links to the previous subtheme 'Planning and Structure of the Programme', where one interviewee expresses the importance of considering who is best placed to carry out the role of Champion:

'I'll be honest, I think passing it over to X, not that she doesn't have a lot of responsibilities, but it is her other thing than being in the classroom, that is her main thing and I'll be completely honest, you know if I was still in charge of it, it wouldn't get the priority that it should because things do come up that are seen as more of a need. So, I think it was, it was choosing the right person to lead on it' (AC 3).

This adult Champion is speaking about how careful thought to who becomes a Take Five Champion is needed, when thinking ahead to how it will be successfully incorporated into the school. The role is a responsibility which requires the adult to prioritise the programme and manage their time. The interviewee explains how a member of SLT may not be best placed to take this role on due to responsibilities they will already hold. However, it was recognised that the Champion would need ongoing support from SLT to help embed the programme:

'X is doing such a good job with it that she only comes to me when she needs to, and whether that's facilitating a space or release time for her, or just somebody that's got some background knowledge of it that she wants to share ideas or sound

something off of me, but you know I think that that only works because X is doing a good job with it, and if she wasn't, I could step in' (AC 3).

This excerpt illustrates the importance for the Champion to have access to support from a member of SLT, who not only offers practical support but has knowledge and understanding of Take Five and can therefore be a sounding board for ideas. There is a point being made here that more than one member of staff having in depth knowledge and understanding of the programme supports the implementation and ongoing success of it along with support from SLT:

'I think that was really important with the launch of it, and I think no disrespect to X, I think X could have launched it, but maybe staff wouldn't have taken it as seriously. If you know what I mean. Not that I think it was just that you know that somebody senior was involved but I was kind of holding them to account for it. I've walked around this morning and I've only seen two classes doing Take Five, so you know what's going on kind of thing, and I think that also helps X, and having that bit of back up and you know, she didn't feel on her own with it' (AC 3).

This excerpt illustrates the idea that SLT supporting the programme from the start helps communicate the importance of it to the wider staff team, along with how ongoing support for the Champion is needed. For SLT to recognise the need for this support there needs to be value placed in the programme, which links to the next subtheme.

Programme Value. The previous two subthemes have established a whole school programme requires both initial and ongoing support from SLT to be successfully embedded within a school, from a practical sense in helping to provide

the time needed, along with ongoing support for the Champion and their role. For these areas to be prioritised by SLT there needs to be value placed on the programme being implemented. Valuing the programme comes from knowledge, understanding, and awareness of how it can benefit the school community.

'Yes, having peace of mind, knowing that they don't mind you doing it. I mean, I've got interventions and things, but the fact that you know, they were happy for me to come away and not do those interventions to be able to do Take Five, show me that they took it seriously and they actually wanted it in school, and they were happy for me to have the time out to do it. So, they have been really good with that to be fair' (AC 3).

This excerpt illustrates how placing value on Take Five, led to understanding from SLT that other aspects of this Champion's role in school, such as running interventions may need to be balanced out with the time needed for Take Five to be successfully embedded. Understanding how Take Five could benefit the school comes from knowledge of the programme. Therefore, when thinking about the implementation of a whole school programme such as Take Five, which requires ongoing investment of time it would be beneficial for a member of SLT to have received the initial training alongside the adult who will become the Champion. This will provide the knowledge base and understanding which will support the development of value in the programme. If there is value, then the programme will be prioritised across the school alongside other needs. However, a sense of value is not only required from SLT, but the nature of a whole school approach also means the wider staff team is included and plays an active role within the programme. This leads to the next theme 'Training and Support of the Wider Staff Team'.

2.4.2 Theme 2: Training and Support of the Wider Staff Team

The theme 'Training and Support of the Wider Staff Team' reflects thoughts expressed from the adults interviewed, that for a whole school approach to be successfully embedded the wider staff team requires sufficient training, this is represented within the subtheme 'Training of School Staff'. The second subtheme 'Ongoing Support of Staff' reflects thoughts adult participants expressed on how the wider staff team needs access to ongoing support to aid the continued successful implementation of the programme.

Training of School Staff. All three adult Champions spoke about the whole staff team being included within the initial training of Take Five, prior to it being launched to the children across the school. Take Five training for the whole staff team is delivered by the Take Five Lead and Champion:

'I think it just so happened that we were at a good point when we received the training, we could give it staff meeting time and I think it was actually an INSET. We launched it at an INSET day cause we have ours like front loaded to the year and so it actually worked quite well then. So, we're fortunate there I think, had it been now it might be a little bit different' (AC 3).

This excerpt reflects the idea that a whole school approach needs sufficient time allocated for training the staff team, along with how the time of year when the training is carried out may impact on its success. Within this school the training was carried out during an INSET day which would ensure the majority if not all members of teaching staff would be present to access it. Therefore, the staff team received the training they needed to gain a sound knowledge base and understanding of Take

Five before beginning the programme with the children. This also links to the previous subtheme of 'Programme Value'. When training is allocated to INSET days at the beginning of the school year it may well help communicate to the wider staff team that the initiative is a priority and highly valued by SLT. Within this excerpt the Champion also speaks about how the timing of the initial training may well have supported the successful embedding of the programme: *'So, we're fortunate there I think, had it been now it might be a little bit different'* (AC 3). The Champion was speaking about how current pressures and priorities for schools may mean the time that was allocated for their Take Five training may not have been as easily put into place in the current climate. This leads to thinking about how successful implementation of a whole school programme may have wider systemic factors impacting on it. A school may wish to prioritise a programme and place high value on it, however, due to competing demands a school may not be able to ring fence the time needed for sufficient staff training due to other commitments they are required to make. The adult Champions spoke about how training the wider staff team may also extend beyond the initial training session: *'if we have new staff that need training, I've been training them and getting them up to date with the materials I do'* (AC 1). This was discussed as a challenge within one of the interviews:

'for example we've had four new members of staff since September and then it's how you provide that training for all of those, because I kind of feel like if I did some training soon after I've done the Take Five training, my training would have been pretty good but I think now it would be less so. Do you know what I mean? It gets watered down a little bit and so I think you know that potential for a refresher somehow, but then I'd be hard pushed to give it the time with other priorities' (AC 3).

There are several points being discussed here. Firstly, the importance for new members of staff joining the school to receive training in the programme to ensure they can develop their knowledge and understanding. The second point relates to the quality of the training new members of staff receive, in comparison to the training originally delivered to the whole staff team. The interviewee speaks about how the length of time between their initial training as a Take Five Lead and Champion and their ability to provide effective training for new members of staff may adversely affect the quality, and how accessing refresher training for themselves would be beneficial. However, the difficulty of this is allocating sufficient time alongside their other responsibilities. This is an important factor to consider when thinking about implementation of a whole school programme. Thought is required to how it can be initially incorporated, sustained, and ensured it is embedded within a school. This takes planning, time, and ongoing commitment.

Ongoing Support of School Staff. The adult participants spoke about how supporting the wider staff team with various aspects of the running of Take Five was important for the successful embedding of the programme. The aspects spoken about were supporting staff members with developing their confidence in delivering Take Five breathing practices within their classes and the addressing challenges relating to supporting staff who may not fully appreciate or prioritise Take Five. When launching Take Five within a school, class teachers are trained to run the breathing practices for a period of time prior to children being recruited and trained in the Ambassador role. When discussing support school staff have needed in order to feel confident in running the breathing practices, it appears the initial whole school training may not be sufficient for everyone. Therefore, extra time may be required to support some school staff in becoming confident in their delivery: *'I support staff with*

their delivery of Take Five if they're feeling a little bit under confident' (AC 1). This links to the first theme identified, regarding the time needed to invest in the implementation of the programme, and again prompts thinking about how the initial planning for implementation of a whole school approach needs consideration of not only the prescribed training, but how thought should also be given to enable time for unplanned additional support and training which may be required. Alongside this the adult Champions spoke about how ongoing communication between them, and the wider staff team was imperative for the successful embedding of the programme:

'checking...and saying did you remember to do your Take Five and it was only a matter of weeks before they were all doing it and they were all into doing that religiously' (AC 2). This following excerpt shows the need for the wider staff team to have ongoing support to implement the practices: *'I've walked around this morning and I've only seen two classes doing Take Five'* (AC 3) this Champion spoke about how it can be difficult to maintain the implementation of Take Five practices across the whole school, and there is a need to check in with class teachers to ensure it is being put into practice. When considering this difficulty, the Champion spoke about how the role of the Ambassador helps: *'I think it makes it happen. If you know what I mean because the adults might forget, but the children don't forget'* (AC 3), therefore highlighting the idea that the child Ambassadors support the successful implementation of Take Five, they are not only taking on a role but their value in the programme helps support the class teachers in ensuring the daily breathing practices are carried out. This Champion spoke about how not only it is a difficulty if some class teachers forget to carry out the practices, but some teachers may carry out the practices but see them as a 'tick box' exercise rather than truly valuing them within their class:

'I think if you were to look around school now, we've got several, several of staff that see it as a box ticking exercise that oh, it's Take Five. If I said to them who did Take Five this morning? 'I don't know, we did it'. Do you know what I mean? How many children participated? 'Don't know, but I've done it'. I've ticked that box. (AC 3).

This excerpt illustrates the difficulty in truly embedding the practices within a school. Class teachers may well remember to carry out Take Five daily but are they doing this in a purely functional manner, or from a place of understanding the need for quality in the delivery of the practices:

'I think this varies now, so you know saying that you've got some classes where the children just stand up, do it, and the teachers busy doing something else and not participating. I don't know if the quality of the delivery varies' (AC 3).

The Champion was talking about how the child Ambassadors may well be carrying out the breathing practices to their peers, but the quality of the delivery may be affected due to the class teacher not monitoring the delivery if they use the time to do another job within the class. The points which arise from this excerpt are how do you support teachers to not only carry out the practices but to value them enough to ensure there is a quality in delivery? If there is a lack of quality this may well affect the impact of the practices; if there is little impact the class teacher may well continue to see little value in Take Five, continuing this cycle of not truly embedding it within their class. The Champion when asked if there is a difference made through staff taking part in the breathing practices themselves stated:

'Yeah, 100%, 100%. You know, the children are so easily influenced by staff without even realising it, and I think it could be something as simple as a member of staff

saying, 'on my drive to school I was behind a terrible driver which caused me to feel stressed, and I did Take Five and it really helped me', you know, one incidental comment like that and those children, it could be like, 'oh, actually, you know, I might get home and do that', and if that message kind of hit one child and they did it, you know?' (AC 3).

This excerpt highlights the importance of the influence staff can have within their classes, and how talking to the children about how they use Take Five can then support the use of it. The difficulty is in how to support class teachers to embody the approach, particularly if there are teachers who do not see its value:

'I'm sitting here now thinking actually there's a lot more that I could do. You know, raising the profile again of it. We do like a weekly staff briefing, and Take Five is never mentioned in it, whereas I could. I've got a Take Five display downstairs and the photos of the children doing it are of children who have gone to secondary, it's those kinds of things that we could tighten up on' (AC 3).

The Champion began reflecting during the interview and the excerpt above talks about how they can potentially support staff with developing a higher sense of value, through ongoing promotion and continuing to show it is a priority within the school, through raising its profile. The following excerpt illustrates the importance of the wider staff team developing their understanding of not only the practices but of the time and effort it takes to be a Take Five Champion:

'I think possibly on reflection not all the staff are aware of the process that X goes through with the children, and so I think that's possibly you know something that they need to be more aware of and the extent of the training that she needs to do with

them. Yeah, and I think that actually if they did, then they might take it a bit more seriously, if they understood the investment in it' (AC 3).

The interviewee's reflections lead to consideration of how increasing awareness and understanding within the wider staff team of the investment required to implement the programme may then increase the value they place in it, which in turn would support implementation.

2.4.3 Theme 3: Factors Underpinning the Ambassador Role

The theme 'Factors Underpinning the Ambassador Role' reflects the views expressed from both adult and child participants on what supports their development and subsequently helps the implementation of Take Five within their schools. Within this theme there are four subthemes: 'Recruitment and Training'; 'Communication and Support from Staff'; 'Teamwork – Working with Each Other' and 'Responsibility, Autonomy, and Competence'.

Recruitment and Training. This subtheme reflects the views expressed about the need for a robust recruitment and training programme to provide the Ambassadors with a strong foundation for their development within the role. A common thread within the focus groups was the qualities needed to be successful within the role:

'I would say basically make sure the kids have...have they got the motivation to keep doing it. Would they be able to stand up and read out to a group of people, and will they take on board what is being said in the training, so they're not messing around all the time, because it is important and you need to listen to know all the breathing, what lines to read and stuff like that' (CA 12).

This excerpt illustrates the need to consider the children who are recruited to become Ambassadors. When asked what advice they would give to adults in other schools thinking of implementing Take Five, this Ambassador spoke about the need for recruiting Ambassadors who will be motivated to carry on with the role once they have been trained. They also spoke about children having the confidence to speak in front of a class, and the necessary listening skills required to develop the knowledge needed from the training. This Ambassador spoke about a difficulty they have experienced as a group within their school, that some Ambassadors dropped out of the role: *'cos there was a couple people in our class that just stopped doing it'* (CA 12). They are highlighting the problem of recruiting children who may not be invested in continuing with the role over time. This has implications for implementation, if children do not wish to continue being Ambassadors, it may affect how the role is viewed by their peers, alongside affecting the successful running of the programme. The following excerpt illustrates how intrinsic motivation can help support the development of an Ambassador, supporting them to continue within the role and therefore, develop their skills through doing so:

'Yeah, there was other people doing it, but they just didn't have the motivation to keep on doing it and I realised... cos I've managed to do it without the sheet now and it was cos of that motivation, I encouraged myself and I still got nervous as well... but still yeah it was that encouragement that helped me a lot' (CA 12).

This idea of recruiting children who have the intrinsic motivation to take on the role was also spoken about within the Champion interviews: *'the interview process, you know, how invested they are in it, showing self-motivation as well'* (AC 2). The following excerpt reflects the idea that recruiting children for the role based on their

intrinsic motivation is valuable, but it also highlights the challenge in making these decisions:

'Yeah, and it's not that they come in blind because I do actually give them an example of the sort of questions that we might ask in the interview. So, they have had the opportunity to go and think about their answers that they might give. So, some do some don't, and I know some will probably be more nervous than others. The challenges are making that decision based on those things' (AC 2).

Following on from this within the Champion interviews, views were expressed on how many children to recruit into the Ambassador role. There was a difference in opinion between the Champions, with one school preferring to recruit less Ambassadors:

'It helps keep the quality high, doesn't it? Because I can spend more time with those children and I know exactly who the Ambassadors are and I could lose track if I have more of them, and then the teachers know exactly who they are. They're doing it regularly. If there was more of them perhaps, they'd be getting less experience whereas at the moment they're doing it at least once a week' (AC 1). This excerpt reflects the opinion that the quality of the breathing practices will be maintained when there are less Ambassadors within a school, due to them having more individual opportunities to practice and having access to more 1:1 support from the Champion. The point about having plenty of practice and experience is one which was also made within the focus groups: *'well the Champion, we did like a meeting, and it just helped because there was so many I could go to'* (CA 11). This opinion on having access to plenty of practice was echoed by other child participants as being important in their development within the role. Along with this the Ambassadors

spoke about the importance of their training: *'Yeah the training is really important'* (CA 13). The following excerpt illustrates how the training has helped an Ambassador develop their understanding of Take Five along with developing their skills in taking on the role:

'so first off I wouldn't be the way I am in the role without the Take Five Champion, but the main thing was, is telling us what to do, so like I said when you say 'take a few moments to notice how you feel' it's not just saying that and going onto the next line its giving people time and letting them think, and you're also like how you're breathing in and out you're not just quick, it's in and a couple of seconds and then out, and I do it in my head, so they know they've got to hold it in and that calms them down' (CA 12).

This excerpt illustrates the importance placed on the training offered to the Ambassadors. Providing a sound base from which they develop their knowledge and understanding, leading to them successfully carrying out the breathing practices to their peers. The participant also highlights how important the role of the Champion is, in relation to the development of the Ambassadors.

Communication & Support from Staff. Communication and adult support between the Champion and wider staff team supports the continued successful delivery of Take Five through the Ambassador role as illustrated in this excerpt:

'the teachers do offer quite a lot of support and they'll feed back to me if any children are really struggling. So, it's happened before where teachers come to me and tell me 'I really don't think this boy has got the hang of it, and he is really quiet talking

into the card. He's not quite, you know, the children can't hear him. It's not working' (AC 1).

Within this excerpt the Champion spoke about how communication from class teachers to the Champion is helpful for the development of the Ambassadors and enables the quality of delivery of the breathing practices to be monitored and developed. This is an important factor to consider, particularly when thinking about a previous subtheme 'Ongoing Support of School Staff', where participants spoke about the difficulties in ensuring class teachers valued the practices enough to prioritise them within their class. Linking to this current subtheme, the implication may be that if Ambassadors are carrying out the breathing practices, but they are not of a good enough quality, within a class where the teacher is busy doing other jobs this may not be communicated with the Champion. The fidelity of the programme is then affected, which may have a negative impact on Take Five. All three adult Champions spoke about the importance of communication between them and the Ambassadors:

'I think what I might put in place but we haven't done this yet, is I thought it would be really useful to have a bit of a regular meeting even if it's just once a term or something, and I meet with the Ambassadors to see how it's going just a little check in, because sometimes I've found that talking to them, perhaps in passing, when I bumped into them and they've said things to me like we haven't been doing it regularly or we haven't changed our breath this week or something like that, well you need to maybe have a word with the teacher so it is good to keep in constant communication as much with the Ambassadors' (AC 1).

The Champion reflected during the interview how they could improve this within their school to ensure difficulties are spoken about. This can then lead to the Champion being able to act if needed and support the Ambassadors with the communication of any difficulties with class teachers. This point was also made by another Champion who spoke about the importance of pupil voice within this process:

'I know that they can go to X if they need support. I'd like to think that they can go to the class teacher as well and I'm wondering if we need to facilitate check in meetings or giving those Ambassadors time together and to support each other. Maybe not with me or X, but just giving them opportunity to discuss things and to talk, and I'm already sitting here and thinking, so I run school council as well, and I'm wondering whether inviting someone from the Ambassadors to a school council meeting...we need to get their opinions more. You know we talked about what difficulties we find. Do we know what difficulties they have? When they are leading it, do they want the class teachers to support them more?' (AC 3).

It is interesting to note how different Champions reflected on the same area within the interviews, recognising the need to provide a forum for the Ambassadors to be able to voice their opinions, which would help them receive support they may need to carry out their role effectively. This subtheme was also reflected within the Ambassador focus groups; the children spoke about their difficulties when conducting breathing practices to their class, and their different experiences of support from adults: *'It makes me feel quite annoyed that people are talking in the practices...sometimes our teacher tells them off...but that's not what we're meant to do'* (CA 2). This Ambassador spoke about two difficulties when running the breathing practices within their class. The first difficulty was children not being respectful of the

practice and talking when they are meant to either take part or remain quiet while other children participate. They went on to say that although the class teacher is supporting them by asking children to be quiet, the approach may not be suitable. Within the Take Five Ambassador training, the Ambassadors learn that it is important to not single out individual children within the group practices, rather address the whole class or speak to children on an individual basis:

'Yeah, cos if you like single someone out then it will make everyone look at him and it will make, draw everyone's attention to him and they will stop doing the practice, but if you do it as a whole group and remind everyone as a whole group, they won't like look at one person and they won't stop the practice' (CA 5).

This excerpt highlights the importance of not only the Ambassadors receiving their training and developing their knowledge and understanding of the programme, but also class teachers understanding how to support the Ambassadors in the most suitable and effective way. A common difficulty throughout the focus groups was Ambassadors finding children disruptive during a breathing practice:

'Sometimes I find it difficult when we're doing Take Five breathing in front of a class, and sometimes the people at the back don't listen and they just talk...they look at us like they know what we're saying but they just carry on being silly, when they carry on being silly I just try and remind em that we need to stay calm' (CA 1).

The thought expressed was echoed by all Ambassadors: *'a difficulty is that people don't stop chattering and erm things like that'* (CA 7). Highlighting the need for the Ambassadors to not only be trained and supported by their Champion, but to also be supported effectively by their class teachers. Factors impacting on the Ambassador

role not only consist of direct adult support, throughout the interviews and focus groups participants spoke about aspects of the role that supported the Ambassadors in their development.

Teamwork – Working with Each Other. The children within the focus groups not only spoke about how support from the Champion and their class teachers was important for their development, but support from each of the other trained Ambassadors was also valued:

'It gives me a big boost of confidence because I know I'm not alone other people are doing it as well and that it's not just me and if I do need help, I've got someone who is also trained that I can go to' (CA 8).

This participant reflected on how they valued the support from their fellow Ambassadors, and how they could learn from each other within the role. This was echoed by other Ambassadors:

'Yeah, because you've got people who can tell you what you're doing because they know because they're doing it as well, they know what the lines are and stuff like that and they point it out to you, so they'll say, 'next time don't forget this line' (CA 12).

The Ambassadors throughout the focus groups spoke about being able to lean on each other for support and feedback, and how working together as part of a team supported them within the role:

'Well, we take it in turns, so one of us does it after break and one of us does it after lunch, so we kinda both feed off each other. So, if he's done something wrong, I'll tell

him, but if I've done something wrong, he would tell me so what we've kinda done if we've muddled a word or missed a line out or something like that' (CA 13).

'It feels better than working by yourself, because when you have someone helping or working with ya it feels better, like football if you're by yourself in your garden and it's just you and you wish you had a teammate' (CA 12).

