Targeted Mental Health in Schools: Confidence-building among school staff as a latent systemic impact of the Cumbrian initiative

Paul K. Miller, Nicki Wilson, Alyson Dickson & Joanne C. Gaffney

Targeted Mental Health in Schools: Confidence-building among school staff as a latent systemic impact of the Cumbrian initiative

Paul K. Miller, Nicki Wilson, Alyson Dickson & Joanne C. Gaffney

Abstract
This paper reports findings from a qualitative evaluation of the Targeted Mental Health in Schools (henceforth TaMHS) programme in Cumbria. Utilising a grounded theory methodology, and thematically drawing on the social theory of Robert K. Merton, specifically addressed is a key 'latent' and highly positive impact of the initiative, which is the building of individual and collective confidence among school staff around the understanding, discussion, and handling of mental health issues in their student cohorts.

Keywords
confidence; intervention; learning; mental health; teaching; schools; youth

Introduction
As described in greater depth by Miller *et al.* (2013), the national TaMHS programme was initiated in 2008 "*to transform the way that mental health support is delivered to children aged 5 to 13, to improve their mental wellbeing and tackle problems more quickly*." (DCFS, 2008, p. ii). The programme, which was specifically tasked with enabling schools to deliver a more holistic approach to the promotion of children's mental wellbeing, was implemented in three phases. The Cumbrian initiative itself was part of Phase 3, beginning in 2010 and receiving funding from the Department of Children, Families and Schools for one year. A total of 18 Cumbrian schools, in three clusters, were involved, with each cluster including one secondary school and partner primary schools.

Central to the operation of the initiative was the secondment of mental health specialists to support each cluster of schools. These specialists were drawn from tier three Child and Adolescent Mental Health Services (CAMHS), and from the Local Authority, Children's Services, Educational Psychology and the Behaviour Support Team, and were tasked with training school staff, supporting parents, implicating group interventions, and working directly with young people. Miller *et al.* (2013, p. 42) summarise the day-to-day provision thusly:

Through the TaMHS project, all involved schools accessed cluster meetings, support from a Primary Mental Health Worker, Specialist HLTAs supporting schools in providing small group Social and Emotional Aspects of Learning (SEAL) and Family SEAL, mental health training and a mental health toolkit, including a mental health and emotional wellbeing policy and information on mental health and emotional wellbeing for students. Additionally, some schools accessed parenting workshops, counselling for staff, outdoor activities for young people, 'Stardom' projects or after school craft activities, and/or a whole school health day.

Manifest and latent impacts
In terms of desired impacts, the Cumbrian TaMHS set very specific goals in terms of 'system outcomes'. These are summarised from the proposal document (Cumbria County Council, 2010, p. 8) below:
1. *The establishment of improved systems and processes for early intervention and prevention in schools and their communities including, better interagency collaboration, joint workforce development and improved ability to measure outcomes for children and young people.*
2. *The increase in capacity and capability of schools and their support services*
3. *A contribution to the ongoing work across the partnership to develop more integrated*

pathways, specifications and performance frameworks.

It is helpful, at this stage, to draw upon Merton's (1949) distinction between 'manifest' and 'latent' systemic functions. Merton argues that, within any social system, actions and interventions are usually designed with intended manifest (i.e., intended) functions (i.e., impacts) in mind. The system itself can also benefit, however, from latent impacts that were not intended and/or foreseen, and/or can go unrecognised without careful analysis. Merton himself famously provides the anthropological example of a tribal rain dance which is manifestly designed to induce rain, but latently reinforces the group identity and promotes social integration by providing a regular activity around which the group meets. This is not to draw any direct equivalence between the TaMHS initiative and a rain dance, of course, given that rain dances are not hugely likely to actually produce rain, while all collected evidence indicates that TaMHS in Cumbria was highly successful in achieving its manifest systemic goals (Cumbria County Council, 2012). The salient point is, herein, that the intervention also produced distinctive and highly positive latent impacts that may not have been specified within the original aims, but were revealed by rigorous post-hoc qualitative research. This paper addresses one such latency, which is the impact on individual and group **confidence**.

Research design
With ethical approval and informed consent, qualitative data were collected via semi-structured interviews, which were conducted via telephone over a period of two weeks in 2011, immediately following the conclusion of the TaMHS initiative itself.