The views expressed within these excerpts reflect how children taking on a peer role may work more effectively when they can work together in the delivery of the role and support each other in their development. This leads to consideration about how this links to the subtheme 'Recruitment and Training', where it would be beneficial for the Champions to consider how many children are being trained, to ensure there are enough Ambassadors to support each other in their classes and year groups.

Responsibility, Autonomy, and Competence. Within the interviews Champions spoke about the positive impact of responsibility on the Ambassadors: *'I think the responsibility of being in charge, not in charge in an authoritative type of way, but just in charge of leading the practice' (AC 2).* Having that sense of responsibility and autonomy appears to support the Ambassadors in their development and ability to carry out the role effectively:

'Having that sense of identity and belonging within school, I think that can be said for most programs like school councils, you know, just knowing that they're a Take Five Ambassador probably makes them feel quite important and valued, and I think especially once we start doing it around the school and they're moving around school and doing it to all the children, those children will then look up to them and

that will give them a sense of confidence and achievement, I would imagine. It's got to be character building, hasn't it?' (AC 2).

Within this excerpt the Champion speaks about how feeling valued within school through having responsibility will support the development of confidence within these children. While this is a positive impact for the children taking on the role of Ambassador, it also highlights the need for these factors to be considered when thinking about the implementation of a peer led programme within a school. To support the success of a peer role, considering how responsibility and a sense of autonomy can be given, appears to be an important aspect: *'I think placing responsibility and making a big deal about the role, and you know to be able to help other children with their feelings and their emotions'* (AC 2). The point is that for children to invest in the role, and feel motivated to continue to develop, there needs to be a sense of responsibility and autonomy. Without this the children may not value the role as highly, which could affect recruitment and ongoing willingness and motivation to continue with it:

'They like having that responsibility. They're always asking when we're going to be able to go down and do it in different classes, they do really like it' (AC 1). Within the focus groups a common thread was children talking about a sense of competence within their role:

'I think the good thing has been people want to listen when I'm doing it, and a lot of people take it on board, so it makes me feel like I'm doing it right and I'm reading it properly, and you know when it say's 'take a moment to think about how you feel' it makes me feel that people think about that, so it just makes me think I know what I'm doing' (CA 12).

Within the focus groups some children spoke about a difficulty they experience is feeling that they are not being effective in their role:

'Yeah the one thing that kinda um makes it difficult for me is when people don't do it in class, and they kinda make me think have I done something wrong, am I not doing it right, and I know people do want to do it it's just when I see people chatting...it makes me think in my own brain am I doing something wrong, but then I just think in my own mindset I think I've done everything right and if they don't want to do it they don't want to do it' (CA 13).

The point is that for Ambassadors to feel motivated to continue in the role and therefore for Take Five to be successfully implemented they need to feel they are competent and therefore, being effective: *'It makes me feel good because I know I'm helping people calm down and being ready to learn and ready to focus' (CA 14).*

What leads to the Ambassadors developing and becoming more competent was discussed within the interviews and focus groups:

'I would say that probably the most beneficial element of it is when the children are practicing the breathing and then the mentors give them that feedback. So, we've got one Ambassador in year six, who has just got such a lovely manner with him, and he'll say 'that was fantastic, I really like the way that you did that. That was really nice and slow and well-paced' and it's like an adult speaking and then he'll say, 'but you know, maybe next time if you project your voice a bit louder, and pretend you're the teacher and you've got to be a little bit louder and clearer, that would really help me', and he's just, it's lovely to hear them taking that role on' (AC 1).

This excerpt illustrates how several important factors underpinning the role of the Ambassador can positively impact on the development of competence. The responsibility placed on the older and more experienced Ambassadors taking on the role of training other Ambassadors can support the development of competence within the children they are training, along with developing their own sense of competence through having an increased responsibility within the role.

2.4.4 Theme 4: Impact of Take Five in School

The theme 'Impact of Take Five in School' reflects views expressed from both Champions and Ambassadors on how Take Five can benefit both the wider school community along with how the role of Ambassador can be beneficial to those who undertake it. Although the research questions focus was to establish what the facilitators and barriers to establishing and implementing Take Five within a school are, participants did speak about how Take Five benefitted their school community. Champions and Ambassadors both spoke about how Take Five breathing practices support emotional self-regulation, represented through the subtheme 'Emotional Self- Regulation'. The second subtheme 'Ambassadors Confidence' reflects views expressed about how the role of Ambassador leads to an increase in self-confidence.

Emotional Self-Regulation. Throughout the interviews and focus groups participants expressed how Take Five breathing practices positively impact on emotional self-regulation: *'I think it helps them to be aware of how mindful breathing can impact their body, health, their mental wellbeing and why it's useful'* (AC 1). Within the focus groups children expressed how they thought the breathing practices impacted on their peers:

'You're not just doing it for the sake of doing it...you're helping other people as well, it's that relaxation, that calming down. It helps a lot of people work and be focused on the job their supposed to be doing' (CA 8).

'Well, it can kind of help other people's mindsets...even if its outside of school if people are thinking about outside school stuff and you've got Take Five which you're not thinking about anything it's just breathing, calming down... it gets you in that mindset that you're ready, ready to go. So, it can also help outside of school as well as in school' (CA 12).

These excerpts illustrate how Take Five is viewed as positively impacting on the children taking part in the daily breathing practices, leading to the development of improved emotional self-regulation. This theme does not sit in isolation from the previous three themes, and links to how Take Five is implemented across a school. If there are variations in the quality of how the breathing practices are carried out this may affect the potential positive impact of Take Five on emotional self-regulation:

'they also learn how to do it safely and why we need to do things like the grounding. Why it's important to follow all the different stages of Take Five so that they don't miss anything out. I think if we were just to give children the cards and say right read this, they wouldn't have the awareness, they might skip parts whereas they know that each part has a really important purpose. So, I think it's important to take the time with the training of it so that they understand from the first time they do it, why they're doing everything they do' (AC 1).

This excerpt highlights the importance of the initial training of the Ambassadors, how it is not just about reading a script, it is about gaining an understanding and

awareness of how to carry the practices out safely. Alongside this and as spoken about previously the Ambassadors require ongoing support from the Champion and their class teachers. If class teachers are not seeing a positive impact, they may place less value in the programme and not prioritise the practices, further affecting the quality of how they are carried out. Therefore, this is another reason why impact is an important factor to consider with respect to implementation. Within the interviews Champions spoke about encouraging children to use Take Five practices during moments of dysregulation, along with explaining to the wider staff team how the practices can be used during other moments of the school day to support emotional self-regulation:

'Well, I think basically it's the calming down aspect. I mean it does help them. There are children that choose not to take part so we're trying to explain to them, how do you know it's not gonna help if you don't try, and we spoke to a lot of children that do say they're using it out of school as well to calm down, and so yeah, just the calming, the breathing effect of when they get worked up and to be able to calm themselves down is obviously them being able to self-regulate, isn't it?' (AC 2).

The success of Take Five within a school is dependent on the initial implementation of it, however, the impact of Take Five on children's emotional self-regulation will support the continued embedding of the programme within a school. If school staff can see a positive impact, they may be more likely to place value on the practices, and therefore, prioritise them during the school day. Alongside this if Ambassadors feel they are making a positive difference to their peers, this may support their motivation to continue in the role.

Ambassadors Confidence. Champions and Ambassadors expressed thoughts on how the role of Ambassador benefits the children taking on the role. They spoke about the development of confidence, amongst other skills such as, leadership and the ability to work with others:

‘Overall, I just think it’s a great opportunity to be honest. It can build on a lot of confidence, and it helps a lot of people if you think about it. It can help people outside of school and it builds a lot of confidence, and I think it’s a great opportunity for people to have’ (CA 12).

‘Yeah, its defo as well, it’s the confidence again, it can help make people think if they want to do a good thing but think ‘no I’m not brave enough’, but if they see other kids that do it and are brave enough, they’ll think I can do it, there are loads of other people doing it. Take Five helps a lot with confidence not just the breathing it’s to do with a lot of skills’ (CA 13).

These excerpts illustrate how the Ambassadors think taking on the role supports their personal development. Ambassadors went on to highlight further how it can support the development of confidence by giving examples of how they think it has benefitted them in other areas of their life: *‘Since I’ve done it, I’ve been a lot more part of other clubs, I’ve joined a football club outside of school since’ (CA 6).* This common thread throughout about how Ambassadors experience the benefit of taking on the role, feeds back into how the programme can be successful in its implementation. Consideration should be given to how children taking on a peer lead role will experience personal development. Ambassadors experiencing these benefits and recognising how it is supporting their development in other areas of their lives may experience a greater motivation to remain in the role, therefore

supporting the continued embedding of the programme. Within the interviews and focus groups participants spoke about positive feedback from the wider school community which helped Ambassadors grow in confidence:

'I think just doing it more and more, they've sort of got the hang of it and got into the swing of it...and when they came into my class, I then said to the children, what do you think that they did really well and wasn't that amazing? And then my class said, 'they were so clear' or 'it was really relaxing', 'I feel really calm now'. So, they got a lot of positive reinforcement and I think they like it when they have an impact, don't they? So, they could see that straight away, so that boosted their confidence' (AC 1).

This excerpt highlights how positive feedback from their peers can support the development of the Ambassadors. This links to Theme Three, where the Ambassadors spoke about the importance of feeling competent within their role. Through hearing positive feedback Ambassadors will grow in confidence and therefore, feel they are being competent within the role. Table 3 shows a summary of the main findings, highlighting the factors which support and help maintain successful implementation of Take Five.

Table 3

Summary of Main Findings

| Factors Supporting Initial Implementation of Take Five | Factors Supporting Embedding and Maintenance of Take Five |
|--------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| Careful consideration of who takes on the role of adult Champion. | SLT value the programme through prioritising and allocating time to Take Five. |
| Consideration of individual aspects of the school and how Take Five practices will fit in. | Communication and support for the adult Champion from SLT. |
| Whole school staff training. | Supporting wider staff team with implementing practices and monitoring the quality of practices. |
| Robust recruitment process for child Ambassador role. | Training new members of staff and access to refresher training if needed. |
| Training and support for child Ambassadors for development of competence. | Time given to listening to child Ambassadors to gather their views & support sense of responsibility & autonomy. |
| Breathing practices timetabled into the school day. | Ongoing support to child Ambassadors to develop confidence. |
| | Celebrate and promote positive impact of Take Five across the school. |

2.5 Discussion

This study aimed to explore the implementation of a whole school peer led emotional self-regulation breathing practice, through specifically identifying aspects linked to implementation factors which may facilitate or impede the successful universal embedding of the programme. There was one overarching research question and two additional sub questions:

RQ. What aspects linked to implementation factors are relevant to embedding the Take Five whole-school peer led emotional self-regulation breathing programme?

RQ1a. How do Take Five student Ambassadors experience supporting their peers through peer led breathing practices?

RQ1b. How do adult Champions ensure successful embedding of the Take Five programme?

Reflexive TA was used to analyse the interview transcripts of three adult participants, and 14 child participants from three focus groups. Four themes, 'Support from Senior Leadership Team', 'Training and Support of Wider Staff Team', 'Factors Underpinning the Ambassador Role', and 'Impact of Take Five' were identified in relation to the RQs. The findings will be discussed within the context of existing literature, and how they relate to each sub research question. The discussion will cover implications for practice for schools implementing peer led programmes, along with how EPs can support schools in this process. Suggestions for future research will be considered and limitations of the current research will be discussed.

Table 4

Mapping of Themes onto the Research Questions

| Themes | Main Overarching Research Question | |
|------------------------------------------|------------------------------------|------|
| | RQ1a | RQ1b |
| Support from Senior Leadership Team | | ✓ |
| Training & Support of Wider Staff Team | ✓ | ✓ |
| Factors Underpinning the Ambassador Role | ✓ | ✓ |
| Impact of Take Five | ✓ | ✓ |

2.5.1 RQ1a: How do Take Five student Ambassadors experience supporting their peers through peer led breathing practices?

Ambassadors spoke about the positive experience of leading breathing practices to their peers. They expressed how helping others and seeing the impact of their role on their peers was fulfilling, which relates to Theme Four (*'Impact of Take Five'*). This is consistent with previous findings, where student mentors experienced a significant positive impact on their own wellbeing when supporting younger children, feeling a sense of reward and pride from helping others (Brady et al., 2012, James et al., 2014; Messiou & Azaola, 2018 as cited in Stapley et al., 2022; Panayiotou et al., 2020). This supports the use of peer led programmes, where there are benefits experienced for the children taking on a role as well as by those being helped (Topping, 1996). Stapley et al. (2022) interviewed mentors who reported they experienced positive feelings through helping mentees. They described personal development from supporting others, such as their communication and interpersonal skills. Ambassadors reported experiencing similar benefits. They spoke about feeling more confident in themselves, which impacted other areas of their lives in a positive way. Ambassadors explained their confidence

developed as they became more experienced, which links to previous findings of how taking on a peer lead role can develop confidence in those that take it on (Mentoring & Befriending Foundation; MBF, 2011, as cited in Stapley et al., 2022). Ambassadors explained witnessing the calming influence of the breathing practices on their peers led them to experience a sense of competence, knowing they were doing a good job was important for them, which is illustrated in Theme Three (*'Factors Underpinning the Ambassador Role'*). The importance of feeling competent within their role can be explained through the lens of self-determination theory, how supporting others can help meet the need to feel competent, supporting psychological wellbeing. This links to previous findings, Dantzer (2017) reported the beneficial impact on student mentors supporting younger children, providing a basis from which the three psychological needs of autonomy, competence, and relatedness could be met.

Ambassadors expressed their thoughts on why children leading the breathing practices could have a positive impact on other children. They spoke about how children will look up to them, and consider taking on the role themselves, therefore providing a role model for others. This supports previous observations that peers can provide a more credible and approachable source of support (Baginsky, 2004), providing credibility to the role without authoritarianism (Topping, 1996). However, when discussing difficulties in the role, Ambassadors spoke about questioning their own competence, which affected their confidence. Feedback from their peers in the form of them not engaging during the breathing practices could impact on the Ambassadors' sense of competence. Negative feedback may affect intrinsic motivation, specifically the feeling of competence (Deci et al., 1991). A common thread throughout the focus groups was the difficulty with peers not engaging in the

breathing practices. Ambassadors explained how they find this hard to manage, it leads to them feeling annoyed and wondering if they are not being effective in their role. Baginsky (2004) found peer pressure appeared to affect the engagement of mentors, being ridiculed for taking on the role led to them feeling demoralised and then dropping out of the programme. Ambassadors spoke about how some children had stopped being an Ambassador when they reached year six due to not finding it 'cool' anymore. This has implications for the continued successful implementation of the programme. Mitigating and supportive factors for this difficulty was the training the Ambassadors received, support from adults, and witnessing a positive impact of the breathing practices on other children. This links to Panayiotou et al. (2020) research, where facilitators to implementation included mentor training and supervision. Ambassadors spoke about how important the training was for them to develop their knowledge and understanding of Take Five, and how to carry the breathing practices' out. Throughout the focus groups Ambassadors explained training supported their development, which is illustrated within Theme Three. Having a supportive and encouraging adult Champion, along with plenty of opportunities to practice was an important factor for the Ambassadors in how confident they felt, which is consistent with previous research (King & Fazel, 2021). Ambassadors gave examples of how the training sessions were interactive, which enabled them to practice carrying out the breathing practices in a safe and supportive environment. In addition to the training sessions, if they were feeling underconfident their Champion ensured they were able to practice with younger age groups within the school prior to leading a breathing practice to their same age peers. The importance of training and ensuring this is consistently and effectively implemented was noted within the Panayiotou et al. (2020) research where

challenges to implementation included gaps in training, along with inconsistent delivery from practitioners taking different approaches. Ambassadors spoke about the importance of not only receiving the initial training and support from the Champion, but also how ongoing support from their class teachers could impact on them carrying out the role. Ambassadors spoke about difficulties they experienced in how they received support from their class teachers in facilitating the breathing practices. Ambassadors explained they did not always feel fully supported when delivering the breathing practices, their class teacher may not always take part, so not setting an example for the class, or they did not prioritise the practices, so they were sometimes missed. Inconsistent delivery was also found as a key implementation issue within Panayiotou et al. (2020) research.

The adults interviewed expressed an interesting reflection on how they could improve the effective implementation of Take Five, by providing a forum for the Ambassadors to voice any difficulties, which is represented within Theme Three. The adults recognised increasing communication between them, and the Ambassadors would support the Ambassadors as well as ensuring the practices were being implemented effectively. Previous research found a strength within a peer counselling programme was giving the peer supporters a voice and opportunity to contribute to the development of the project within their school (Houlston & Smith, 2009). King & Fazel (2021) suggested future designs of interventions would benefit from direct input of young people who are well placed to co-design intervention decisions. Alongside training and support from adults, Ambassadors spoke about how they supported each other. They enjoyed working together and shared how receiving feedback from each other helped develop their competence. Working as a team created a sense of belonging, as one child explained they had not been part of

any school clubs prior to taking on the role of Ambassador, and they experienced positive feelings from being part of the programme. This can be viewed through self-determination theory, where experiencing a sense of relatedness supports the development of psychological wellbeing (Deci & Ryan, 1985). When considering what supports the successful implementation of a peer led programme, the factors underpinning self-determination theory could be valuable aspects to include, as both a sense of competence and relatedness was expressed as important to the Ambassadors in their ongoing engagement in the role.

2.5.2 RQ1b: How do adult Champions support successful embedding of the Take Five programme?

Champions interviewed expressed how the initial approach to a peer led programme and the planning of how to embed it within a school is important. The interviews conducted across two schools showed some common approaches as well as some differences in how these schools took to implementing Take Five.

Therefore, highlighting the need for schools to consider how a programme can be individualised to fit within their school, while maintaining fidelity to the programme. A shared view across the schools was the importance of SLT understanding Take Five and supporting Champion's which is illustrated within Theme One (*Support from Senior Leadership Team*). This links with the review the DfE (2017) conducted on what supports peer support initiatives within schools, where having a senior lead specifically assigned to the programme ensures there is ongoing support, along with being able to facilitate problem solving for any issues that arise. The support from SLT was viewed as key to the successful implementation of Take Five across a school, supporting previous research where school leadership was recognised as a key construct to target at the outset of implementing a whole school programme

(Hudson et al., 2020). A difficulty recognised was teachers not valuing and prioritising the breathing practices and not buying in to the programme, which has been found within previous research to be a difficulty. For example, Lendrum et al. (2013) found a lack of buy in from staff related to the variability in the level of implementation of the social and emotional learning programme – SEAL. Within the current research support from SLT helped to mitigate this difficulty, as it supported the wider staff team to develop their understanding and recognise it was a priority for the whole school. Spoth et al. (2013) found there is a need for significant infrastructure to support whole school approaches. Within one of the interviews a participant reflected how maintaining the visibility of Take Five across time would support the wider staff team to recognise and understand its priority, for example through displays being updated and keeping it as a regular agenda item during staff meetings. This links to previous research that found maintaining perceived priority, along with maintaining an intervention as high profile over time regardless of challenges, was key to the successful implementation of a whole school approach (Hudson et al., 2020). Having support from SLT was also deemed important for the continued support of the Champion within their role. Interviewees spoke about how support from SLT enabled them to prioritise their role, and assign the time needed to carry it out effectively. They also spoke about how a member of SLT could support them to communicate with the wider staff team, to promote the value of Take Five to ensure it is being implemented sufficiently. Previous research on implementation factors found competing priorities and pressure to focus on the core academic curriculum meant programmes were not implemented at the recommended frequency (Humphrey et al., 2018). This point links to the training and continued support of the wider staff team, when considering the successful embedding and

implementation of Take Five. Interviewees spoke about the importance of the initial launch and training of the wider staff team to promote and support the programme. However, within the interviews they reflected on how ongoing support and the training of new members of staff was more difficult. Wilde et al. (2019) recognised implementation occurs through stages and takes time, which links to reflections participants had on the process and path to embedding Take Five. There was recognition of where they had started from; launching it to the wider staff team; breathing practices becoming ever present within the school day and supporting the wider staff team to get on board with it. Alongside this was a reflection on the difficulties experienced with embedding it in the school's approach to emotional self-regulation, and how maintaining Take Five requires time, and a recognition that new members of staff will need input on it when joining the school. A key finding from Hudson et al. (2020) research into implementation of whole school approaches, was the 'need for momentum maintained over time' to achieve implementation success. Within the current research the difficulty with maintaining momentum was discussed. This links to the importance of the initial planning stages prior to launching a new initiative, to ensure these difficulties are considered and planned for, as one participant noted it is important for a school to take their time and plan carefully. A difficulty associated with the implementation of peer support programmes is the recognition that schools may have conflicting priorities, and a lack of time to dedicate to ensure programmes are put in place (DfE, 2017). McKeering and Hwang (2019) found time constraints within the school day were an important barrier to successful implementation. This links to the Ambassador's experience and their continued development within the role. If class teachers did not value the practices and neglected to support the Ambassadors to carry them out, the Ambassador's sense of

competence was negatively affected. Throughout the interviews participants expressed the difficulties in allocating sufficient time to ensure Take Five was being successfully embedded within the school. The adults knew what supported the success of the programme and reflected there was a need for increased communication between them and Ambassadors. However, this is difficult to implement due to other priorities, roles, and responsibilities that the adults hold. Interviewees spoke about how two members of staff holding responsibility for Take Five helps alleviate the difficulties with allocating sufficient time. They expressed how having a key member of staff within SLT provides the programme with the support needed for the wider staff to team to understand its importance, along with another member of staff such as a teaching assistant to be able to prioritise the continued running of the programme, for example running the Ambassadors training sessions. This is in line with previous research where the consistent delivery of a peer led programme can be supported by appointing a senior lead for the intervention (Panayiotou et al., 2020).

Recruitment of Ambassadors was a common thread throughout the Champion interviews and is highlighted within Theme Three. It is also relevant to RQ1a, and the views shared from child Ambassadors about their reasons for applying for the role; their experience of the training and the benefits they have experienced from being an Ambassador. There was consensus on how it was advertised as a role within the schools, and adult Champions expressed the importance of promoting it as a special role and ensuring the recruitment process was thorough, supporting previous research highlighting the importance of how children and young people are recruited into peer lead roles, to ensure suitable selections are made (Panayiotou et al., 2020). However, there were some differences identified between the two schools.

One school took the approach of recruiting children based on qualities they already possessed, such as confidence in speaking in front of others and those who were considered to not display any difficult behaviour. Within this school class teachers nominated children to apply. In contrast within the other school the role was opened to a variety of children. This school spoke about how the recruitment process was still rigorous, with an application form and interview, but any child could apply. The interviewee explained this had led to children applying who found other aspects of school difficult. An example given was a child who could display difficult behaviour at times, but through taking on the Ambassador role, and having a sense of responsibility supported them with positive changes to their behaviour. Research has found engaging young people in activities which focus on relatedness, autonomy, and competence can have a positive impact on them. Ambassadors spoke about the individual differences between them, and their reasons for becoming an Ambassador differed depending on their motivations. They expressed how for some Ambassadors taking on the role related to them wanting to develop their confidence or was around them wishing to be part of something. This highlights the value in recognising how a peer role can be inclusive of different needs and can tap into and target various intentions for children wanting to take part and benefit from it. Previous intervention programmes with self-determination theory as their basis have been created to intervene more effectively with young people who are viewed as 'at-risk' (Burke et al., 2020). Research has found providing a sense of autonomy has resulted in reductions in problem behaviour (Konrad et al., 2007; Shogren et al., 2004; Guay, 2022). Consideration of these differences in approaches across schools' prompts thinking on how important it is at the initial planning stage for schools to map out how they see a peer led programme being implemented. What the aims are for each

school and how this translates into the recruitment and training of children. Consideration of how children will be supported within their role and the time allocated for this may impact on how children are recruited. Children experiencing difficulties within school may require more support, guidance, and input from the adults to help them be successful in their role, but the benefits of taking on a role and experiencing greater autonomy as part of their school experience may make this investment in time worthwhile (Guay, 2022). It is interesting to consider the differences across the schools in how Ambassadors experienced the development of confidence through the role. Within the school where recruitment was a more open process, children within the focus groups spoke emphatically about the increase in their confidence. Some children spoke about how they lacked confidence prior to becoming an Ambassador, but due to their training, support from adults and support and feedback from their fellow Ambassadors their confidence has grown, influencing their life in a positive way. Confidence was spoken about several times as a positive impact from taking on the role. King & Fazel (2021) scoping review of peer led interventions discussed the potential for more vulnerable children being asked to be peer leaders and not just recipients, due to the possible improvements in self-esteem from taking on a role. King and Fazel (2021) recognised the need to explore in more depth interventions using solely teacher-selected, partly pupil and teacher-selected, and solely pupil-selected roles in peer led programmes, to investigate which method of selection for peer roles is most effective. Within the interviews participants spoke about how children taking on the role of Ambassador and leading the breathing practices was part of the success of embedding the practices within the schools. Interviewees expressed how the Ambassador's dedication and enthusiasm for the role helped support the implementation, and maintain momentum for Take Five over

time, as one interviewee stated, the adults forget to carry the breathing practices out at times, but the Ambassador's do not. Interviewee's spoke about how children leading the practices may support engagement from the wider school population due to presenting as a role model. Blakemore and Robbins (2012) discuss the importance of social influence and peer attachments in the adolescent years, which strengthens the case for peer led approaches. There was consensus amongst the interviewees that being child led meant Take Five became embedded within various aspects of the school day, supporting the overall implementation. The Ambassadors not only led breathing practices within their classroom but used them within unstructured play times to support their peers without prompting from adults. King and Fazel (2021) recognised peer led programmes can be utilised in a manner which is scalable across a school, enabling schools to increase the reach of these interventions. The authors also made the point schools have access to many CYP who are often keen to take on a role of responsibility and contribute to their school community. Ambassadors also created a link between school and parents. Within the interviews there were moments of reflection where Champions recognised the need to include parents in the process of implementing a whole school approach and considered ideas of how to do this, for example, having a parent information session and inclusion of the Ambassadors within this. The idea that improving parents' awareness and knowledge would support the wider use of Take Five. Goldberg et al. (2019) stated involving families within the implementation of whole school approaches supports the extension of learning to the home context. They recognised embedding families within whole school approaches reinforces the complementary roles of families and educators, extending opportunities for learning across both contexts.

2.5.3 Implications for EP Practice and Future Research

Throughout the interviews and focus groups participants expressed their support of Take Five and how they valued their role in the programme and spoke about the viability of Take Five within their school. Participants explained how Take Five practices benefitted the school community as an emotional self-regulation tool, benefitting individual children and whole classes. Previous research has found attention to breathing down-regulates the activation of the amygdala and increases amygdala-prefrontal integration (Doll et al., 2016). When regulating emotional responses prefrontal control systems modulate emotion-generative systems, such as the amygdala which identifies affectively arousing stimuli (Holzel et al., 2011). Therefore, breathing exercises may improve prefrontal cortex control over amygdala responses, promoting the ability to regulate emotions. Research has found children have experienced less anxiety before tests and show an increased ability to pay attention following mindful breathing (Beauchemin et al., 2008; Napoli et al., 2005). However, there have been mixed findings on the impact of breathing exercises with school children. Kurth et al. (2020) reported children who took part in a mindfulness breathing practice prior to taking on a task, had a higher psychophysiological stress reaction during the task than the comparison group. Although the authors did find the stress reaction to the announced difficulty of the task was smaller in the mindfulness group than in the comparison group. The authors recognised further research is needed to explore the physiological stress response in children following breathing practices.

It is important to note there are differences between mindfulness interventions and the Take Five approach. Mindfulness interventions while often incorporating

breathing exercises also include a taught curriculum, such as the .b approach. This curriculum is designed to help people learn to direct their attention to the present moment, this can include breathing, other physical sensations, thoughts, emotions, and other daily activities, and is delivered through taught lessons focusing on one mindfulness skill at a time. Mindfulness breathing exercises also vary in length, whereas Take Five is a breathing exercise, typically lasting for 3-5 minutes, and is delivered without additional sessions alongside it. It may be valuable to explore these differences in approaches and the impact on emotional self-regulation.

Although the current research provides qualitative support for the use of breathing as a method of emotional self-regulation, the impact of the breathing practices was not explored in detail. Future research could therefore investigate the experiences of the breathing practices from the perspective of the wider school community.

There was recognition of how the role of the Ambassador benefitted the children taking it on, leading to a growth in confidence and the development of interpersonal skills. Across interviews and focus groups participants expressed the view that Take Five practices being peer led provided the wider school population with role models, along with an understanding that children may be more ready to engage in a breathing practice when it is led by a peer. The research provides schools with understanding of how children can be supported within a peer led role. Within the interviews participants recognised the need for gathering the Ambassadors' views and establishing opportunities for communicating with them on a regular basis. The research findings highlighted the need for the inclusion of the child's voice when implementing a whole school peer led programme. Ambassadors expressed the importance of having ongoing support from their class teachers with the delivery of Take Five to their peers. When there was a lack of ongoing support

from class teachers, the Ambassadors spoke about difficulties such as breathing practices being missed or not delivered effectively due to lack of engagement from other children. This leads to the recognition that children taking on a peer role need to be included in the process of implementation, where their voice is prioritised, and time is given to collaborate with them. Rather than them being a product of the process they should be an integral part of the whole school approach. Champions reflected on this during their interviews, considering how the voice of the Ambassadors could be heard, such as inviting them to school council meetings, and having regular allocated check in slots to express their views. Therefore, when setting up a peer led initiative it would be valuable for schools to consider how they would incorporate this into the planning of the programme. Within the focus groups, Ambassador's expressed views on what supported them to be successful in their role and what difficulties they experienced. This information feeds into how adults within the school can support the successful implementation of Take Five. Inclusion of children and young people's views appears to be valuable for the success of a peer led programme, Mooney (2018) recognised the importance of gathering young people's views on the implementation of a peer mentoring initiative, which helped shape the structure of the programme moving forward.

The understanding of what supports implementation of a peer led programme could help support EPs when working with school staff on the planning, implementation, and successful embedding of such programmes. Previous research has argued training alone does not support effective implementation into practice (Fixsen et al., 2009). For organisations to successfully implement new initiatives strategies need to be put in place to aid implementation (Kelly & Perkins, 2012). Georgiades and Phillimore (1975) argue behaviour change is influenced and shaped

by the ethos and relationships within organisations (as cited in Chidley & Stringer, 2020). EPs can work with schools to support the development of environments which can create supportive climates for change, Farrell et al. (2006) recognised how EPs can contribute and facilitate organisational change, through their understanding of how relationships between people work within systems and organisations. EPs can use a range of approaches when working systemically and at the organisational level. Morgan (2016) found supporting schools to have a sense of ownership throughout the process of change, where they can feel in control of decisions and the steps being implemented was important and reflected ideas put forward by Onyett (2009) where enabling people to stay within their sphere of influence rather than engaging in discussions outside of their control was valuable. This links to the recognition that implementing a whole school approach such as Take Five, requires understanding of the individual school and how a new approach can fit best into existing systems.

EPs can support schools in implementing new initiatives through raising awareness of the supporting factors and barriers to implementation, providing support to address these enables EPs to contribute effectively to organisational change (Chidley & Stringer, 2020). This research builds on previous knowledge of how to support implementation of a peer led initiative, along with developing awareness and understanding of what supports a peer led emotional self-regulation programme. Chidley and Stringer (2020) developed an implementation framework for EPs to use, to support discussions about how EPs can work with schools to facilitate change. This framework adopts a plan, do, review approach, highlighting the significance of planning, as well as focusing on the intervention itself, to lead to the achievement of positive outcomes. When supporting schools with planning EPs

can facilitate discussions on how schools consider which factors are important to them, along with any anticipated challenges they may encounter as a school and how to tackle them. EPs can use knowledge about Implementation Science along with using psychological understanding of what supports the success of a peer led programme when supporting schools within these planning discussions.

2.5.4 Limitations

This study contributes to the knowledge base and understanding of what supports and hinders the successful implementation of a peer led programme. However, it is important to consider the findings within the limitations of the research. The schools which took part are located within two miles of each other, covering similar socioeconomic areas of the community, alongside this there are a limited number of participants, three adult interviewees and 14 children across three focus groups. This limits the transferability of the findings across other schools who may be implementing peer led programmes and their experiences of this. However, Braun and Clarke (2021) discuss how the concept of data saturation is not consistent with the values of reflexive thematic analysis, stating meaning is generated through interpretation of data, therefore the concept of how much data is needed for saturation is subjective, and cannot be determined wholly in advance of analysis. Malterud et al. (2016) explained the concept of information power, where the more relevant information a sample holds, the fewer participants are needed. Through the process of data analysis, themes and sub themes were identified. The analysed data from both the interviews and focus groups provided support for these themes. However, it is recognised the research was conducted across two primary schools and therefore the findings cannot be transferred to different settings, such as secondary schools. There are differences between primary and secondary schools which may impact on implementation of peer led programmes, for example, the age and developmental stage of CYP along with differences in the structure of the school day between primary and secondary schools. Alongside this there were differences which emerged between the two schools, such as their approach to recruiting Ambassadors. This may dilute theme three 'Factors Underpinning the Ambassador

Role', as Sandelowski (2008) stated, it is not only the number of participants which is important for data saturation, but their experiences as well, and 'meaning saturation' can be affected through the relevance and richness of information provided (Hammersley, 2015). Therefore, these differences in approaches across the two schools may have been added to, had more schools taken part, which would have led to theme three improving in depth and saturation. Researcher subjectivity is viewed as a resource within the reflexive thematic analysis process and is not a problem to be managed or controlled (Gough & Madill, 2012). However, while Braun and Clarke (2022) argue the value of reflexive thematic analysis is the researcher's subjectivity as part of the analytic process, they recognise the value in the use of a second person being part of the process. Due to the deductive nature of coding and construction of themes, a second person involved in this process may have resulted in different themes or subthemes being identified. The researcher's process of coding is likely to have been influenced by pre-existing ideas, assumptions, and theoretical knowledge. This will be reflected on further within the next chapter.

Within this research only those directly involved in the implementation of Take Five were recruited as participants. The experiences of the wider school community on the implementation of Take Five were not explored, which could be an interesting avenue to explore in further research. Gathering the views of both adults and children who did not have a Take Five role within their school may have produced alternative views and experiences of how Take Five was implemented. Alongside this the research captured a moment in time on the implementation of Take Five within the schools. Gathering information at different time points may have produced different views, as previous research has stated implementation of whole school approaches is a process over time (Wilde et al., 2019). One Champion explained in

their interview that they began Take Five at the start of the school year, where they were able to dedicate time during INSET days to training the wider staff team, they reflected that this worked well for them as a school and the ease at which it was embedded may have been affected if it had been launched to the whole school at a different point in time during the school year. Therefore, researching the process of implementing Take Five and following its journey within a school would be interesting to investigate.

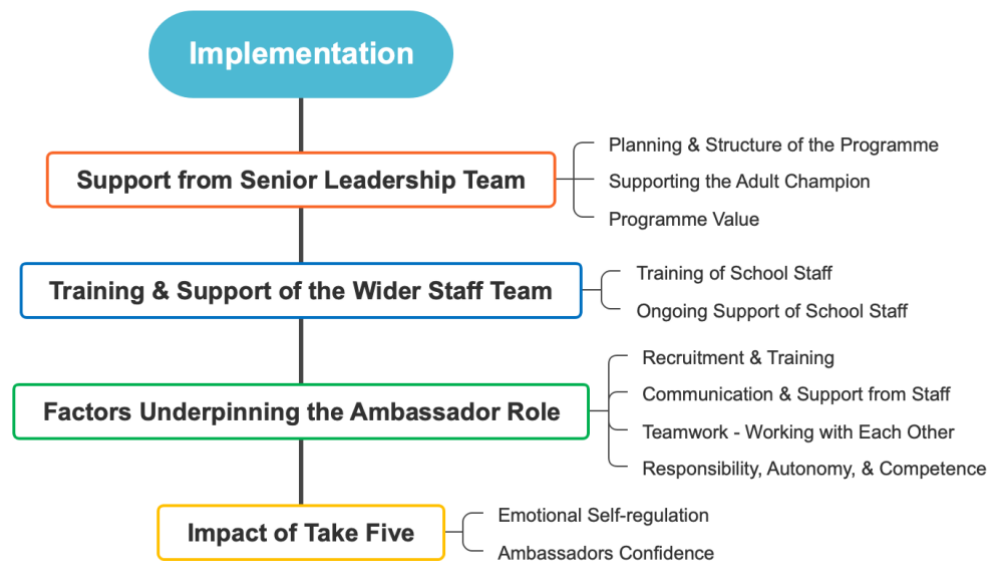
2.5.5 Conclusion

This research aimed to understand the implementation of a peer led emotional self-regulation programme, understanding what may support or impede the process of embedding this within a school. The research was in line with literature which aimed to address emotional self-regulation of CYP in schools. There is a high level of social, emotional, and mental health difficulties reported in CYP. Alongside this, are reports that CYP experience difficulties in accessing additional support for their mental health. There is recognition that schools may provide an environment where whole school approaches can enable CYP to access initiatives which support their emotional wellbeing, with interventions being accessible to a wide group of CYP.

Figure 2 provides a visual overview of the analysis and themes which emerged through this research and highlighted factors linked to implementation.

Figure 2

How Themes Interlink Together to Support the Implementation of Take Five



Listening to children's views on how they have experienced taking on a peer role within their school, helped to establish what they find helpful and supportive, along with the difficulties they have experienced (RQ1a). It is hoped that this information will help inform how school staff can support children to experience success when taking on roles of responsibility within school. Interviewing adults who have taken the lead on implementing a peer led programme across a whole school, enabled identification of how this process can not only be initially implemented but how it can be successfully embedded and maintained (RQ1b). The research supports the idea that schools can provide a space and forum, in which children can take on roles which help shape their development and help promote positive change within the school community.

Overall, a unique contribution of this research is the identification of what supports the implementation of a whole school peer led emotional self-regulation programme. The research helped identify how children taking on such roles can be valued members who contribute to the process of successful implementation, with understanding of how children can be supported within these roles. Finally, this research will support EP practice by further enhancing understanding of what supports or hinders the implementation of a whole school approach, and how schools can be supported to plan, and embed and maintain such programmes. EPs can work with schools to support the development of environments which can create supportive climates for change. EPs can draw on knowledge of what supports implementation, along with raising awareness of the potential barriers, and how these can be addressed to enable the successful embedding of a whole school approach. The research highlighted the importance for schools to have understanding and awareness of their individual needs, and how this may impact on implementation of a whole school approach. EPs are well placed to help guide schools in the initial planning of how to put into practice an approach, supporting them to consider their aims as a school. This finding is also valuable for consideration when EPs are involved in the development of new interventions and programmes, and how they can ensure these are realistic and practical for schools to take on.

3.0 Reflective Chapter

This chapter will provide a reflective account of my research process, from developing a research idea, the difficulties experienced throughout various stages, the limitations of the study and its findings, through to the hopes I have for how this study can support EP practice through its dissemination. When thinking about my role as a researcher and practitioner I found it helpful to consider how the Health Care Professions Council (HCPC) sets out a professional standard for EPs to draw on evidence-based practice within their work, supporting the design, implementation, conduct and dissemination of research activities, and to support evidence-based research (HCPC 14.56, 2016). Alongside this I reflected that as a trainee being able to conduct research while practicing and developing my skills within schools provided a valuable position to be in, as it enabled me to approach my research with the considerations needed for it to be both relevant and applicable to the current climate and needs within schools. I drew from Sedgwick and Stothard's (2021) paper which considers the unique contribution EPs can make to both research and its successful dissemination into practice.

3.1 Choosing a Research Topic and Refining Research Questions

Prior to embarking on the Educational Psychology doctorate my role was as a Family Support Worker within a Junior school. An aspect of this role was to facilitate interventions with children on developing their emotional self-regulation. Across the school there were children who needed support for this, and it was viewed as a common difficulty by teaching staff, impacting on children's social interactions and readiness to learn. Blair and Diamond (2008) recognised the ability to self-regulate links to school readiness, academic achievement, and long-term educational

outcomes. Through my experience I became interested in the development of emotional self-regulation and how it can be supported within schools. It is thought that promoting resilience and protecting psychological wellbeing may be achieved through improving emotional regulation and coping skills (Greenberg & Harris, 2012) and young people who have well developed emotional regulation skills have been found to exhibit improved behavioural and social functioning, physiological regulation, and physical health (Calkins et al., 2019). A common difficulty I experienced within my previous role was the transferability of emotional self-regulation skills which children practiced within 1:1 or small group sessions to the wider school environment. Focusing on individual self-regulation skills in an abstract context may be less effective for improving self-regulation than interventions which take into consideration the context in which children may need those self-regulation skills (Doebel, 2020). From my own observations, feedback from teaching staff and the children's own reflections there appeared to be a disconnect between the development in understanding emotional self-regulation within intervention sessions, and the children being able to utilise these learnt skills and apply them to the wider school environment. To try to combat this problem I adapted my practice and spent time within classes supporting children to draw on and hopefully embed emotional self-regulation strategies they had previously practiced in isolated sessions. This experience highlighted the need for children to have daily opportunities to practice emotional self-regulation techniques within real world contexts. It led me to reflect how interventions may not be as effective if children are not supported to transfer skills developed, as Lo et al. (2021) suggested, interventions seeking to improve self-regulation skills may need to integrate them into contexts where children can apply the skills. It, therefore, appeared fortuitous when a local community group

approached our school and asked if we would like to be involved in a project aimed at developing a whole school emotional self-regulation practice. The community group had received national lottery funding and they wished to use this to support the community in developing resilience. To provide some context the community is an ex-mining village, coping with social deprivation and a lack of community facilities for families. The community group had sourced an organisation which promotes the development of resilience through enhancing emotional self-regulation by practicing daily breathing techniques, this organisation was Each Amazing Breath, and the daily breathing practice was Take Five. A family of schools within the community signed up to the project, including the school I worked in. The experience of taking part in this initiative was a positive one and it stayed with me once I began the doctorate. When considering options for my thesis I decided on Take Five as a focus early on in these deliberations. However, despite the topic of my thesis being an easy decision for me to make the aim and research questions were somewhat more difficult for me to narrow down. Initially I had considered looking at the impact of Take Five on emotional self-regulation. However, following my first research supervision my supervisor prompted me to think about the logistics of researching impact, particularly in the context of how COVID-19 lockdown's may have affected the continued provision of Take Five within these schools. Through this discussion and reflecting on my experience I began to consider how Take Five as a peer led programme was implemented within schools. In preparation for my research proposal, I conducted an initial literature search. Focusing on mindfulness-based interventions and peer led initiatives in schools. The literature review developed my understanding of mindfulness-based interventions in schools, along with an awareness of the types of peer led programmes which have been implemented. The

review enabled me to develop clarity over the direction I wanted to take with my research, and which theoretical base from which to go from.