Participation selection
Participants (N = 30) were purposively selected from the three categories of professional involved in TaMHS implication in order to provide the most multifaceted overview possible: (a) school TaMHS leads (N = 13), (b) staff members at participating schools (N = 11) and (c) dedicated TaMHS workers (N = 6) (though evidence from the latter category is not addressed in the main analysis, given the

focus on how the initiative was experienced by recipients of the programme).

Research materials
Three interview schedules were developed (available from the corresponding author) one pertinent to each category of respondent. Interviews were organised around broad and open questions, with subsidiary topical 'prompts', permitting participants to voice both a range and depth of opinions (Fielding & Thomas, 2008). Moreover, this research strategy explicitly permits for the emergence of participant-driven novelties – or latencies – that may not have been predicted by the researcher, and therefore are unlikely to have been coded, *a priori*, into a quantitative instrument such as a questionnaire (Silverman, 2006). Interviews averaged approximately 20 mins in length.

Data analysis
Transcribed data were examined for patterns and themes in line with the core principles of Straussian Grounded Theory (Strauss & Corbin, 1998), a process conducted using Scientific Software's ATLAS.Ti 6.1 qualitative analysis package, which is highly apposite to this methodology (Lewins & Silver, 2007).

Results and discussion
The Cumbrian TaMHS project was manifestly focused on raising awareness of mental health issues among school staff and developing the skills to recognise when students are experiencing emotional distress, and to intervene and support when appropriate. A major crosscutting theme within the findings, however, relates to the rather less tangible issue of confidence-building. While there was a near-universally positive assessment of impacts on knowledge and skills, impressions of impact *level* varied, largely on account of many members of staff at participating schools asserting that knowledge and skill levels were high already. Respondents from both of the categories of participant addressed in this paper, however, recurrently reported an enhanced confidence among school staff in the *use* of knowledge and skills as a critical output of TaMHS involvement. This phenomenon manifested in six particular domains which are discussed below, with sample evidence provided to illustrate the key themes.

Impacts on staff confidence

Theme 1: Some participants explicitly highlighted that the function of TaMHS as a 'confirmer' of good knowledge was a major confidence boost.

Source	Sample Evidence
School TaMHS Lead #9	*"What it does is it reinforces your…instinct… which I think is really important because it gives people confidence."*
School Staff Member #13	*"[TaMHS has] confirmed what [we're] already doing and made [us] more confident, I think when, when working with young people."*

Theme 2: As evident in the second quotation above, this confidence manifested in greater optimism regarding current and prospective participant dealings not only with students, but also with the students' families. For example:

Source	Sample Evidence
School TaMHS Lead #2	*"[A] lot of parents perhaps, you know, having to go through that formal process of a referral, are put off by…especially when they see sort of 'mental health'… and that's a really big issue…but to have the professionals there that we could sort of tap into on the phone without having to have a referral and make a file on the child…was really beneficial to, to us all."*
School TaMHS Lead #5	*"[Getting] that confidence to talk to that young person. Or the confidence to pass it on, to signpost it, you know."*

Theme 3: School staff members also identified an enhanced self-assurance when discussing mental health issues openly with colleagues. This, in particular, was reported to engender a stronger shared sense of priorities.

Source	Sample Evidence
School TaMHS Lead #1	*"I think staff have maybe discussed more pupils with me than previously. I mean we are a very open staff so we do discuss…issues going on within our own classrooms…nobody is afraid to say 'oh this has happened, or that's happened'……but I think because of that heightened awareness they sort of brought it to me with a mental health eye on it."*
School TaMHS Lead #2	*"[Staff] come to me and say 'Look…I've got a problem this child is maintaining this, you know, level of heightened distress, if you like, about something or they keep saying this, or they're obviously bothered about that' for us to then intervene either with the parents or with a referral."*
School Staff Member #10	*"[O]ther staff, that I have spoken to, informally can, can [now] talk about this in a way that I probably wouldn't have expected them to talk about it… staff that I have spoken to are, are certainly talking about it more than they were."*

Theme 4: Working directly with TaMHS staff in practical sessions was reported to have direct impacts on staff confidence in their work with students.