Reading further about emotional self-regulation and mindfulness breathing practices helped me to understand how Polyvagal theory (Porges, 2001) can be applied within this area. However, I was also aware of how my research was looking into the implementation of a breathing practice. Reading about Implementation Science and considering this within the context of the school environment, while considering my epistemological approach, led me to think about how this fitted into the Biopsychosocial model (Engel, 1977 as cited in Williamson, 2022).

Understanding there is a physiological aspect to emotional self-regulation using a breathing practice, while also recognising the implementation of such practices within a school will be impacted by various environmental factors interacting and influencing each other. What interested me from conducting the literature review was how there appeared to be a gap within the research looking into peer led emotional self-regulation programmes. When writing my research proposal, I considered the literature as well as the feedback I had received from presenting my ideas to my peers and university tutor team. Feedback from my presentation focused on the broad nature of my research questions. These initial questions were:

1. Exploring the experiences of Take Five Ambassadors supporting their peers.
2. How do Take Five Champions ensure Ambassadors are guided and supported so this peer led programme is successfully embedded in a school.

I was asked to consider how broad the first question was. Within a research supervision I discussed the focus of the question, so what was it about the Ambassador's experience that I wished to explore? This led to thinking about focusing on implementation of Take Five from both the Ambassador's and Champions perspective.

3.2 Epistemological Stance

When considering the ontological and epistemological stance to take when planning this piece of research I thought about the aim, the research questions and the methodology that would be used to gather data. One of the main aspects was to gather the views of the children and valuing their voice. Therefore, the use of qualitative methods felt appropriate, as this would enable me to gather a rich picture of the children's views. O'Connor and Joffe (2020) expressed the value of qualitative research is its ability to be sensitive to the diverse meanings people take from their experiences and environments, and method and analysis should be adapted to suit the specific features of the topic under investigation. A further reflection on the choice of methodology is my approach as a practicing trainee Educational Psychologist and the importance and value I place on hearing children's views. I therefore wanted to reflect my practice within the research, taking an epistemological approach that I aligned with. Taking a relativist ontology with an epistemological approach of social constructionism seemed fitting to the design of the research along with aligning with my approach as a practitioner. Social constructionism argues individuals' thoughts and views are developed through interactions in a social world and 'meaning' is established through interactions in different social contexts (Gubrium & Koro-Ljungber, 2005). This approach therefore fitted with the qualitative

design, where participants views would be gathered through the process of semi-structured interviews and focus groups. Reflecting on my approach to methodology, I recognise I did not consider the use of quantitative methods or mixed methods. My approach, while being conscious of aligning with my epistemology was not due in isolation to this and was not a result of thinking one research paradigm as being the ideal. The incompatibility theory would state that qualitative and quantitative research paradigms cannot be mixed (Howe, 1988) however my reasoning behind not conducting mixed methods was not due to this and I recognise there can be value and insight gained from carrying out mixed method designs. I had previous experience of using thematic analysis when carrying out my dissertation for my MSc and felt more comfortable and experienced in using qualitative methods. However, it was thought provoking to consider if and how I could have used mixed methods. Johnson and Onwuegbuzie (2004) explained differences in epistemological beliefs should not prevent a qualitative researcher from utilising data collection methods more typically associated with quantitative research. My research focused on the experiences of those directly involved and with a specific role in implementing Take Five. Gathering the views of the wider school staff teams on how they experienced Take Five's implementation could have been done through a questionnaire. Therefore, widening the scope of the data, considering the views of all staff involved in how a whole school approach is implemented within the school day. Furthermore, the views of children who were not Take Five Ambassadors, could have provided more depth to the data gathered. My research focused on how current Ambassadors experienced recruitment, training, and their ongoing role within their school. However, I wonder how children not in the role experience peer led breathing practices, again this could have been done using a questionnaire. These reflections

on my approach have led me to consider how I became fixed in the methodology I wanted to use early in the research journey. While this benefitted the process in some respect, as I was able to plan and complete ethical approval in a timely manner, it caused me to not be as open to different approaches, and what those approaches could potentially add to my research. This is a useful reflection and will be one to hold in mind for future research endeavours I may embark on.

3.3 Data Gathering

3.3.1 *Semi-Structured Interviews*

When considering data collection methods, I recognised semi-structured interviews would fit with social constructionism, with myself as the researcher engaging in a dialogue with the participant, in comparison to the use of open-ended questionnaires, and encouraging greater participant involvement in the answering of questions (Cohen et al., 2011). Interviews allow for some flexibility and provide a tool to capture participants voices and the way they make meaning from their experiences (Rabionet, 2011). Interviews would enable me to respond and interact with the participants responses and experiences they spoke about, using the questions to guide discussion (Robson, 2002). Semi-structured interviews were chosen, as un-structured interviews may not have elicited the topics that I wished to discuss in relation to the research question. Therefore, using the format of an opening question with additional questions structured around areas of interest would support the interview, meaning questions could probe for information if it did not initially come up (Rabionet, 2011). The process of developing questions was supported by my understanding of my research aim and questions, and the wider reading on the literature that I was engaging in.

3.3.2 Focus Groups

When considering options for gathering the children's voices, focus groups were considered appropriate. I was aware of how individual interviews may not be suitable for the age group, due to the imbalance of power between myself as the researcher and the children (Shaw et al., 2011). I considered the BPS 9.4 (HCPC 14.27) competency which asks researchers to demonstrate an understanding of ethical issues and choose and implement appropriate methods when designing their research. I hoped to create a forum in which the children felt more comfortable to share their views. Focus groups would enable the children to be grouped with those they knew and who they would hopefully already have established relationships with through the role of being Take Five Ambassadors within their school. The creation of a safe peer environment would hopefully support the children to share their views, along with helping a rich discussion to be held through children listening to each other, which in turn could lead to further comments and reflections (Barbour, 2007). When developing the focus group topic guide, I considered the importance of starting with a question that would set the children at ease and allow for them to talk about Take Five before narrowing the areas of discussion down to more specific aspects relating to the research question. This was due to the importance of giving time to building rapport and hoping to set the children at ease, so they felt more comfortable to share their views, when establishing rapport, it is advised to ask about the things the child already knows (Cameron, 2005). I also gave thought to how I introduced myself and why I was interested in hearing their views. Through research supervision my supervisor spoke about the idea of creating a child friendly information poster (Barker & Weller, 2003). When devising this poster, I was conscious of using simple language, pictures, including a photograph of myself and

breaking the information up into smaller sections (Malet et al., 2010). However, I did not run through a draft of the poster with other children, before disseminating it to schools. Reflecting on my approach as a researcher I am aware of my insular thinking on occasions during the research process. It would have been advisable to run through draft posters and ask children for their views (Alderson & Morrow, 2004). However, receiving feedback on this from the adult Champions it appears to have been a beneficial strategy to use. Adult participants commented that the children found the poster accessible, and it appeared to encourage interest in taking part in the research. When devising the focus group topic guide, I considered the language used. The initial set of questions I compiled as part of my research proposal received feedback from my research supervisor. The feedback commented on how I may need to think about making the language more accessible to ensure the children understood, not only considering the chronological ages of the children but that some participants may have additional areas of need for me to think about, such as language or processing needs. Therefore, I adapted the language, alongside this I added to the parental/carer consent form to include an option where they could add in additional relevant information which would inform me if I needed to make adaptations to support the inclusion of children who may need support in accessing the questions I was going to ask. Reflecting on this process I recognise I did not pilot the questions with children prior to conducting the research. While I did not encounter any obvious difficulties in the focus groups, and participants showed understanding through their responses it could have been valuable to have carried out a pilot of the questions. This may have generated discussion on facilitating focus groups with children, with considerations I did not think about on ensuring accessibility and inclusion of all those involved.

3.4 Professional & Ethical Issues

3.4.1 Recruitment & Bias

When completing my ethics approval and considering how I would recruit participants I drew on my prior involvement in Take Five and thought about the schools which I knew had been involved in running it. Purposive sampling was used to ensure participants had experiences on which to draw and express views on and fill the criteria corresponding to the objectives of the study. Within my research proposal and ethics application I aimed to recruit four schools. My contact with these schools appeared positive as I received responses from all Head Teachers stating they would be happy to take part and they forwarded details of the research to their Take Five Champions. This was during the summer term of 2022. However, following this initial contact two of the schools did not then act on and become involved in the research. I found this a tricky experience to navigate, considering the approach I would take as a researcher. Recognising the workload school staff experience meant while I wanted to recruit four schools to the study, I did not want to pressurise those that had not contacted me. I considered how a further email could be sent in the autumn term 2022, as an invitation for them to still be involved if they wished. However, these two schools did not respond, I therefore did not make any further contact. At this point within my research journey, I reflected on the design of my study. I thought about how a case study design could have been used, involving just one of the schools. While this could have worked as a design and would have been implemented had only one school been recruited, I valued being able to gain insight into the two different schools and their running of Take Five. As the analysis later showed there were some important differences highlighted in approaches which could help support school leaders' decision making when considering the

implementation of whole school approaches. As a practitioner previously involved in the implementation of Take Five, I am aware of the bias I brought to the research. One of the central reasons for why I wished to pursue this research was due to the positive experience of using Take Five within my previous role. Research supervision helped me to address this bias, discussing how I would approach the development of my interview and focus group questions. This discussion enabled me to recognise the importance of ensuring I asked open questions which explored both what supported implementation as well as the difficulties potentially experienced. When meeting with participants I considered it important to highlight that our time together would be about looking at all aspects of how Take Five was implemented within their school and therefore, I would like to hear about their experiences, both the positive and difficult aspects of running Take Five. I was aware that the participants who wished to take part may have had more favourable experiences of being involved in Take Five and Ambassadors who did not sign up to be involved in the research may have expressed different views. When reflecting further about this, and while considering alternative methods of data collection I recognise those not involved in the research may have provided an alternative insight into the recruitment of children into peer led roles. The children within the focus groups spoke positively of their experiences of being recruited to be an Ambassador, I wonder about the experiences of children not successful in becoming an Ambassador, and their perception of the recruitment process within their school and the potential wider impact of this on the implementation of Take Five.

3.4.2 Informed Consent

Due to this research involving children there were several ethical considerations. The first related to informed consent. Parental/carer consent was required due to the age of the children taking part; however, I recognised that gaining explicit consent from the children themselves was also important and put together a child friendly consent form (Gallagher et al., 2010). When meeting the children, I spent time reviewing the information provided on the consent form, as I wished to make sure they had a chance to ask any questions and could opt out prior to the focus group beginning. Gallagher et al. (2010) recognised there are challenges in the concept of children providing voluntary informed consent, and researchers need to engage in a process where one moment of informed consent at the beginning of a project when a form is signed is not sufficient, rather the process should enable children opportunities to listen, ask questions and discuss aspects of the research and their involvement with the researcher (Bourke & Loveridge, 2014).

3.5 Analysing the Data

When considering my approach to data analysis I considered both my epistemological stance along with prior experience of conducting qualitative research. Having carried out thematic analysis for my MSc and used Braun and Clarke's (2016) method I felt confident in using this approach again. However, when reading current research papers on thematic analysis I recognised my understanding of the process required updating. Alongside this my current research differed in my data collection and the range of participants. Previous thematic analysis was for semi-structured interviews with adults. Prior to carrying out the initial stages of analysis, I considered how I would code the data across the semi-structured

interviews and focus groups. Although I had two sub research questions, one aimed at the adults and one at the children, my overarching research question was to explore the implementation of Take Five, therefore, coding and analysis of the data as one felt appropriate. Following the process of identifying themes I think it was helpful and productive to analyse the data together rather than splitting the interviews and focus groups. As illustrated within my analysis and discussion there were thoughts and ideas expressed from both adults and children which fed into the themes developed, complimenting, and adding to each other's experiences. I used reflexive thematic analysis (Braun & Clarke, 2022), and chose this due to taking an interpretive approach to the data which was based in theory. However, I was aware my interpretation could be influenced by my views from being involved in using Take Five within my previous role and how this could influence my analysis, through the subjective nature of coding. This awareness prompted me to use Braun and Clarke's 15-point checklist for good reflexive thematic analysis (2022) ensuring my coding process was thorough, and that I did not move on too quickly to develop themes. I found it helpful to code each transcript, and then go back to the first and re-check the original codes, adding to them and beginning to draw links between transcripts. Following this it was valuable to gain views from my supervisor on the first draft of the analysis chapter, which helped not only reassure me that the themes developed were coherent and made sense from the data but also supported me to go back and ensure the discussion of the themes linked theory up to the analysis. When reflecting on my findings I thought about the issue of generalisability in qualitative research. My research aim was to explore factors which impact on implementation and therefore, I hoped to produce a piece of research which would be useful for both EPs and schools. I had a limited number of schools involved, and along with using reflexive

thematic analysis I am aware this could affect the generalisability of the findings. However, it is important to recognise the approach I took as a researcher was to complete an analysis of the data with an understanding of the circumstances in which it was gathered. Therefore, recognising the transferability of the results is based on both the theoretical underpinnings as well as the effects of the context in which data was gathered (Yin, 1994, as cited in Carminati, 2018). This approach recognises that context-dependent knowledge can offer understanding which can be applied to different settings (Delmar, 2010, as cited in Carminati, 2018). When thinking about this in relation to my findings, there was a common thread which highlighted the importance of the individual nature of different schools, and how this is valuable to understand and consider when adapting programmes for implementation.

3.6 Contributions to EP Practice

When thinking about how this research could contribute to EP practice, I considered how EPs currently support schools with implementation, and thought about my own practice when working with schools around organisational change. Rutledge (2022) reflected schools can often prioritise individual casework rather than whole school systems work and may not be aware of how EPs can contribute to organisational change within a school system. Chidley and Stringer (2020) recognised how EPs can apply psychological problem-solving frameworks to organisational change. The current research provides additional support to how implementation factors can be considered when adopting a whole school approach, with the additional aspect of supporting the implementation of a peer led programme. EPs are well placed to apply a psychological lens to whole schools (Eloquin, 2016),

and this piece of research has begun to illustrate how children can take an active role within whole school approaches and how they can be supported to be successful in this. When developing working relationships with school's EPs are in a position where they can gain an understanding and overview of how a school system is working, from this position EPs can draw on theory and research and support schools in the application of this to whole school initiatives. This piece of research has enabled understanding and knowledge to be gained of how a peer led emotional self-regulation programme can be applied within the real-world context of a school. Schools are not clinical systems, rather they have several factors which impact on how they function. It is the awareness and understanding of how to apply psychological theory and research to school settings which EPs can take an active role in.

3.7 Limitations

The limitations of this research have been discussed throughout this chapter. However, I have found it helpful to write a summary of the key ones. Firstly, limited number and type of schools involved does mean the findings although valuable for understanding the barriers and facilitators to implementation of a peer led emotional self-regulation programme, do need to be taken with caution if applying them to secondary schools. Secondly, the nature of data collection and analysis, along with the limited number of participants means the findings do lack some generalisability. This will be discussed in more detail within future research directions, but it is important to highlight that data collection could have taken a more comprehensive approach within the schools, including a wider pool of participants. Thirdly, there is the issue of researcher bias and how previous involvement with Take Five may have

impacted on the data analysis. I am aware as a researcher my previous positive experience of Take Five could have affected how I approached analysis. Therefore, reflecting on this led to me recognising that having a second person to analyse the data would have been beneficial in helping to reduce the potential impact of this bias.

3.8 Future Research Directions

As considered within the discussion in the empirical chapter, it would be useful to gather a wider understanding of how peer led emotional self-regulation programmes such as Take Five are experienced by the school community, gathering the views of children who are not in a peer role and rather are experiencing being led by their peers. Within my research both adult and child participants spoke about the benefits to the Ambassadors, how their confidence grew from taking on the role, they also shared views of how they thought peer led breathing practices benefitted other children. However, it would be interesting to hear the views of children experiencing this and if they think peer led practices benefit them, and how this compares to adults leading breathing practices. Regarding implementation factors and gaining further insight into how whole school approaches can be embedded within a school, it would be valuable to hear the views of the wider staff team. When reflecting about my initial thoughts about Take Five prior to becoming involved within my previous role, I remember being sceptical about both the use of breathing practices and how they would be received by children and other school staff. My thinking changed and my enthusiasm for Take Five quickly took over my doubts, however, when considering this shift in my thinking I reflected that there will be other school staff who may well be resistant to different approaches, and what supports or hinders a shift in thinking would be interesting to look into, this would then provide an increase

in understanding on how school staff teams can be supported when whole school approaches are being implemented. Romney et al. (2022) discussed individual differences in school staff's views on the use of Emotion Coaching in relation to its implementation as a whole school approach. The researchers found perceptions of Emotion Coaching influenced its use, along with noting explanations of the ineffectual use of it as an approach were attributed to the child or the approach itself rather than how staff had used it, and their skill or experience in its use. Within the interviews participants reflected on how they had not included parents within the process of implementing Take Five. It was interesting to hear participants ponder on this and make statements about how talking about Take Five being embedded had given them some time and space to consider how they could involve parents, and what the potential benefits of this may be, and how it may support the embedding of Take Five. As Goldberg et al. (2019) recognised including families within whole school approaches may help reinforce the complimentary roles of families and educators, extending opportunities for learning and development across contexts.

3.9 Dissemination of Findings

When considering how this research could be shared and applied, it seemed fitting to reflect on what Kilerby and Dunsmuir (2018) stated that examining how an intervention or programme is implemented is as important as measuring outcomes and Blasé et al. (2012) recognised information about 'what works' is important, but it does not inform how to best implement programmes successfully to improve outcomes. As Chidley and Stringer (2020) stated, training provided to school staff should not be done in isolation, as this does little to promote organisational change. Rather successful implementation is achieved through establishing frameworks for

practice which consider how change occurs over time and with ongoing support.

When considering these points, I recognise that for my research to be useful for EPs and schools its dissemination is an important point for me to consider. At the beginning of the research process, I considered how I could share a summary of my findings with research participants if they so wished and included this option within the consent forms. It was heartening to see that parents/carers of the children who participated stated they were interested in receiving an executive summary of findings following submission of my thesis. This summary can also be shared with both my placement local authority and the authority I will be moving on to work for following qualification. It will include the key findings and implications for practice (Sedgwick & Stothard, 2021). Alongside this, I am keen to share the research with Each Amazing Breath, the organisation which developed Take Five, and consider how they may find the research helpful for their continued delivery of training to schools who undergo implementing Take Five. I took this approach to dissemination following consideration of some of the difficulties that schools and EPs may have in accessing published research (Sedgwick & Stothard 2021) and therefore experience difficulties in being able to apply it within their settings and practice. To share the results with the child participants, a child friendly poster will be sent out to the parents/carers who requested a summary of the research. This poster will include the results, written in simple terms with visuals to aid the illustration of the findings (Appendix 13).

Effective dissemination enables the effective transfer of research findings and knowledge to be put into practice (Sedgwick & Stothard, 2021). When thinking about options for pursuing publication of the research, and the reasoning behind this, I found it helpful to think about the purpose of my research along with the gap in what

is currently published. There is a growing body of research on implementation and guidelines such as those from the Education Endowment Foundation (Sharples et al., 2019) which provide a sound basis from which EPs and schools can think about how they successfully embed initiatives. My study adds to this body of research along with moving it forward to consider how whole school peer led emotional self-regulation programmes can be implemented. A journal which I am considering for submission is 'Educational Psychology in Practice' due to its previous and recent interest in publishing research on implementation such as Romney et al. (2022) and its accessibility for EPs and Trainee Educational Psychologists. In addition, I gave thought to how the teaching community could easily access and engage with the research findings. Budden and Michener (2018) discuss how disseminating research to wider groups can take the form of newspaper and magazine articles, which can highlight best practice in an accessible format. Therefore, the TES educational magazine has been considered as an accessible forum in which to possibly disseminate the findings, using an article summarising the research and how it can be applied within schools.

3.10 Conclusion

These reflections on the process I have undergone as a researcher, hopefully provide a clear narrative of my decision making, from initially developing the research idea and aim, to considering the implications of the study and how it can be utilised by others through successful dissemination. The process of reflection has allowed me the time and space to consider my journey as a researcher and think about how carrying out this piece of research has impacted on me. I have gained confidence and skills in how to go from approaching an initial research idea to developing an aim and research questions. These skills developed through a

process of doing my own reading and conducting a literature review as well as drawing on the helpful discussions I had with my research supervisor and fellow trainee's. Alongside developing my confidence, the research has also added to my own individual skills as a researcher. Moving forward to becoming a qualified EP I will undoubtedly take with me the greater understanding I now have of how I can support schools with the implementation of peer led whole school approaches. I feel this research process has led me to become both a more reflexive researcher and practitioner.

4.0 References

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Appendix 1: Glossary of Terms

CYP: Children and Young People

SEAL: Social, Emotional, Aspects of Learning

SEL: Social, Emotional Learning

PATHS: Promoting Alternative Thinking Strategies

MBI's: Mindfulness Based Interventions

SBMT: School Based Mindfulness Training

MiSP: Mindfulness in Schools Project

MYRIAD: My Resilience in Adolescence

MtM: More than Mentors

Champion: Adult Leading Take Five

Ambassador: Child Take Five Peer Lead

SLT: Senior Leadership Team

Appendix 2: Take Five Breathing Practice

Before you begin

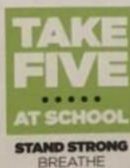
Three of the key aspects for effectively experiencing these practices are:

- 1) Creating a sense of safety for yourself
- 2) Consciously choosing to begin the practice
- 3) When finished, consciously closing the practice and finding gratefulness for having a chance to practice at all.

These practices are designed to be very portable and flexible, and can be done nearly anywhere. To create a sense of safety, take into account where you are, who is nearby, how much time you have and how likely you are to get interrupted. Be kind to yourself, and come to all this with curiosity.

Set yourself up with enough time to be able to complete the full practice, even if it's only half a minute long.

When finished, enjoy one extra spacious breath, and go on with your day - and keep breathing :-)



Basic Seated Practice

Arrive

- Today we are going to do a Basic Seated Practice
- If you want to join in, sit up tall with your hands resting on your knees
- When you breathe in you are going to lengthen up through your spine
- When you breathe out you will relax your body

Open

- Imagine a string on the top of your head pulling you up straight and tall
- Roll your shoulders and relax
- Close your eyes if you want to or stare at something at eye level
- Ground yourself by pushing your feet down into the floor, and your body into the chair
- Breathe gently for a few moments in your own time

Practice

- Breathe in and lengthen up through your spine
- Breathe out and relax your body
- Repeat 4 times

Close

- Take two final breaths
- Let your breathing go back to normal
- Take a moment to notice how you feel

Take Leave

- Tip your chin towards your chest
- Slowly open your eyes if they are closed
- When you are ready, lift up your head and look back into the room
- Notice your surroundings

Appendix 3: Focus Group Topic Guide

Introduction

- Explain the purpose of the focus group
- Assure confidentiality
- Explain audio recording technology and transcription protocol
- Ask for consent to record focus group

Warm up

- Imagine you were talking to a friend at another school who had never heard of Take Five. What would you tell them about Take Five?

Main body

1. Can you tell me about becoming a Take Five Ambassador?
 - Can you tell me what is good about being an Ambassador?
 - Can you tell me anything that is difficult about being an Ambassador?
2. How does your Take Five Champion work with you?
 - Can you tell me about any help they have given you in your role as Ambassadors?
 - Can you tell me about any difficulties you have experienced when training to become an Ambassador?
3. Can you tell me about how your role may help other children?
4. If another school was thinking about training Ambassadors, what would you tell them?
5. Is there anything else you would like to say about being a Take Five Ambassador?

Closure & debrief

- Thank you and goodbye

Appendix 4: Semi-structured Interview Schedule

Introduction

- Explain the purpose of the interview
- Assure confidentiality
- Explain audio recording technology and transcription protocol
- Ask for consent to record the interview

Warm up

- Can you tell me about your role as Take Five Champion within your school?

Main body

1. Can you tell me about how the Take Five Ambassador role works within your school?
2. Can you tell me about what has worked well when recruiting and training Ambassadors?
 - Can you give me some examples of how things have worked well?
3. Can you tell me about any challenges with recruiting and training Ambassadors?
 - Can you give me some examples of these challenges?
 - What has helped overcome these challenges?
4. In what ways do you think the Ambassador programme helps other children in your school?
 - Can you give me some examples of how the Ambassador programme has helped other children in your school?
5. In what ways do you think the Ambassador programme benefits the children who take on this role?
 - Can you give me some examples of how it has benefited these children?
6. Can you tell me about what is in place to support and guide Ambassadors?
 - Can you tell me about any challenges to sustain this support and guidance?
7. Is there anything else you would like to feedback on your experience of implementing the Ambassador role within your school?

Closure & debrief

- Thank you and goodbye

Appendix Five: Ethics Approval

Ethics ETH2122-1226 : Miss Kathie Rees

| | |
|-----------------------------|----------------------------|
| Date Created | 04 Feb 2022 |
| Date Submitted | 14 Mar 2022 |
| Date of last resubmission | 07 May 2022 |
| Date forwarded to committee | 09 May 2022 |
| Researcher | Miss Kathie Rees |
| Category | PGR |
| Supervisor | Dr Nikki Collingwood |
| Faculty | Faculty of Social Sciences |
| Current status | Approved |

Ethics application

Applicant and research team

Principal Applicant

Name of Principal Applicant
Miss Kathie Rees

UEA account
pvd20gvu@uea.ac.uk

School/Department
School of Education and Lifelong Learning

Category
PGR

Primary Supervisor

Name of Primary Supervisor

[Dr Nikki Collingwood](#)

Primary Supervisor's school/department
School of Education and Lifelong Learning

Project details

Project title

A qualitative exploration of implementation and engagement factors in a peer led self-regulation programme.

Project start date

01 Jun 2022

Project end date: 31 Aug 2023

Describe the scope and aims of the project in language understandable by a non-technical audience. Include any other relevant background which will allow the reviewers to contextualise the research.

In 2019 a community group in an area of social deprivation secured funding from the National Lottery to enable projects to take place that would benefit the local community. They used some of this funding to help in the implementation of a self-regulation programme within a family of schools, to help children across the community equip themselves with a skill that would benefit them as they move through their education.

Take Five is a whole school approach based on breathing practices to enhance grounding and self-awareness. Take Five has been chosen as the focus of this research due to both children and school staff learning and practicing the exercises. When schools implement Take Five one or two adults are trained in the practices and become the Take Five Champion, their role is to lead the programme and recruit children into an Ambassador role. The Ambassadors then lead the practices with their peers. There is a gap in the research looking at peer led self-regulation practices, with research having focused on adult led self-regulation and Mindfulness Based Interventions. The aim of the research is to explore the implementation and experience of Take Five as a peer led self-regulation programme. Researching the experiences of children in the Ambassador role along with looking at how the Take Five Champion implements, guides, and supports the Ambassadors to embed this peer led practice across a school.

Four primary schools within this community will be invited to take part, on the basis that they are currently practicing Take Five and have Ambassadors trained. The Take Five Champions within each participating school will be interviewed on a 1:1 basis. The child Ambassadors will be invited to take part in focus groups. The aim is to conduct the interviews and focus groups during the summer term of 2022.

Provide a brief explanation of the research design (e.g. interview, experimental, observational, survey), questions, methodology, and data gathered/analysis. If relevant, include what the participants will be expected to do/experience.

Focus groups will be used to gather data from the child Ambassadors, the duration of these groups will be between 30-45 minutes and will be moderated by the researcher. These will be conducted online via Microsoft Teams using a video call and recorded or face to face if the school's COVID-19 protocol and risk assessment allows. If face to face they will be recorded using a Dictaphone. They will then be transcribed verbatim and analysed using thematic analysis. Each focus group will be conducted in each participating school with children not mixing from different schools. This will comply with COVID-19 guidance. The participant number for the focus groups will be between 4-6, although this will be dependent on the number of Ambassadors available and willing to take part. In total there will be four focus groups taking part so a total of 24 pupils. A focus group topic guide will be used to encourage discussion and interaction along with using open-ended exploratory questions to encourage discussion. Ambassadors with any special educational needs may need adaptations to how they access the questions for example, they could be given them in advance. Each focus group will require a member of school staff to facilitate them.

Semi-structured interviews will be used with open-ended exploratory questions for the adult Champions, participants being interviewed on a one-one basis. The interviews will last between 45 and 60 minutes. There will be four adult interviews. They will be conducted via the online platform of Microsoft Teams using a video call or face to face if the school's COVID-19 protocol and risk assessment allows. The interviews will be transcribed verbatim and analysed using thematic analysis.

Detail how any adverse events arising in the course of the project will be reported in a timely manner.

In the event of adverse events arising from the research project, this will be reported immediately in Ethics Monitor in the first instance. This action will notify the Chair and Support Staff that approved the original ethics application, the primary supervisor and UEA's Research Integrity manager. An additional email will be sent from the researcher to the research supervisor requesting a research supervision meeting to discuss the event at the earliest convenience. The Head of the School of Education will also need to be made aware, depending on the severity of the situation.

Will you also be applying for Health Research Authority approval (HRA)?

No

Indicate if you are applying for approval for an experiment to be conducted in the School of Economics' Laboratory for Economic and Decision Research (LEDR).

No

Is the project: none of the options listed.

Does the project have external funding administered through the University's Research and Innovation Services (RIN)? No

Will the research take place outside of the UK? No

Will any part of the project be carried out under the auspices of an external organisation, or involve collaboration between institutions? No

Do you require or have you already gained approval from an ethics review body external to UEA?

No

Does this new project relate to a project which already has ethics approval from UEA? No

Research categories

Will the project include primary data collection involving human participants? Yes

Will the project use secondary data involving human participants? No

Will the project involve the use of live animals? No

Will the project have the potential to affect the environment? No

Will the project have the potential to affect culturally valuable, significant, or sensitive objects or practices? No

Will the project involve security sensitive research? No

Human participants - selection and recruitment

How many Participant Groups are there who will receive tailored participant information? Two

Name of Participant Group 1. Group 1: Adult Champions

Name of Participant Group 2, if applicable. Group 2: Pupil Ambassadors

How will the participants be selected/recruited? Participants will be recruited from four primary schools who have taken part in Take Five training and have Champions and Ambassadors currently within their schools. Purposive sampling will be used to ensure participants have experiences on which to draw and express views on and fill the criteria corresponding to the objectives of the study. Initial contact has been made via email with the headteachers to gauge interest for involvement. These headteachers have responded stating they are interested in participating and have provided the contact email addresses of the adult champions within the school.

Four adult Champions will be recruited, one from each participating school along with 4-6 child Ambassadors from each school, so in total between 16-24 child participants. This is achievable as there are typically 8 child Ambassadors per school within the age group being recruited.

Adult Champions will make contact with the child Ambassadors parents, providing the information sheet and consent form.

In terms of UEA participants only, will you be advertising the opportunity to take part in this project to?
None of the above (i.e. UEA's Student Insight Review Group (SIRG) does not need to be informed)

What are the characteristics of the participants?

Ambassadors: Consideration has been given to the age of the Ambassadors to be included. Participants will be aged 9-11, as during middle childhood conversations show more 'give and take' as they start to respond to each other, along with the development of language and increased attention (Feldman, 2011). Demographic data will be gathered along with identification of additional needs. Ambassadors must be currently carrying out the role within their school.

Champions: In each participating school there is a member of staff who is the Take Five Champion. They must be currently carrying out the role within their school.

Will the project require the cooperation of a gatekeeper for initial access to the individuals/groups to be recruited? Yes

Who will be your gatekeeper for accessing participants?

Headteachers within each school will be the gatekeepers for accessing the adult Champion participants. This initial contact has been made to gauge interest and the headteachers have stated they would like the school to take part. The Headteachers will pass on the information sheet and invite to the relevant members of staff who can then contact the researcher directly if they want to take part. This reduces the potential feeling of obligation for them to take part and maintains GDPR guidelines by them contacting the researcher. Following contact with the Champions they will be the gatekeepers for the child Ambassador participants.

How and when will a gatekeeper permission be obtained?

Headteachers have been contacted via email to gauge initial interest. Therefore, upon ethics approval the headteachers of each school will be given the information sheets and consent forms. They will then provide the adult Champions of each school with these information sheets and consent forms for the Champions and parents of the child Ambassadors. This will include details about the research and possible ethical issues. The adult Champions can then opt into the research by contacting the researcher with the email address provided in the information form.

Provide any relevant documentation (letters of invite, emails etc).

How will you record a gatekeeper's permission?

Upon ethical approval the headteachers of each school will be contacted via email. The headteachers will pass on the information and consent forms to the school's adult Champions. The Champions will then contact the parents of the child Ambassadors asking if they are willing to provide consent for their child to take part. The Ambassadors will also be asked to assent to take part and be provided with a child friendly information sheet following parental consent.

Is there any sense in which participants might be 'obliged' to participate? Yes

If yes, provide details. The Champions and Ambassadors may feel obligated to participate. Within the information sheet sent to the Champions it will be stated that there is no obligation to take part and details of how to withdraw will be included in the consent form. The Champions can opt into the research. The Ambassadors may feel obligated as they will be approached by their Champion. Therefore, it will be communicated to the Champion that when recruiting Ambassadors they need to inform them that there is no pressure to take part and again details of withdrawing is included in the parental consent form and child friendly information sheet.

What will you do to ensure participation is voluntary? When liaising with the Champions the aspect of potential participants feeling obliged to take part will be discussed to ensure both Champions and Ambassadors understand their right to not participate. Parental consent will be required for those Ambassadors wanting to take part.

Will the project involve vulnerable groups? Yes

If yes, explain the necessity of involving these individuals as research participants and what will be done to facilitate their participation, or the participation of people with physical disabilities.

Children are being recruited to take part because the focus of the study is to explore the experiences of the child Ambassadors being involved in a peer led programme, they are therefore integral to the research.

To facilitate their participation focus groups are being used to gather their views to reduce the intensity of being interviewed on a 1:1 basis with the adult researcher. Adjustments will be made to ensure children with any disabilities or additional needs can take part, such as providing them with the questions before the focus group takes place. A member of school staff will be present for the focus groups to ensure the health and safety of the children along with providing pastoral support if required. If a child decides they would like to stop being part of the focus group during the session the member of staff can arrange for them to return to their class and provide support if required.

Will payment or any other incentive be made to any participant? No

Include any other ethical considerations regarding participation.

Focus groups and remaining anonymous: It will be explained to the Ambassadors that due to them taking part in a focus group the discussion will be within that forum and their responses will be heard within the group and are therefore not given anonymously. However, it will also be explained that their responses will be anonymous when transcribed and reported in the research. A recording of both the interview's and focus groups will be taken using the record function on Microsoft Teams or Dictaphone if face to face, to enable transcription to be carried out. Following the transcription, the recording will be deleted.

Safeguarding: When working with children careful consideration needs to be given to how to proceed if a child disclosed a safeguarding matter. Prior to conducting the groups, the researcher will become familiar with the safeguarding policy of each school and know who the designated safeguarding lead is. A member of school staff will be present with the children to help facilitate the focus group and ensure the safety of the children along with the researcher having another adult present. In the event of a safeguarding issue the schools safeguarding procedure will be followed.

Human participants - consent options

By which method(s) will consent to participate in the research be obtained? Participant Information Sheet and Consent Form

Human participants - information and consent

Participant Information and Consent

Will opt out consent for participation in the research be used? No

You can generate a Participant Information Text and Consent Form for this application by completing information in the Participant Information Text and Consent Form Generator tab. Alternatively you can upload your Participant Information Text and Participant Consent Form which you have already prepared. Confirm below: Upload prepared Participant Information Text and Consent Form.

Upload the Participant Information Text and Consent Form. Enter participant group number and name.

1 Adult Champion

Enter participant group number and name. 2 Pupil Ambassador

When will participants receive the participant information and consent request? Following ethical approval the school's Take Five Champion will receive the participant information sheet, consent form and parental information and consent form from their headteacher who the researcher will contact via email. The Champion will be asked to send out the parental information and consent form to parents. Parental consent will be required prior to sending out the child friendly participant information sheet.

How will you record a participant's decision to take part in the research? Consent forms will be completed by the adult participants, parents of the child participants and the children will also complete their own consent form once parental consent has been provided.

Parental/Guardian Information and Consent

Are you asking for parental/guardian (or other responsible person) consent? Yes

You can generate a Parental/Guardian Information Text and Consent Form for this application by completing information in the Parental/Guardian Information Text and Consent Form Generator tab. Alternatively you can upload your Parental/Guardian (or Other Responsible Person) Information Text and Consent Form which you have already prepared. Confirm below: Upload prepared Parental/Guardian or Other Responsible Person Information Text and Consent Form.

Upload the Parental/Guardian (or other Responsible Person) Information Text and Consent Form.

Enter participant group number and name.

2 Pupil Ambassadors

When will parents/guardians (or other responsible person) receive the parental/guardian (or other responsible person) information and consent request?

Following ethical approval the parents/carers of the prospective child participants will receive the information and consent form from the schools Take Five Champion.

How will you record a parent's/guardian's (or other responsible person's) decision regarding consent for their child (or other vulnerable person) to participate in the research? Parents/carers will provide consent by signing the consent form.

Human participants - method

Which data collection methods will be used in the research? Interview's & focus groups

If your research involves any of the methods (including Other) listed above, upload supporting materials. How have your characteristics, or those of the participants influenced the design of the study or how the research is experienced by participants?

The age of the child participants has been considered when devising the focus group questions to ensure the language used is accessible.

If there are children taking part who have a learning need then adaptations will be made prior to the focus group, for example some children may need the questions given to them before, so they have time to process them and consider their responses.

Will the project involve transcripts? Yes

Select ONE option below: By hand.

If yes provide details. The researcher will be transcribing the interviews and focus groups by hand; therefore no third party will have access to the recordings. The recordings will be deleted once transcription has taken place.

Provide an explanation if you are not offering the participant the opportunity to review their transcripts.

The children and parents will not have the opportunity to review their transcripts due to it being a focus group with other participants views being shared within the same transcripts.

Will you be capturing photographs or video footage (digital assets) of individuals taken for University business?
No

Is this research using visual/vocal methods where respondents may be identified? No

Will it be necessary for participants to take part in the study without their knowledge and consent at the time?
No

Will deception or incomplete disclosure be used? No

Will the participants be debriefed? Yes

If yes, how will they be debriefed and what information will be provided? Participants will be debriefed verbally following the end of the interview and focus group. They will be thanked for their participation and reminded how they can contact the researcher if needed, along with being told how their participation has contributed to the aim of the research.

If yes, upload a copy of the debrief information.

Will substances be administered to the participants? No

Will involvement in the project result in, or the risk of, discomfort, physical harm, psychological harm, or intrusive procedures? No

Will the project involve prolonged or repetitive testing? No

Will the project involve potentially sensitive topics? No

Will the project involve elite interviews? No

Will the project involve any incitement to, encouragement of, or participation, in an illegal act (by participant or researcher)? No

Will the research involve an investigation of people engaged in or supporting activities that compromise computer security or other activities that may normally be considered harmful or unlawful?
No

Does the research involve members of the public in participatory research where they are actively involved in undertaking research tasks?
No

Does the research offer advice or guidance to people? No

Is the research intended to benefit the participants, third parties or the local community? Yes

Provide an explanation. The aim of the research is to review how Take Five can be implemented and successfully embedded within a school. This will provide the schools involved with useful feedback which may inform how they continue to implement Take Five for it to be a success.

What procedures are in place for monitoring the research with respect to ethical compliance? The researcher is responsible for carrying out the study in the manner in which it is outlined in this proposal. The researcher is responsible for reporting any ethical breaches.

Does the study involve the use of a clinical or non-clinical scale, questionnaire or inventory which has specific copyright permissions, reproduction or distribution restrictions or training requirements?

No

Include any other ethical considerations regarding data collection methods. Due to the research being carried out via Microsoft teams and the interviews and focus groups being recorded, care will be taken to ensure no other person apart from the researcher's supervisor will have access to those recordings. They will be deleted once transcription has taken place; transcriptions will be anonymised.

Health and safety - participants

Is there a possibility that the health and safety of any of the participants in this project including a support person (e.g. a care giver, school teaching assistant) may be in question? Yes

If yes, describe the nature of any health and safety concerns to the participants and the steps you will take to minimise these.

If any of the interviews or focus groups take place face to face social distancing will be in place and a well-ventilated room will be used. All surfaces will be wiped with antibacterial wipes before and after being used, following the schools COVID-19 protocol and risk assessment.

If any child reveals something about the Take Five approach which is not working or is detrimental then this information will be communicated with the adult Take Five Champion and the headteacher after the focus group. They can contact the child's parents/carers if needed. If the child requires support this will be offered by the member of school staff present in the focus group.

What procedures have been established for the care and protection of participants? The researcher will be familiar with each school's safeguarding policy and will follow this if a safeguarding issue arises. This will include the care and protection of each child participant. A member of school staff will be present in the focus groups and can provide support to a child if required and follow their school's guidelines. Due to the nature of the research it is not thought the adult participant will require any support, as interview questions are not of a sensitive nature and will not require them to disclose anything personal or sensitive.

Describe your safeguarding protocol. What procedures are in place for the appropriate referral of a participant who discloses an emotional, psychological, health, education or other issue during the course of the research or is identified by the researcher to have such a need?

The focus group and interview questions are not of a sensitive nature, however if a disclosure was made then the researcher will follow the schools safeguarding procedure which they will become familiar with prior to carrying out the research. The researcher will ensure they know who the Designated Safeguarding Leads (DSL) are in each school and how to contact them if needed. The researcher would not leave the school building until this contact has been made and the information has been recorded. The researcher would make their own written recording of the disclosure and give this to the school's DSL. The school's DSL will then be responsible for providing support to the participant. The researcher will then contact their research supervisor and inform them a safeguarding situation occurred.

What is the possible harm to the wider community from their participation or from the project as a whole? All transcripts of the focus groups and interviews will be transcribed anonymously to ensure participants are not identified from their comments. Information given in the focus groups and interviews would only be passed on to the schools headteacher if it was a safeguarding matter and there were concerns about the health and safety of participants or others in the school.

What precautions will you take to minimise any possible harm to the wider community? Due to the nature of the study and the questions not being of a sensitive nature there are no obvious risks to taking part. Within the focus groups the participants will be made fully aware that due to it being a group their answers to questions while being transcribed anonymously, will be heard by other members of the group and they should consider their answers based on this.

Health and safety - researcher(s) Is there a possibility that the health and safety of any of the researcher(s) and that of any other people (as distinct from any participants) impacted by this project including research assistants/translators may be in question? Yes

If yes, how have you addressed the health and safety concerns? Describe any safeguards included and relevant protocols.

The researcher has an enhanced DBS check and will share this with each school prior to carrying out the research. Within the focus groups there will be another adult present who will be a member of school staff. Within each school the researcher will know who the DSL's are and how to contact them if needed, along with familiarising themselves with the school's safeguarding policy prior to the research taking place. If a safeguarding issue arises then the researcher will follow the policy, contact the school's DSL prior to leaving the school, record the incident in writing and give this to the

DSL. The researcher will then contact their research supervisor via email to inform them a safeguarding issue arose and request a research tutorial to discuss this.