Source	Sample Evidence
School Staff Member #9	*"[T]he site manager…didn't think he had the skills to do it. But we all thought that he did have the skills to do it; and [the dedicated TaMHS worker] was fantastic with him, she gave him the confidence…to carry on and do the whole group project…with the children."*

Theme 5: An improved confidence to *apply* knowledge to the issues of problem-recognition was a major theme raised by respondents, as illustrated below:

Source	Sample Evidence
School TaMHS Lead #1	*"I think it'll greatly help the staff in that…we can sort of see early indications…you hear mental health and you have all sorts of images in your mind but actually having these ideas pointed out to you, well, you know, we could be looking at emotional disorders, or it could be eating or…self-harming then…to have that set out of us was very good, because then we've got a baseline to be looking at, to be working from."*
School TaMHS Lead #11.	*"I think it's improved [the staff's] awareness. I think it's given them the confidence to be able to look more closely and being to think what factors maybe underlying…if a child presents in a negative way at school sometimes it's often easy just to see the behaviour rather than looking underneath and think well 'why is it they're doing that, what might be the underlying triggers?' So I think that's been a real strength. And it's also given them a confidence…to know [that]…it's not necessarily a negative reflection on the parents or on the adults working with them, it's just how a child's choosing express their need. And I think that's been quite helpful for some staff."*
School Staff Member #10	*"I think probably there are some very obvious signs of, of mental health issues emerging in young people which staff are probably, as being teachers and caring people and usually quite empathic probably…can pick up on quite quickly but I think there are some more…subtle signs which a TaMHS project may well have helped staff to pick up on."*
School Staff Member #11	*"[B]ecause we've done all of this training, we're all [now] watching for little things that may be a problem."*

Theme 6: Theme 5, regarding enhanced confidence to *recognise* problems, was itself seen as having corollary effects. Participants recurrently reported an increased readiness to (a) trust their own opinion when they suspect that something *is* wrong and, moreover, to (b) trust their own ability to do the right thing when taking action.
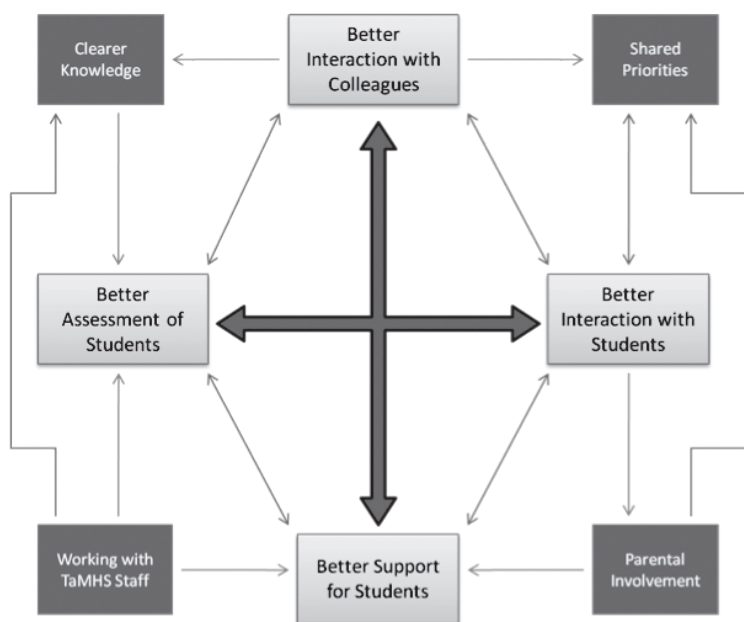
Source	Sample Evidence₁
School TaMHS Lead #4	*"I think [TaMHS has] alerted staff to the fact that things that we've dealt with in school should be flagged up to other agencies."*
School TaMHS Lead #8	*I think it's having the confidence...to know [the] child's got a problem and it's, it's the confidence of the staff to say 'right who do I need to go to?', you know 'do I need to get in touch with TaMHS?'*
School TaMHS Lead #9.	*"[I]t's helped. [T]here's been some new training, so new awareness...but also it will give [the staff] confidence, it will reassure them, they know there are materials there that they can get to support [the students]."*
School Staff Member #3	*"I think that the knowledge and understanding that the TaMHS project has brought in...I definitely think that it has helped to work better and more clearly with the children."*
School Staff Member #13	*"[It's] made [us] more confident I think when, when working with young people."*

Thematic integration

It is highly noteworthy that a majority of participants themselves made very explicit connections between the confidence-related themes identified above, often linking them to other strengths of the TaMHS initiative.