Risk assessment Are there hazards associated with undertaking this project where a formal risk assessment will be required? No

Data management

Will the project involve any personal data (including pseudonymised data) not in the public domain?
No

Will any personal data be processed by another organisation(s)? No

Will the project involve access to records of sensitive/confidential information? No

Will the project involve access to confidential business data? No

Will the project involve secure data that requires permission from the appropriate authorities before use? No

Will you be using publicly available data from the internet for your study? No

Will the research data in this study be deposited in a repository to allow it to be made available for scholarly and educational purposes? No

Provide details. The research is being conducted as part of the requirements for the Doctorate in Educational Psychology and therefore data collected does not need to be deposited in a repository for further use following completion of the study.

Who will have access to the data during and after the project? The researcher and their supervisor.

Where/how do you intend to store the data during and after the project? The recordings of the interviews and focus groups will be made using Microsoft teams and stored by the researcher up until the point that they have been transcribed, they will then be deleted. The transcriptions will be anonymised and shared within the appendices of the research. Consent forms will be kept electronically and stored by the researcher and not shared, they will be deleted on completion of the research once it has been accepted as part of the Doctorate in Educational Psychology. If paper copies of the consent forms are received from any parents, they will be scanned and saved electronically, and the paper copies shredded and disposed of.

How will you ensure the secure storage of the data during and after the project? All information will be stored electronically using an encrypted password. This includes consent forms and Microsoft teams recordings of the interviews and focus groups. The recordings will only be accessible by the researcher unless the researcher's supervisor requests to view them, in which case they will have access to the password.

How long will research data be stored after the study has ended? Data will be kept for 10 years.

How long will research data be accessible after the study has ended? The research data will be accessible for 10 years following completion of the study.

How are you intending to destroy the project data when it is no longer required? Electronic consent forms will be deleted and ensured they are no longer retrievable. Any paper consent forms received will be shredded. Microsoft teams recordings of the interviews and focus groups will be deleted and deleted from the recycle bin immediately. Once Microsoft teams recordings are deleted, they are no longer retrievable.

Appendix 6: Champion Information & Consent Form

A qualitative exploration of implementation and engagement factors in a peer led self-regulation programme.

PARTICIPANT INFORMATION SHEET

(1) What is this study about?

You are invited to take part in a research study about exploring the experiences of pupils and school staff embedding Take Five breathing practices within their school. You have been invited to participate in this study because you are currently the Take Five Champion within your school. This Participant Information Sheet tells you about the research study. Knowing what is involved will help you decide if you want to take part in the study. Please read this sheet carefully and ask questions about anything that you don't understand or want to know more about.

Participation in this research study is voluntary. By giving consent to take part in this study you are telling us that you:

- ✓ Understand what you have read.
- ✓ Agree to take part in the research study as outlined below.
- ✓ Agree to the use of your personal information as described.
- ✓ You have received a copy of this Participant Information Sheet to keep.

(2) Who is running the study?

The study is being carried out by the following researcher: *Kathie Rees* who is conducting this study as part of the requirements for the Doctorate in Educational Psychology at the University of East Anglia.

This study will take place under the supervision of *Dr Nikki Collingwood*, n.collingwood@uea.ac.uk

(3) What will the study involve for me?

A 1:1 interview lasting approximately between 45-60 minutes with the researcher, this will be conducted via the online platform of Microsoft teams or face to face and will take place on a date and time arranged through mutual agreement with the researcher. The interview will consist of questions relating to being a Take Five Champion and the role of recruiting and training the Take Five ambassadors.

As the Take Five Champion the researcher will ask for your support in recruiting the Take Five Ambassadors for the study. This will involve sending parental consent forms to Take Five Ambassadors aged between 9-11, along with a child friendly information form. Once parental consent forms have been returned to the researcher the date and time for the focus group can be arranged. The focus group will require a member of school staff who is not the Champion to be present and they will take place face to face or online via Microsoft teams, the focus groups will last approximately 30-45 minutes. A recording of both the interview and focus group will be taken using the record function on Microsoft teams or Dictaphone if face to face, to enable transcription to be carried out. Following the transcription, the recording will be deleted.

There will be an opportunity for you to review your interview transcript to check for accuracy following transcription.

(4) How much of my time will the study take?

The individual interview will last approximately 45-60 minutes. Along with this there is a time commitment to sending out the parental consent forms and liaising with the researcher to arrange the focus group.

(5) Do I have to be in the study? Can I withdraw from the study once I have started?

Being in this study is completely voluntary and you do not have to take part. Your decision whether to participate will not affect your current or future relationship with the researchers or anyone else at the University of East Anglia now or in the future.

If you decide to take part in the study, you can withdraw your consent up to the point that your data is fully anonymised. You can do this by informing the researcher via email.

(6) What are the consequences if I withdraw from the study?

You are free to stop the interview at any time. Unless you say that you want us to keep them, any recordings will be erased and the information you have provided will not be included in the study results. You may also refuse to answer any questions that you do not wish to answer during the interview. If you decide at a later time to withdraw from the study your information will be removed from our records and will not be included in any results, up to the point we have analysed and published the results.

(7) Are there any risks or costs associated with being in the study?

Aside from giving up your time, we do not expect that there will be any risks or costs associated with taking part in this study.

(8) Are there any benefits associated with being in the study?

Through participation you will potentially have a positive impact on how peer led programmes are implemented and embedded within schools.

(9) What will happen to information provided by me and data collected *during* the study?

The information provided by you during the interview will be transcribed and anonymously submitted within the appendices of the completed research.

Your personal data and information will only be used as outlined in this Participant Information Sheet, unless you consent otherwise. Data management will follow the Data Protection Act 2018 (DPA 2018) and UK General Data Protection Regulation (UK GDPR), and the University of East Anglia's [Research Data Management Policy](#).

The information you provide will be stored securely and your identity will be kept strictly confidential, except as required by law. Study findings may be published, but you will not be identified in these publications if you decide to participate in this study.

(10) What if I would like further information about the study?

When you have read this information, Kathie Rees will be available via the following email Kathie.Rees@uea.ac.uk to discuss it with you further and answer any questions you may have about the study.

(11) Will I be told the results of the study?

You have a right to receive feedback about the overall results of this study. You can tell us that you wish to receive feedback via indicating on the consent form. This feedback will be in the form of a summary of the main findings. This feedback will be provided once the research has been completed and accepted as part of the Doctorate of Educational Psychology.

(12) What if I have a complaint or any concerns about the study?

If there is a problem please let me know. You can contact me via the University at the following email address: Kathie.Rees@uea.ac.uk

If you are concerned about the way this study is being conducted or you wish to make a complaint to someone independent from the study, please contact my supervisor Dr Nikki Collingwood at the following email address: n.collingwood@uea.ac.uk or contact the Head of School of Education and Lifelong Learning, Professor Yann Lebeau at Y.Lebeau@uea.ac.uk

(13) How do I know that this study has been approved to take place?

To protect your safety, rights, wellbeing and dignity, all research in the University of East Anglia is reviewed by a Research Ethics Body. This research was approved by: School of Education and Lifelong Learning Research Ethics Subcommittee.

(14) What is the general data protection information I need to be informed about?

According to data protection legislation, we are required to inform you that the legal basis for processing your data as listed in Article 6(1) of the UK GDPR is because this allows us to process personal data when it is necessary to perform our public tasks as a University.

In addition to the specific information provided above about why your personal data is required and how it will be used, there is also some general information which needs to be provided for you:

- The data controller is the University of East Anglia.
- For further information, you can contact the University's Data Protection Officer at: dataprotection@uea.ac.uk
- You can also find out more about your data protection rights at the Information Commissioner's Office (ICO).
- If you are unhappy with how your personal data has been used, please contact the University's Data Protection Officer at dataprotection@uea.ac.uk in the first instance.

(15) OK, I want to take part – what do I do next?

You need to fill in one copy of the consent form and return via email to the researcher. Please keep the letter, information sheet and **the second** copy of the consent form for your information.

(16) Further information

This information was last updated on 14/03/2022. If there are changes to the information provided, you will be notified by **email**.

PARTICIPANT CONSENT FORM (First Copy to Researcher)

I, [PRINT NAME], agree to take part in this research study.

In giving my consent I state that:

- I understand the purpose of the study, what I will be asked to do, and any risks/benefits involved.
- I have read the Participant Information Sheet, which I may keep, for my records, and have been able to discuss my involvement in the study with the researchers if I wished to do so.
- The researchers have answered any questions that I had about the study and I am happy with the answers.
- I understand that being in this study is completely voluntary and I do not have to take part. My decision whether to be in the study will not affect my relationship with the researchers or anyone else at the University of East Anglia.
- I understand that I may stop the interview at any time if I do not wish to continue, and that unless I indicate otherwise any recordings will then be erased and the information provided will not be included in the study results. I also understand that I may refuse to answer any questions I don't wish to answer.
- I understand that personal information about me that is collected over the course of this project will be stored securely and will only be used for purposes that I have agreed to. I understand that information about me will only be told to others with my permission, except as required by law.
- I understand that the results of this study may be published but that any publications will not contain my name or any identifiable information about me.

I consent to:

| | | | | |
|-----------------------|-----|--------------------------|----|--------------------------|
| Audio-recording | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| Video-recording | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| Reviewing transcripts | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |

Would you like to receive feedback about the overall results of this study?

YES NO

If you answered **YES**, please indicate your preferred form of feedback and address:

Postal: _____

Email: _____

.....

Signature

.....

PRINT name

.....

Date

PARTICIPANT CONSENT FORM (Second Copy to Participant)

Appendix 7: Parent/Carer Information and Consent Form

A qualitative exploration of implementation and engagement factors in a peer led self-regulation programme.

PARENTAL/CARER INFORMATION STATEMENT

(1) What is this study about?

Your child is invited to take part in a research study about exploring the experiences of pupils and school staff embedding Take Five breathing practices within their school. Your child has been invited to participate in this study because they are currently a Take Five Ambassador. This Participant Information Statement tells you about the research study. Knowing what is involved will help you decide if you want to let your child take part in the study. Please read this sheet carefully and ask questions about anything that you don't understand or want to know more about.

Participation in this research study is voluntary. By giving consent to take part in this study you are telling us that you:

- ✓ Understand what you have read.
- ✓ Agree for your child to take part in the research study as outlined below.
- ✓ Agree to the use of your child's personal information as described.
- ✓ You have received a copy of this Participant Information Statement to keep.

(2) Who is running the study?

The study is being carried out by the following researcher: *Kathie Rees* who is conducting this study as part of the requirements for the Doctorate in Educational Psychology at the University of East Anglia. This study will take place under the supervision of *Dr Nikki Collingwood*, n.collingwood@uea.ac.uk

(3) What will the study involve for my child?

Your child will be invited to take part in a focus group with other Ambassadors within their school. This focus group will be led by the researcher who will ask questions relating to your child being an Ambassador. The focus group will take place face to face or online via Microsoft teams and will be during a school day. The date and time of the focus group will be arranged following recruitment of Ambassadors with the aim of taking place during the summer term of 2022. A member of school staff will be present during the focus group to ensure the health and safety of the children taking part.

A recording of the focus group will be taken using the record function on Microsoft teams or with a Dictaphone if face to face, to enable transcription to be carried out. Following the transcription, the recording will be deleted.

(4) How much of my child's time will the study take?

The focus group will take place during the school day and will last approximately between 30-45 minutes. A scheduled 5-10 minute break will be given at the half-way point of the group.

The researcher will liaise with the school to ensure that the group will take place at a time which will not interfere with important aspects of your child's learning.

(5) Does my child have to be in the study? Can my child withdraw from the study once they have started?

Being in this study is completely voluntary and your child does not have to take part. Your decision whether to participate will not affect your current or future relationship with the researchers or anyone else at the University of East Anglia now or in the future.

If you decide to let your child take part in the study and then change your mind later (or they no longer wish to take part), they are free to withdraw from the study at any time and, you can withdraw your consent up to the point that their data is fully anonymised. You can do this by contacting the researcher via email.

(6) What are the consequences if my child withdraws from the study?

If your child takes part in a focus group, they are free to stop participating at any stage or to refuse to answer any of the questions. However, it will not be possible to withdraw their individual comments from our records once the group has started, as it is a group discussion.

(7) Are there any risks or costs associated with my child being in the study?

Aside from giving up their time, we do not expect that there will be any risks or costs associated with taking part in this study for your child.

(8) Are there any benefits associated with my child being in the study?

Through participation your child will potentially have a positive impact on how peer led programmes are implemented and embedded within schools.

(9) What will happen to information provided by my child and data collected during the study?

The information provided by your child during the focus group will be transcribed and anonymously submitted within the appendices of the completed research.

Your child's personal data and information will only be used as outlined in this Participant Information Statement, unless you consent otherwise. Data management will follow the Data Protection Act 2018 (DPA 2018) and UK General Data Protection Regulation (UK GDPR), and the University of East Anglia's [Research Data Management Policy](#).

Your child's information will be stored securely, and their identity will be kept strictly confidential, except as required by law. Study findings may be published, but your child will not be identified in these publications if you and your child decide to participate in this study.

(10) What if we would like further information about the study?

When you have read this information, the researcher Kathie Rees: Kathie.Rees@uea.ac.uk will be available to discuss it with you further and answer any questions you may have about the study.

(11) Will my child be told the results of the study?

You and your child have a right to receive feedback about the overall results of this study. You can tell us that you wish to receive feedback. You can tell us that you wish to receive feedback via indicating on the consent form. This feedback will be in the form of a summary of the main findings. This feedback will be provided once the research has been completed and accepted as part of the Doctorate of Educational Psychology.

(12) What if I have a complaint or any concerns about the study?

If there is a problem please let me know. You can contact me via the University at the following email address: Kathie.Rees@uea.ac.uk

If you or your child are concerned about the way this study is being conducted or you wish to make a complaint to someone independent from the study, please contact my supervisor: Dr Nikki Collingwood n.collingwood@uea.ac.uk or contact the Head of School of Education and Lifelong Learning, Professor Yann Lebeau at Y.Lebeau@uea.ac.uk

(13) How do we know that this study has been approved to take place?

To protect your safety, rights, wellbeing and dignity, all research in the University of East Anglia is reviewed by a Research Ethics Body. This research was approved by the School of Education and Lifelong Learning Research Ethics Subcommittee.

(14) What is the general data protection information my child needs to be informed about?

According to data protection legislation, we are required to inform you that the legal basis for processing your data as listed in Article 6(1) of the UK GDPR is because this allows us to process personal data when it is necessary to perform our public tasks as a University.

In addition to the specific information provided above about why your personal data is required and how it will be used, there is also some general information which needs to be provided for you:

- The data controller is the University of East Anglia.
- For further information, you can contact the University's Data Protection Officer at: dataprotection@uea.ac.uk
- You can also find out more about your data protection rights at the Information Commissioner's Office (ICO).
- If you are unhappy with how your personal data has been used, please contact the University's Data Protection Officer at dataprotection@uea.ac.uk in the first instance.

(15) OK, I am happy for my child to take part – what do I do next?

You need to fill in one copy of the consent form and return to the Take Five Champion at your child's school. Please keep the letter, information sheet and the second copy of the consent form for your information. Your child will need to complete the child friendly consent form and a copy returned to their Take Five Champion. The Take Five Champion will return all consent forms to the researcher.

(16) Further information

This information was last updated on 14/03/2022. If there are changes to the information provided, you will be notified by email.

PARENTAL/CARER CONSENT FORM (First Copy to Researcher)

I,[PRINT PARENT'S/CARER'S NAME], consent to my child [PRINT CHILD'S NAME] participating in this research study.

In giving my consent I state that:

- I understand the purpose of the study, what my child will be asked to do, and any risks/benefits involved.
- I have read the Parental/Carer Information Sheet and have been able to discuss my child's involvement in the study with the researchers if I wished to do so.
- The researchers have answered any questions that I had about the study and I am happy with the answers.
- I understand that being in this study is completely voluntary and my child does not have to take part. My decision whether to let them take part in the study will not affect our relationship with the researchers or anyone else at the University of East Anglia now or in the future.
- I understand that my child may leave the focus group at any time if they do not wish to continue. I also understand that it will not be possible to withdraw their comments once the group has started, as it is a group discussion.
- I understand that personal information about my child that is collected over the course of this project will be stored securely and will only be used for purposes that I have agreed to. I understand that information about my child will only be told to others with my permission, except as required by law.
- I understand that the results of this study may be published but that any publications will not contain my child's name or any identifiable information about my child.

I consent to:

Audio-recording of my child YES NO

Video-recording of my child YES NO

Age of my child:

My child's pronouns are:

She/her

He/him

They/them

This helps me understand how best to address them during the focus group

My child has a learning need which requires adaptations for them to take part in the focus group

Please provide information which will help the researcher make these adaptations:

.....
.....

Would you like to receive feedback about the overall results of this study?

YES NO

If you answered **YES**, please indicate your preferred form of feedback and address:

Postal: _____

Email: _____

.....
Signature

.....
PRINT name

.....
Date

Appendix 8: Ambassador Information & Consent Form

Information & Consent Form for Take Five Ambassadors



Who am I?

My name is Kathie, and I am a researcher at the University of East Anglia

What is my study about?

- I am studying how children become Take Five Ambassadors
- I would like to know how Take Five Ambassador's work in your school



What does the study involve?

- If you decide to take part in the study, you will take part in something called a 'focus group'
- This involves being with a small group of other Ambassadors from your school, where I will meet with you online or in school and ask you some questions about being an Ambassador
- A member of staff from your school will sit with your group when we meet
- The group will take place during the school day



What will I do with the answers to my questions?

- The answers to my questions will help me write up my study

Do I have to take part?

- No, it is up to you. You can speak to your parent or carer about taking part in this study as they have given permission for you to take part
- If you decide to take part your parent or carer will sign the parent permission form and you can sign this form
- Even if you decide to take part you can stop at any time
- If you decide to not take part this will not affect your role as an Ambassador

Yes, I want to take part in the study:

Your name:..... Date:.....

Appendix 9: Champion & Ambassador Debrief Information

Debrief information for Take Five Champions, to be provided verbally following the end of the interviews.

Thank you for taking part in this study, your time and input is very much appreciated.

Your contributions have helped with the aim of the study which is: to explore the implementation and experience of Take Five as a peer led self-regulation programme. Looking at how the Take Five Champion guides and supports the Ambassadors to help embed this peer led practice across a school.

The recording of this interview will be used for the purposes of transcribing, once this has taken place the recording will be deleted. Your transcription will be anonymised, and no identifying information will be shared or kept.

You can withdraw your consent for the study up to the point of the interview being transcribed. If you have any concerns about the research or the way it has been conducted you can contact me or my supervisor via the email addresses provided on the participant information form.

If you have indicated on the consent form that you would like to receive a summary of the research this will be provided once the research has been completed and approved by the University of East Anglia as part of the completion of the Doctorate of Educational Psychology.

Child friendly debrief for the Take Five Ambassadors, to be provided verbally following the end of the focus group.

Thank you for taking part in this study, your time and contribution is very much appreciated.

Your contributions have helped with the aim of the study which is: to look at the experiences of Take Five Ambassadors and how they are supported by the Take Five Champion to carry out the role within school.

The recording of this interview will be used to write down what has been said in this group and once this has taken place the recording will be deleted. What you have said will be anonymised, and no personal information will be shared or kept. Which means no one reading the research will be able to identify you from it.

If you have any concerns about the research or the way it has been carried out you can tell your parent/carer or Take Five Champion.

Appendix 10: Sample Champion Interview Transcript

Researcher: Okay. So just to start us off, can you tell me a little bit about your role as Take Five Champion within your school?

1st Champion: Okay, so I support staff with their delivery of Take Five if they're feeling a little bit under confident or if we have new staff that need training. I've been training them and getting them up to date with the materials I do. I lead the Ambassador training program, but we are on the train the trainer's part of it. So, the children actually train each other up. Obviously, I facilitate that, but we have lead Ambassadors and then we have trainers. All the older Ambassadors will all join together to train up the young ones.

Researcher: Brilliant. So you're quite far ahead in terms of the process.

1st Champion: Yeah, we've been doing it quite a while. I think we've had it for about five years. We were one of the first schools to have Take Five, I think we were in the pilot scheme.

Researcher: Yeah, yeah. Brilliant, and it's fantastic that it's been maintained.

1st Champion: Yeah, yeah, we're really keen on it.

Researcher: Yeah, brilliant. Okay, so, umm, can you tell me about how the Take Five Ambassador role works within your school?

1st Champion: Okay, so within Key Stage two the Ambassadors lead a daily breathing practice, and they will sometimes lead in assemblies or in the playground and other situations, but usually it will be to their own class, and sometimes will lead a breath in pairs, and sometimes individually depending on how confident they're feeling. So, they're basically in charge of that. And they do go and choose their own breath. So, sometimes they'll come and they'll lead a breath to the younger children as well. I've had them in year one before. So sometimes you might find that the children are being a little bit reluctant to join in with the breathing, and normally we find if we bring an Ambassador in then that really helps to boost participation because it's that's active role model.

Researcher: Yeah, fantastic. So, you've got that mix of them running it to their own classes, but also then that flexibility to move around the school a little bit. Is there a set time in the school day that everybody does Take Five within their classes?

1st Champion: We found that too difficult to implement because every class has slightly different routines and for example, like I find in I'm in year one, I find that just after lunchtime is a great time for Take Five, because they're a little bit they can be a little bit fussy, or perhaps there's been issues at lunchtime and it just helps to settle them and refocus them for the afternoon, but our lunchtime finishes at a different time to Key Stage two. So, we're 15 minutes ahead of them so it just wasn't going to work. So, in the end I said to staff as long as you have a regular once a day practice, it's better if it's the same time every day so that the children know that it's coming, and the staff know they can obviously build in another type of breathing practice if

they think that they need to. You know the mood of the class would benefit from uh just a little pause, then they can obviously do that, but it needs to be in the timetable once a day in a regular slot, so all the teachers have chosen their own slots and I have left them to that.

Researcher: Yeah, so, there's that consistency of the approach, but it's adaptable in terms of what suits each class and year group, yeah. Okay, so, can you tell me about what's worked well when recruiting and training the Ambassadors? And if you can give me some examples of how things have worked well.

1st Champion: I think it's worked really well right from the start. X from Each Amazing Breath came in and she started us off with the train the trainer, so I've never directly taught them as in me delivering the whole sessions, the children have always done that, and it works so so well because they listen so well to each other. I think that the older Ambassadors are really getting a lot from it too, and I would say that probably the most beneficial element of it is when the children are practicing the breathing and then the mentors of the trainers give them that feedback. So, we say, you know, give them something positive and then something that they might improve on next time, and I walk around listening to them and there's some really lovely responses and they're really encouraging with each other. So, we've got, if you want a specific example' we have one Ambassador in year six, who has just got such a lovely manner with him and he'll say that was fantastic, I really like the way that you did that. That was really nice and slow and well-paced and it's like an adult speaking and and then he'll say, but you know, maybe next time if you project your voice a bit louder and pretend you're the teacher, and you've got to be a little bit louder and clearer, that would really help me, and he's just, it's lovely to hear them taking that role on.

Researcher: Yeah, that's fantastic, and building those, those skills in giving feedback and you know, taking constructive criticism in a positive way. Yeah. Yeah, that's brilliant.

1st Champion: And the other children are cementing their own skills aren't they as well then, because they are revisiting their own training and becoming even more expert at it as they see other people, because it's easier to actually be quite self-reflective when you're looking at someone else as well because they might spot that perhaps I do that sometimes too. So, it's revisiting their own skills all the time, which I think is really good.

Researcher: Yeah, and I wonder, do you, do you feel like there's a difference between them receiving that feedback from a peer? Than it would be receiving it from an adult?

1st Champion: Definitely, yeah, definitely. I think there's a different, I don't know what it is, actually I don't know how to describe it. It's a different sort of level, isn't it? Because they know they're on a level with them, so they take it that they've done the role and they understand them and they've they've led to the class and yeah, it's just a different voice, isn't it?

Researcher: It is, yeah, yeah. Thank you. So, can you tell me about any challenges with recruiting and training the Ambassadors? And if you can think about some examples about those challenges and maybe what you've done to overcome them?

1st Champion: Yeah, we did have, I think after COVID, my first Ambassadors that I've trained up this year have been particularly underconfident I would say in delivering, and that might be partly because they haven't had as much Take Five when they were off during COVID. They've had the bubble Take Five, but they haven't watched their Ambassadors, and so, you've got the new year three and year fours, and so I trained up the two year groups at once, and the year threes were very underconfident, very quiet, softly spoken but I didn't really have any problem recruiting. They're always really keen, so I'm turning children down if anything, and make it quite a good responsibility in school. So, I think they all want to be breathing Ambassadors, but yeah, I did find there was less confidence, particularly this year with the younger ones. So, what I did was I invited them over and after lots of reassurance during the training and everything, they still felt a little under confident when they'd delivered to the group of other Ambassadors and we'd given them lots of positive feedback, lots of encouragement, they still said I'm not sure about it. So, me teaching a younger class is ideal because I encouraged them to come and deliver a breath to my year ones and reassured them I would be there and I would help them. So, we did that a couple of times first and until they found their feet a little bit and then now they're delivering to their own class.

Researcher: Fantastic. Do you think COVID had an impact on confidence of, yeah, children being able to kind of, like, speak up and deliver it to a larger group?

1st Champion: Definitely because they've not been in that situation. I mean, there's been a lot of social impact, hasn't there? But that's one of the things that they haven't been doing for ages and had lots of gaps and that's the age where they would be sort of building their confidence and speaking, and also they get a little bit self-conscious in lower Key Stage two, that's when that starts to kick in a little bit more. So, I can understand it, and yeah, and they've had a little bit of time away from Take 5 as well, so, I think it's a combination of factors.

Researcher: Yeah, how have you seen their confidence grow?

1st Champion: I think just just doing it more and more, they've sort of got the hang of it and got into the swing of it and with a lot of practice, and when they came into my class, I then said to the children, what do you think that they did really well and wasn't that amazing? And then my class were full of, you know, and 'they were so clear' or 'it was really relaxing', 'I feel really calm now'. So, they got a lot of positive reinforcement and I think they like it when they have an impact, don't they? So, they could see that straight away. So that boosted their confidence.

Researcher: And so, in what ways do you think the Ambassador programme helps other children in your school? And if you can again give me some examples of how the Ambassador programme has helped other children?

1st Champion: I think it's helped because those Ambassadors have become a voice for the programme. So, if there's been a class that has been a little bit reluctant to join in with Take Five, we sometimes find there's a bit of a lull, like I mentioned

before, where suddenly a class is saying, oh no, I don't want to join in, and that tends to spread quite fast, but if the Ambassadors step in and are very positive, it's offering that role model, isn't it? And and I also think that they sing the praises of Take Five. They know all the benefits, so they'll talk to their peers about what's good about Take Five and encourage them to do that. We talk about you're the one who should be setting the example and explaining why it's good for our physical and mental health. Why we do it, so they're ready to talk about that, you know, even in the playground, if someone's feeling a little bit stressed or angry, we encourage them, maybe make a suggestion to your friends, maybe we need to do a little bit of Take Five so they don't just have the role in the classroom. I think they'll take it elsewhere as well, which is really nice, and just really good role models, I would say.

Researcher: Okay, so in what ways do you think the Ambassador programme benefits the children who take on this role? And again, if you could give some examples?

1st Champion: I think it helps them to be aware of how mindful breathing can impact, their body, health, their mental well-being and why it's useful, and they also learn how to do it safely and why we need to do things like the grounding. Why it's important to follow all the different stages of Take Five so that they don't miss anything out. I think if we were just to give children the cards and say right read this, they wouldn't have the awareness, they might skip parts whereas they know that each part has a really important purpose. So, I think it's important to take the time with the training of it so that they understand from the first time they do it why they're doing everything they do, we've had a lot of people saying that. Children have gone home, and they've been teaching the adults as well, which is lovely to hear. So, they're obviously keen and they think it's, you know, beneficial to take into their households, which is lovely. We've had in year three, they started making, I was unaware of it, they've got quite a few started making their own book. Apparently different children were at home sitting in and making up their own breaths and then bringing them into school, a book which wasn't they weren't delivering them as Take Five breaths, but it went in their calm corner. So, if they wanted to, they could go and have a go at one of their friends breaths.

Researcher: Yeah, brilliant. So, do you feel like it's having a wider impact rather than just within the school with children taking it home and talking about it?

1st Champion: Yeah, that's always been the case. I mean, even when I worked in foundation, one of the parents came in and said, 'my child started breathing really slowly and he says it's something that he does at school'. When she came in and said this, she was unaware of Take Five, at that point I think that was in the early days. She was unaware of what we were doing, so I explained that we do Take Five breathing. Since then, we've had a video and everything, so the parents are much more aware but yeah she was saying he does it on an evening and we always say to the children that you can do it at home, it's not just something you have to do when we tell you to do it or when we invite you to do it. This is something that you can do if you need it at any point in the school day, you can go and you can Take Five or if you're at home and you're feeling a little bit overwhelmed. A lot of our children, for example, live in really busy households with maybe high numbers of siblings. We've got children with six and seven siblings, and they're all squeezed in the same house

that it can be quite loud, quite chaotic, so it's important for them to know how to take themselves off for a quiet moment, and it's a strategy that they can use.

Researcher: I guess that links into the next question in terms of the Ambassadors, what other kind of benefits or skills do you think it provides to them, what other skills do you think they're developing?

1st Champion: So, I think certainly leadership skills, confidence building all these things are sort of incidental things that happen, aren't they? When they lead the class, they take on a role and responsibility. So, I think they feel valued, it might be children and I mean we have to choose quite confident children anyway, but it is sometimes children that perhaps might not be achieving in other areas, but actually they've got a real sense of accomplishment to be a Take Five Ambassador, but it's something that I can feel really proud of. So, I think it's good for their own self-esteem, but also leadership, confidence, public speaking, especially if when they get older and they're leading assemblies. I mean that's a big thing, isn't it leading a whole assembly full of children full of your peers?

Researcher: Yeah, yeah, uh, that's such a difficult thing to do, to stand up in front of a whole hall of children, it's amazing that they're able to do that.

1st Champion: Yeah, absolutely.

Researcher: Okay so can you tell me about what is in place to support and guide the Ambassadors? And can you tell me about any challenges in regards to sustaining that support?

1st Champion: Right, I think time is always a bit of a barrier for the support because when they're in school, I'm very busy teaching, but the teachers do offer quite a lot of support and they'll feed back to me if any children are really struggling. So, it's happened before where teachers come to me and tell me 'I really don't think this boys got the hang of it, and he is really quiet talking into the card. He's not quite, you know, the children can't hear him, it's not working'. So, then I've gone in and well, first of all, I've taken the child to one side and had a little bit of pep talk with them, gone over some bits with them and then brought them into my class. I find that a really useful thing to do because my children loved it anyway and they can deliver the daily breath, can't they? Then I can give positive feedback with a little bit of guidance as well. So, we've had that before and if an Ambassador has found it difficult to lead a class, I've gone in and watched them lead a breath in their class as well, and for a little bit of support I've said we'll team do it, you know, we'll do it together, and after I've let them know that they can do it as a team with a partner if that helps, you know if they want to concentrate on the reading while their partner demonstrates the action, then that that helps sometimes. So, it's just being aware and talking to the teachers. I think what I might put in place but we haven't done this yet is I thought it would be really useful to have a bit of a regular meeting even if it's just once a term or something, and I meet with the Ambassadors to see how it's going just a little check in, because sometimes I've found that talking to them, perhaps in passing, when I bumped into them and they've said things to me like we haven't been doing it regularly or we haven't changed our breath this week or something like that, well you need to maybe have a word with the teacher, so it is

good to keep in constant communication as much with the Ambassadors. So, I think I might set that up next year having a little check in with them all.

Researcher: Yeah, lovely. Thank you. Umm. Okay, so last question, is there anything else you would like to feedback on your experience of implementing the Ambassador role within your school?

1st Champion: I think it's just been a really positive thing for those involved. I think we'll, we'll definitely keep it in place. Because the children seem to really enjoy it, I would say that. It is much more effective when the children are leading the breath, than when the teachers are leading the breath, because I think that they have such a respect for each other standing up at the front of the class, and as they're getting older and likely starting to perhaps lose a little bit of interest, maybe they've been doing Take Five for a while, it's good to freshen it up and actually let the peers do it from year three upwards. So, I think the Ambassador role is the most important part of Take Five. It's key to the programme really, and the fact that they train each other is vital. We don't have a lot of Ambassadors at my school, we have four per year group because I like to keep it a bit of a special role. I know some schools do have more, but I think it's really important and to keep it as a really special thing that particular children can do, and to keep the value really high of it. We have had up to six Ambassadors before, but I like to keep it quite a small number really.

Researcher: Yeah. Do you think that helps you as well in terms of implementation?

1st Champion: It helps keep the quality high, doesn't it? Because I can spend more time with those children and I know exactly who the Ambassadors are and I could lose track if I have more of them, and then the teachers know exactly who they are. They're doing it regularly, if there was more of them perhaps, they'd be getting less experience whereas at the moment they're doing it and at least once a week. So, it's things like that. I think it's important to keep it as a really special responsibility in school. There is this special Take Five form that you send out and then they write why they would like to be an Ambassador. I normally let the class teacher choose actually because they know them better, but I say to them, you know, it needs to be someone who's confident and can actually do this. And I know sometimes we like to choose children for lots of different reasons, maybe because they've never had a role before or never had a responsibility, so I think it would be nice to give it to that child, but really, we do need someone who's going to keep the attention of the class, because that's something you're doing every day. So, if you've got the child who you don't think is going to be able to do it, then don't nominate them. I would say I talk to the staff about it, but I take their guidance really.

Appendix 11: Sample Focus Group Transcript

Researcher: Imagine you were talking to a friend at another school who had never heard of Take Five. What would you tell them about Take Five?

Child Ambassador 1: Um, I would tell them that like it's something you need to do to get you calmer, and um and to feel safer a bit.

Researcher: Ah, ok can you tell me a bit more about what you mean about safer?

Child Ambassador 1: Um like, cos if you're like, if you're very scared of something and like its coming, um then you can do some Take Five, to get less, so you can think more, so you can do something.

Researcher: Ah okay, so it helps you get back to being able to think straight? Is that what you mean?

Child Ambassador 1: Yeah.

Researcher: Okay fantastic, thank you.

Child Ambassador 2: Um, it calms you down, because after people come in from playing out sometimes the little ones are very very noisy and chaotic, so um sometimes the adults do Take Five breathing or sometimes they get the other kids to do the Take Five breathing to the class and it calms them down.

Researcher: Fantastic thank you, and why do you think it helps calm them down?

Child Ambassador 2: because all you're doing is just sitting there and you're taking deep breaths, and it just calms you down.

Researcher: Lovely, thank you, anyone else? Yes...

Child Ambassador 3: Um it's really useful for like when you're upset or something, it will calm you down.

Researcher: Great thank you, would anyone else like to contribute? Ok do you think that sums up what Take Five is and how you would describe it to others?

All children: Nodding and saying yes.

Researcher: How does your Take Five Champion work with you?

Child Ambassador 2: Um

Researcher: Do you want to have a little bit of time to think about that?

All children: Nodding

Pause for approximately 10 seconds.

Researcher: So, if you think about the process of applying to become an Ambassador, what led to you wanting to apply for it?

Child Ambassador 4: So, first we had to like send off for it, and we had to get picked out, and we had to like, every Wednesday I'm pretty sure it was we had to be um with Miss X, in the ICT suite, so like with other Ambassadors, trying to teach us how to like learn how to like do breathing, we learnt how to what part is what and and like everything that's basically about Take Five.

Researcher: So, what led to you wanting to apply for it?

Child Ambassador 4: Because, like I care about other people and like and I know that some other people like are a bit like un, don't like want to be like one, cos they need to talk in front of other people. If they don't like talking in front of other people that they don't met, meet, and I just signed up cos I don't really mind, I've done it before lots of times.

Researcher: Okay, so in terms of being able to speak in front of a group? What skills do you think you need to be able to do that?

Pause for 4 seconds

Researcher: Do you think it's about confidence?

Child Ambassador 4: Yeah yeah.

Two children put their hands up.

Researcher: Okay I'll come to X first and then X.

Child Ambassador 1: Erm it was like, it was like we were gathered in the hall, didn't we?

Child Ambassador 2: Yeah.

Child Ambassador 1: We were gathered in the hall, what made me want to be in the thing a Ambassador was I um I just wanted to help and I didn't think I would get in but I got in.

Researcher: Oh, why didn't you think you would get in?

Child Ambassador 1: Erm, because there were lots of people trying to be one.

Researcher: So how did you feel when you did get a spot?

Child Ambassador 1: Erm, a bit relieved.

Child Ambassador 2: Erm, what made me want to be an Ambassador, erm was because I like being an Ambassador because I'm not like scared of going in front of my class and like reading out words but if it was a completely different class I wouldn't but I've been with my class for like ages and I know how to calm them down.

Researcher: Brilliant, and do you think being a Take Five Ambassador has improved your confidence even more?

Child Ambassador 2: Yeah.

Child Ambassador 5: I wanted to become an Ambassador because when I was in year 3 and we were getting ready to put our forms in ready to be one I remembered that my brother was one and he used to like do it sometimes with me and after that he like calmed me down a bit cos yeah so I wanted to become one because so I could help people calm down as well.

Researcher: Fantastic, that's really great to hear and to hear it passing down your family as well. What was it about your brother doing that with you that you think helped?

Child Ambassador 5: I think it just like helped like because like I know my brother it like I was able to listen to him and I didn't have any other questions or other thoughts thinking like 'wait what is he doing?'

Researcher: You just went with it?

Child Ambassador 5: Yeah.

Researcher: Can you tell me about any difficulties you have experienced when training to become an Ambassador?

Child Ambassador 4: So sometimes people are like really hyper, you're trying to lead a session sometimes I'll be like when you're saying ok 'so ground your feet' and 'um take two final breaths' so something like that, they would um start being silly 'imitates fast breathing' done, or they'd like have their feet off the floor and then that's when you have to try and remind em as a, everyone in the group without just pointing it straight out straight away at them.

Researcher: Okay, so what helps when things are a bit difficult like that?

Child Ambassador 4: So sometimes you could like if someone wasn't grounding you could remind um the group to ground their feet and then maybe he will do it or after the lesson maybe say 'I'm not being mean or ote but you kinda forgot to ground your feet'.

Researcher: Hmm, why is it important to ground yourself?

Child Ambassador 5: Because if you don't it sometimes feels like you're floating off

if your eyes are closed.

Researcher: Ah that's a really good description, I'm aware of other people want to chip in so just hold on to your thoughts and I will come to you. The other question I was just going to ask was 'do you think there is a difference between talking to the group as a whole rather than speaking to someone directly?

Child Ambassador 5: Yeah, cos if you like single someone out then it will make everyone look at him and it will like make draw everyone's attention to him and they will stop doing the practice but if you do it as a whole group and remind everyone as a whole group, they won't like look at one person and they won't stop the practice.

Researcher: That's a great point, thank you.

Child Ambassador 1: Sometimes I find it difficult when we're doing Take Five breathing in front of a class and sometimes the people at the back don't listen and they just talk but the people at the front we make sure everyone can hear but if they don't hear sometimes because they just sit there talking but the people at the front just sit there doing it but when we go to speak louder they look at us like they know what we're saying but they just carry on being silly when they carry on being silly I just try and remind em that we need to stay calm.

Researcher: Yeah, and do those techniques work?

Child Ambassador 1: Yeah.

Researcher: And how do you find it directing other children in what to do? Do you think there is a difference in you doing the practice compared to an adult leading it?

Child Ambassador 1: I think it's very different because they don't normally listen but when there's adults there they listen.

Child Ambassador 2: Erm one of the difficulties is that people talk. So, what I usually do is say it really quiet for the practice.

Researcher: So how does that make you feel?

Child Ambassador 2: It makes me feel quite annoyed that people are talking in the practices.

Researcher: Thank you for sharing that, ok you wanted to share something as well?

Child Ambassador 4: Yeah, but mine was the same as what X said.

Researcher: You'd agree with what X was saying about feeling annoyed?

Child Ambassador 4: Yeah.

Researcher: Okay thank you. Can you tell me about any help your Champion has given you in your role as Ambassadors?

Child Ambassador 2: Sometimes we used to go into the hall and we were we were practicing with the new year 3 Ambassadors like making sure they're reading it to us and we're not telling them what to do but like if someone's speaking quietly we might tell them they need to be a bit louder.

Researcher: Okay so your Champion is helping you with those techniques and strategies.

Child Ambassador 5: She's also like involving all of us to help out with em training the little ones and like with the demonstrations and leading breaths for them like one of the demonstrations was the bean bag and the ball where the ball bounces back because its resilient and it keeps on trying but the bean bag it just stays there cos yeah it's just given up.

Researcher: Ah yeah, I love that description of resilience, does anyone else want to say what resilience means?

Child Ambassador 4: It's like where you never give up and keep going for it till you get your reward.

Researcher: Fantastic, thank you for explaining that. Can you tell me about any difficulties when training to become an Ambassador?

Child Ambassador 6: When I first ever did it, in my class I wasn't quite confident in myself.

Researcher: Okay, so what helped you build that confidence up?

Child Ambassador 6: I just tried to not think about it, and just keep going.

Researcher: So, what helped you to keep going?

Child Ambassador 6: I just thought I wanted to do something, because at that point when I was in year three, I didn't really do much, I wasn't really in any clubs or out.

Researcher: That's interesting, so being part of Take Five and becoming an Ambassador how did that make you feel then, as you'd not been part of something before?

Child Ambassador 6: Since I've done it, I've been a lot more part of other clubs, I've joined a football club outside of school since.

Researcher: Brilliant, thank you for sharing that.

Child Ambassador 3: What made me want to like do it and have more confidence in myself was every week we used to go into the hall with our Champion and she used to talk about how fun it was to do when she was training, and that made me think that it was going to be fun.

Researcher: What kind of things did she say that made you think it was going to be fun?

Child Ambassador 3: So, well she used to say that it's not scary you just, you're just at the front of your class trying to calm everyone down, and if they don't listen just and they're not being nice, just talk to them after the practice.

Researcher: Why do you think it's important to talk to them separately rather than single them out?

Child Ambassador 3: Because if you single them out, they might feel a bit pressured and embarrassed because um its one person versus everyone else and it's not very nice to single people out.

Researcher: Yes, that's a lovely point. Ok have you had any other difficulties in getting it started and running within your classes?

Child Ambassador 1: Sometimes we like mess up a word but like we just keep going like nothing ever happened.

Researcher: Can you tell me about how your role may help other children? I know you've already said a little bit about this, but I'd like to see if there's anything you would like to add.

Child Ambassador 6: So, it kind of like helps other people by when you, so like helps calm them down so like if someone's feeling sad or something then you can like, kind of like cheer them up or if like anyone's feeling tired then you can choose an energetic one out.

Researcher: Why do you think it can energise us as well?

Child Ambassador 6: Because sometimes there's energetic kind of one's cos there's like movements and stuff so the energetic ones are like where there's a lot of movement.

Researcher: Fantastic, thank you.

Child Ambassador 2: When we do it, some people at the start are like very noisy so when we do it it like calms them down so like when we do our lesson everyone's prepared for the lesson and they're listening.

Researcher: Brilliant thank you.

Child Ambassador: It can help them by when they're upset or worried erm you can just do some breathing with them and after the practice it's like it never happened.

Researcher: So, they are able to let go of those feelings?

Child Ambassador 5: Yeah.

Researcher: Anyone got anything else they would like to contribute before I move onto the next question? Okay so If another school was thinking about training Ambassadors, what would you tell them?

Child Ambassador 6: Probably, you need to have very calm people to do it with, so that they don't, because if they're not calm, they're just going to go very quick and no-one's going to get to do anything really.

Researcher: Do you mean in terms of reading the practices out, you need someone who is calm and won't rush, why is it important to have someone who is calm?

Child Ambassador 6: So that people actually get to do the practice.

Child Ambassador 3: Believe in yourself that you can actually do it.

Child Ambassador 4: Um, you need a lot of self-confidence because if you don't really like standing in front of like a lot of people which is like a class which is like about 30 people you don't need to worry it's just people they basically grown up with.

Researcher: Have any of you done a practice in front of an assembly?

Child Ambassador 6: No, but we've seen pre-existing Ambassadors doing it and I'm kind of hoping we can do it.

Researcher: How do you think it will feel standing in front of an assembly to do one?

Child Ambassador 6: I think it might be fun, but I'd be like a bit worried at first but after I think I'll be happy because cos I've got it off my chest.

Child Ambassador 3: It would be nice if we could do it in front of everyone in an assembly because it's like if any of us want to be a teacher when we're older, and we have to stand up and do an assembly, it's like we've already gone through that experience.

Child Ambassador 4: Um, I wouldn't be worried at all cos I've gone in front of lots and lots of people before and I don't really mind being in front of anyone, and I already have lots of experience and all my other friends that used to be Ambassadors that are now in another school they just told me not to worry and that's it.

Researcher: Has there been any difficulties to keep Take Five going within the school?

All children: Shake heads and say 'no'.

Researcher: So why do you think there hasn't been any difficulties in keeping it going? What do you think has helped? So, you've got Ambassadors throughout the school, it's not just in one class so what do you think helps it keep going across the whole school?

Child Ambassador 5: So, I think if you mess up sometimes you'll have a friend that like looks at you and sticks their thumbs up at you and goes 'carry on' like gives you a bit of reassurance

Researcher: Fantastic, thank you.

Child Ambassador 1: Because when we normally do it at the front we're not, we'll normally have two people so like one person reads one half and the other person reads the other half, cos if one person reads the whole half they gonna get a bit mixed up with words, so er then if we change people the other person can just smile at them and say 'keep going you've got this'.

Researcher: So working together is a really important thing?

Child Ambassador 1: Yeah.

Researcher: So, as you've been talking, its led me to think of different things, what do you think the difference is between children training to become Ambassadors and leading practices compared to just the adults doing it?

Children: All put hands up.

Researcher: I'll go round the group so hold your thoughts in mind.

Child Ambassador 3: Because when like all grown adults do it they basically didn't do it when they were a lot younger but when you do it when you're a lot younger you'll get more trained and like you get better at it so like when you grow up you might like want to teach other children and you want to let it pass on to other people.

Researcher: Amazing, fantastic point thank you

Child Ambassador 2: Erm, so, erm so like I feel like the children need to learn how to do it because if the children didn't know how to do it it's going to be barely any point with just the teachers gonna do it.

Child Ambassador 5: The children will grow up and they might still want to be Ambassadors.

Child Ambassador 6: I think when you're younger, as a kid when you train to do it and you want to be a Champion when you're older you're gonna have more confidence.

Child Ambassador 4: I think in um training the children instead of teachers because if you like train a child, when they're older they can go onto helping other people when they're older and they can go onto training other little kids, and it'll keep on passing on and on and on for a long time.

Researcher: Why do you think it's important that it gets passed on?

Child Ambassador 4: Cos it helps calm people down a lot so it's good for people that are a bit stressed and for kids that are about to go and do their SATs and stuff like that.

Child Ambassador 3: I think it um its good because, well its better when like the year five and sixes do it cos the little ones like the year one and two's they look up to the year five and six so like with us doing it they might want to do it when they get to our age.

Child Ambassador 6: I feel like they listen more to us when we do it.

Researcher: Brilliant, thank you.

Appendix 12: Process of Reflexive Thematic Analysis

1. Familiarisation with Data. This was completed by printing all transcripts and reading through them multiple times and making initial notes on key points.
2. Coding. This was done by hand, by reading transcripts and highlighting relevant information and making notes in the margins. All codes were then typed up.

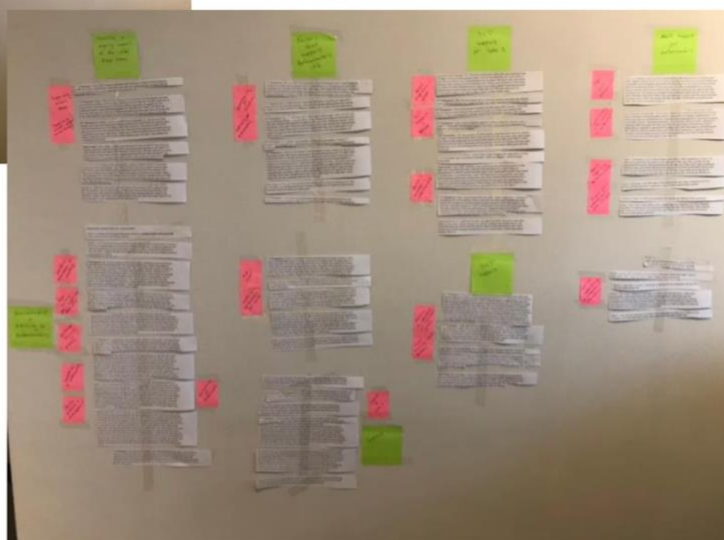
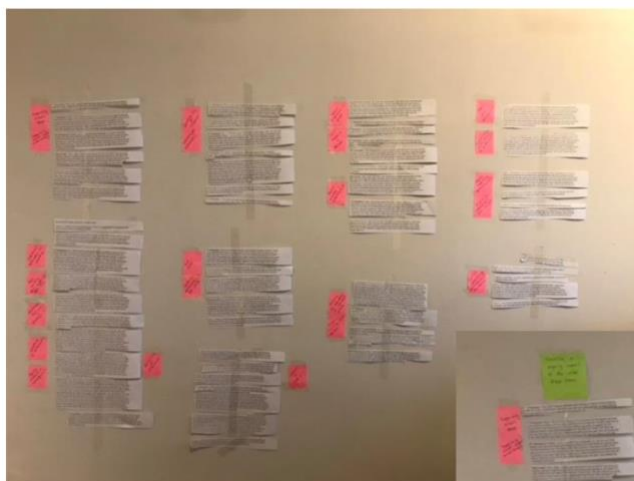
1 **Researcher:** So, my first question is, can you just tell me a bit about your role as a
2 Take Five Champion within your school?
3
4 **2nd Champion:** Uh, yeah. So, I'm obviously at the moment still training new
5 Ambassadors because I've not got as many. Maybe if COVID hadn't happened, I
6 would have got to the point where I'd have trained trainers up to actually do the
7 training of Ambassadors. So, I'm still training new Ambassadors, currently training
8 some at the moment I'm actually training 15 at the moment because obviously we've
9 gone through COVID without having any new ones trained. I'm training 15 at this
10 moment in time and then before COVID I used to timetable the Ambassadors that I
11 did have into classes to go and do it elsewhere in school because we've got no
12 Ambassadors in key stage one. They're all key stage two based at the moment, so
13 some of the key stage two ones will go down and do it with the younger ones. So
14 yeah. So, I've been responsible for timetable and things like that.
15
16 **Researcher:** And so, in terms of training up the Ambassadors, do you mean you've
17 not got to the stage of training them to become trainers?
18
19 **2nd Champion:** Yes. Yeah, that's my next, my next job. I've actually spoke to some
20 of them on Friday saying that obviously once they're trained, I will then in September
21 start training them to be trainers, and I've not got a problem with that because at the
22 moment the Ambassadors that I'm training have more or less been doing the job.
23 training on the job as we might say, they've been doing Take Five in their classes
24 and it's just recently this last two weeks that I've been pulling them out and actually
25 doing the training as well. So, they are quite experienced even before they've had
26 their initial training sessions.
27
28 **Researcher:** Yeah. Brilliant, and so I've got this clear in my head, when they've done
29 the training to become trainers, they can then train other children, can't they? To
30 become Ambassadors.
31
32 **2nd Champion:** Yes, so it's like a three-stage approach, isn't it? You get trained, you
33 train up the ambassadors and then you train them to become trainers and then
34 they're training other children, and that's the whole point. Eventually it's supposed to
35 be led completely by them, and I will be redundant, hopefully, and the only time
36 they'll come to me is to ask for help. If they've got a problem or an issue with
37 anything, then I'm always there in school to help them. But that's the idea of the
38 initial program, that it becomes totally child led eventually.
39
40 **Researcher:** Brilliant, so can you tell me about how the Take Five Ambassador role
41 works within your school?
42
43 **2nd Champion:** We use it twice a day religiously at the same time every class, and at
44 the moment we've got between two and four Ambassadors in each key stage two
45 class, and they will take it. They will do Take Five on a rota basis in their own class.
46 At the moment because we've not started moving around yet because of COVID.
47 Hopefully we want to get back to doing that in September and they're going to
48 experience doing it for different classes. So, give them more of an insight and more
49 experience doing it with children they don't know. Then the ones that they do, we do
50 it after every break time and every lunchtime, because we feel that once they've

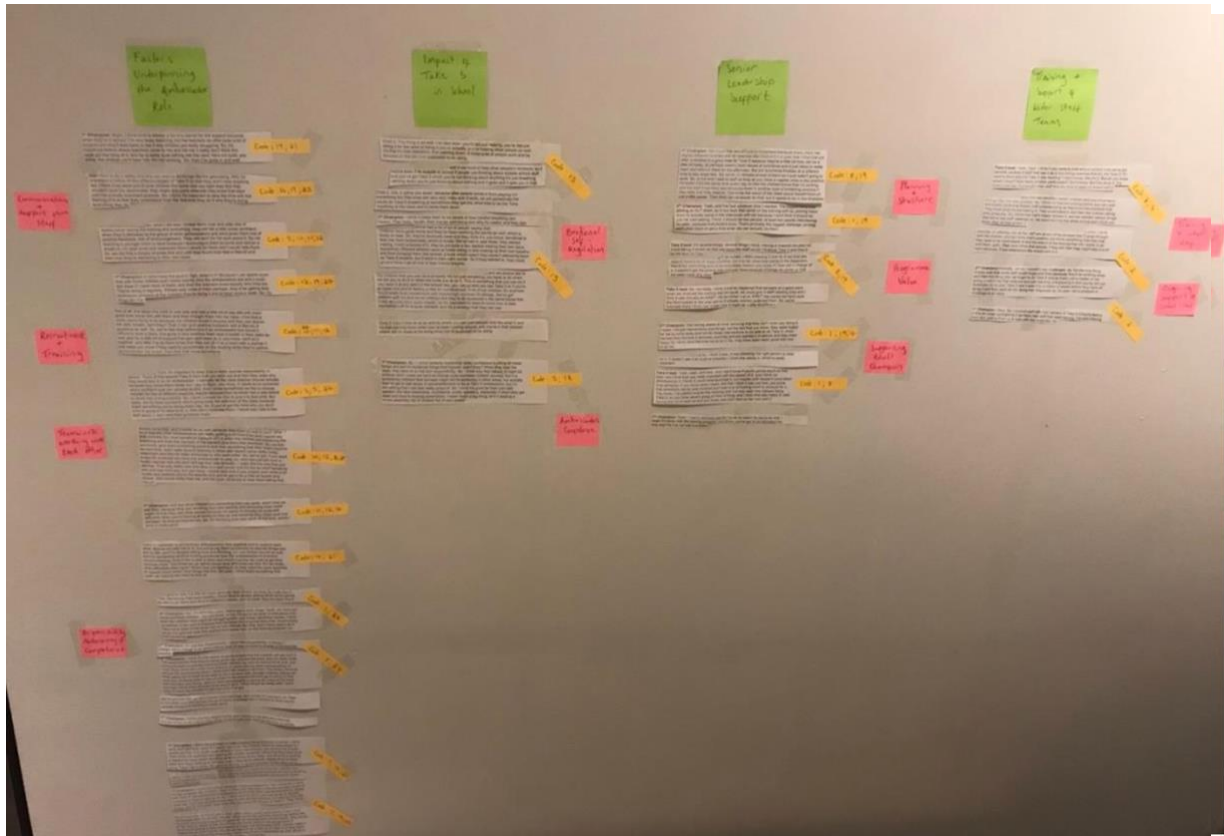
COVID - impact on training Ambassadors + numbers
Practice for Ambassadors
Ambassadors Competence + Practice
Child led
Support for the Ambassadors
Time; Structure of practices in school day
Competence of Ambassadors + Practice

51 been out for break and they've had that excitement of being outside with friends
52 running around that they probably need it then to calm down and focus back into the
53 learning. So, I mean, we also encourage that they do it as well anytime they need to.
54 We've also told staff if they've got a particular time where the kids are quite restless,
55 then if they feel they want to stop and say, well, let's do a Take Five practice and
56 they're quite welcome to do that. But at the moment, it is whole school twice a day.
57
58 **Researcher:** Fantastic, and so have you had any challenges around getting it set-
59 up? So, it's like you said religiously done those two times in every class across the
60 school?
61
62 **2nd Champion:** Initially, um no, I wouldn't say challenges, no, but the only thing
63 initially was that some staff would forget and then obviously they'll be working away
64 and then this thing oh, we forgot to do Take Five and so it was just a matter of me
65 going round in the first instance and just checking and popping in and saying did you
66 remember to do your Take Five and it was only a matter of weeks before they were
67 all doing it and they were all into doing that religiously so. So yeah, not a problem or
68 challenge at all really.
69
70 **Researcher:** Brilliant, and were you given time out of your normal duties to be able
71 to go around and check in with staff. Yes. Yeah, it wasn't a big job. 5-10 minutes
72 straight after break. Same after dinner, just popping in and saying. Have you done
73 Take Five and yeah, they're all on board. So, they've been really good with it.
74
75 **Researcher:** I feel like it's been important for you to have, even though it's not taking
76 much of your time up to do that. It's been important for you to be given that protected
77 time. If you are able to go across and see is it being embedded within people's
78 timetable.
79
80 **2nd Champion:** Yeah, I had to definitely get SLT to be on board for me to do that. I
81 mean it's same with the training program. You know, you've got to be allocated the
82 time and I've not had a problem, I mean, a lot of the time I've not even had to run
83 it past the head. I'll just say to the class teacher, I'm gonna start Take Five training
84 on a Friday. So, it'll be like between three and six weeks and they're quite happy with
85 it as long as they know what I'm doing and where I am. It's been absolutely fine.
86
87 **Researcher:** What do you think helped right at the beginning, for you to be given
88 that autonomy, to just get on with it?
89
90 **2nd Champion:** Yes having peace of mind, knowing that they don't mind you doing it.
91 I mean, I've got interventions and things, but the fact that you know, they were happy
92 for me to come away and not do those interventions to be able to do Take Five,
93 show me that they like took it seriously and they actually wanted it in school and they
94 were happy for me to have the time out to do it. So, they have been really good with
95 that to be fair.
96
97 **Researcher:** Having that investment from SLT that this is going to be important for
98 your school, for this member of staff to be able to get on with it.
99

Impact
Individual to school needs + structure of days
Support of staff
Support of SLT + valued + time allocated
SLT Support + valued

| Number | Level 1 Descriptive Codes | Level 2 Interpretative Codes | Transcript 1 | Line numbers |
|--------|---------------------------|-------------------------------------------------------------|--------------|------------------------------------------------|
| 1 | Supporting staff | Supporting staff with the delivery | 1 | 4-5 |
| 2 | Supporting staff | Staff training & understanding | 1 | 5-6 224-228 |
| 3 | Responsibility | Children taking on responsibility in the role of ambassador | 1 | 7-10 24-29 107-108 204-205 |
| 4 | Valued | Valued programme in school | 1 | 20 205 261-265 |
| 5 | Confidence | Ambassadors developing confidence | 1 | 27 100-117 203-204 209-212 232-238 |
| 6 | Autonomy | Ambassadors' choice of breathing practice & when | 1 | 28 |
| 7 | Role model | Ambassadors seen as a role model | 1 | 30-33 148-157 |
| 8 | Implementation | Implementation factor: structure of school day | 1 | 39-51 |
| 9 | Training | Lead & champion Take 5 training | 1 | 58-60 |
| 10 | Positive feedback | Positive feedback from peer to peer | 1 | 62-74 |
| 11 | Competence | Ambassadors developing sense of competence | 1 | 80-85 |
| 12 | Practice | Ambassadors experiencing lots of practice | 1 | 113-117 230-232 |
| 13 | COVID | Impact of COVID | 1 | 122-128 |
| 14 | Pupil voice | Ambassadors being a voice for Take 5 | 1 | 144-157 |
| 15 | Impact | Impact of Take 5 | 1 | 149-157 162-168 170-178 183-197 |





3. Generating Initial Themes. This took place following refinement of codes and was achieved using post-it notes to allow for flexibility and refinement over time.

Theme 1: Senior Leadership Support

Subtheme: Planning and Structure of the Programme

- Time is needed for planning how it will be implemented.
- Structure of the school day needs to be considered before implementation.
- Implementation factors/difficulties need to be discussed and troubleshooted.
- The individual school needs should be discussed, and what the schools aim for the programme is.
- How the programme is adapted to meet the needs of each individual school should be discussed, ensuring there is still programme fidelity.
- Who is assigned the Champion role is an important decision.

Subtheme: Supporting the Adult Champion

- Supporting staff with delivery of the programme over time.
- Champion training is prioritised.
- Communication with Champion needs to be ongoing.

- Champion needs sense of autonomy.
- Allocating time for Ambassador training during the school year.

Subtheme: Programme Value

- Champion training prioritised.
- Champion allocated time to complete whole school training.
- Timetabled into the school day as a practice for all.
- SLT promoting practice to ensure it is consistently done.
- Keeping it on the school agenda to ensure fidelity and value placed on it.

Theme 2: Training and Support of Wider Staff Team

Subtheme: Training of School staff

- Time allocated for whole school training.
- Communication between Champion and staff team needs to be ongoing.
- Training of new staff when they join the school.

Subtheme: Ongoing Support of School Staff

- Quality of practices to be monitored.
- Communication with Champion and class teachers.
- Communication with Ambassadors between class teachers and Champion.
- Value of programme promoted.
- Consistency of practices monitored.

Theme 3: Factors Underpinning the Ambassador Role

Subtheme: Recruitment and Training

- Recruitment process – taking into consideration needs of the school.
- Ambassador training – allocated time and prioritised.
- Ambassadors have time and opportunities to practice.
- Practice with younger peers – delivering practices in various classes to practice.
- Feedback from peers – within whole class practices.
- Feedback from peers in Ambassador role.
- Feedback from Champion following delivery of practices.

Subtheme: Communication and Support from Staff

- Managing difficulties – class teachers supporting Ambassadors.
- Class teacher supporting with allocating time and prioritising practices.
- Communication with Champion – ongoing check in.
- Positive feedback from Champion.

Subtheme: Teamwork – Working with Each Other

- Working in pairs to deliver practices.
- Providing support when delivering practices.
- Providing constructive feedback to each other.
- Sense of belonging from being part of a team.
- Positive impact on individuals from being part of a team.

Subtheme: Responsibility, Autonomy, and Competence

- Importance of practice for sense of competence.
- Feedback from peers has an impact on sense of competence.
- Competence important for quality of practice.
- Peer led role leading to sense of responsibility.
- Positive impact of having responsibility.
- Ambassadors choice of breathing practice and when to use them supports autonomy.

Theme 4: Impact of Take Five

Subtheme: Emotional Self-Regulation

- Breathing practices promoting self-regulation.
- Calming influence of breathing practices.
- Breathing practices carried out after lunchtimes to support readiness for learning.
- Breathing practices supporting children to manage difficult situations.
- Breathing practices used daily to support development of emotional regulation.

Subtheme: Ambassadors Confidence

- Taking on role of Ambassador develops confidence.
- Ambassador role supports public speaking skills.
- Confidence leads Ambassadors to join other school clubs.
- Confidence is built through practice and positive feedback.

4. Developing and Reviewing Themes. This was achieved by looking back at the transcripts and selecting extracts relating to the codes.

5. Refining, defining, and naming themes.

Appendix 13: Child Friendly Research Summary

Thank you for taking part in the research study on your experiences of being a Take Five Ambassador. Your views were a great help and had a big part in what the research found out. The study is now finished, and this is what I found:

- Take Five Ambassadors get lots of confidence from taking on the role.



- Take Five Ambassadors think the role helps other children feel calm and ready to learn and Ambassadors enjoy helping others.

- Take Five Ambassadors get good at their role when supported by the Take Five Champion and from helping each other and working as a team.



- Take Five Ambassadors need help and support from their class teacher to run the breathing practices successfully.

- Take Five Ambassadors find their training sessions and practicing the breathing really important, and this helps them become better in their role.