Figure 1, below, schematises the full range of ways in which these themes were linked by participants themselves. One should be mindful that this schematisation is one of the relationships between issues that were raised, not quantification thereof.

Figure 1: Network analysis of confidence impacts

When viewed in terms of the national picture, the results from the Cumbrian TaMHS indicate a particularly strong qualitative impact upon school staff confidence. Jeyasingham (2011, p. 3), for example, foregrounds some incidences where participants in Trafford have actively gained in this respect, but concludes more circumspectly regarding the overall impact of TaMHS consultations and contacts.

> *[They] have ensured good communication about children receiving support from TaMHS although there is less evidence that they have enabled school staff to develop confidence and skills in enabling children's emotional wellbeing more widely.*

In the Middlesbrough evaluation, meanwhile, Larkin (2011) finds extensive and compelling evidence regarding the positive impact of the local TaMHS initiative on the confidence of students in the participating schools, but data pertaining to such impacts on staff are far from pervasive within the report. The findings in Cumbria are, in this respect, more in line with those reported from North Somerset (Pye, Kleve & Hooper, 2011), wherein quantitative and qualitative findings register school staff as having gained enhanced *"confidence in improving child behaviour, child social skills as well as in identification and monitoring"* (p. 47).

Conclusion

The central issues raised by the findings generated in this paper are two-fold: one substantive and one methodological. Regarding the former, it is plainly evident that the Cumbrian TaMHS initiative had a very substantial positive impact on the confidence of school staff in the business of identifying, and working with, mental health matters pertinent to their charges. There was, however, a further group of mutually reflexive and more nuanced impacts in the confidence domain. Participants reported that TaMHS was a strong 'confirmer' of good knowledge already held; that it generated optimism regarding current and prospective participant dealings with students and parents; that it enhanced self-assurance when discussing mental health issues openly with colleagues; that it helped school staff overcome trepidation regarding their own skill sets. These are all demonstrable successes, if not necessarily predictable ones. It is, however, very difficult to foreground such *latencies* of an intervention unless they are systematically identified in the first place. This leads to the second issue to address.

For all of the huge value of quantitative designs in robustly measuring the manifest impacts of a healthcare initiative, their efficacy in identifying the 'unexpected' – the latent – is rather weak (Silverman, 1997). As Aaron V. Cicourel (1964) notes in his seminal work on social scientific method, pre-categorised quantitative instruments are only as good as the imagination of the researcher; in short, statistical results can – by and large – only reflect socio-structural arrangements assumed within the tools of measurement. Methodologically speaking, the use of *a priori* analytic categories mandates that nuanced features of the participants' own complex experiences of an intervention such as TaMHS are often reduced to ticking a box (Silverman, 1994; 1997). This deflects attention from the complex ways in which the phenomenon of interest might be meaningful to the persons actually involved in it. Systematic interpretative work, on the other hand, facilitates participant voice and illuminates potentially unforeseen successes to celebrate, and problems to learn from. Moreover, it provides a means by which our future manifest aims might be adjusted using something rather more robust than assumption. In these terms, the analysis above reminds us dually of the effectiveness of the Cumbrian TaMHS initiative, and also the importance of sustaining engagement with strong qualitative components in evaluations of future initiatives, in order to comprehensively elucidate the full range of their real-world impacts.

Acknowledgement

Affiliations

Dr Paul K. Miller & Alyson Dickson, Faculty of Health & Science, University of Cumbria
Nicki Wilson, Senior EU Health Specialist to the North of England EU Health Partnership
Joanne C. Gaffney, Children's Services, Cumbria County Council

Contact information
Dr Paul K. Miller, paul.miller@cumbria.ac.uk

References

Cicourel, A.V. (1964). *Method and measurement in sociology.* New York: Free Press.

Cumbria County Council. (2010). *Targeted Mental Health in Schools (v2 27.1.10): Cumbria 2010–*

2011. Cumbria: Cumbria County Council/Cumbria Partnership NHS Trust.

Cumbria County Council. (2012). *Targeted Mental Health in Schools programme in Cumbria: 2010–2011 TaMHS Final Report.* Cumbria: Cumbria County Council.

DCFS. (2008). *Targeted Mental Health in Schools project. Using the evidence to inform your approach: A practical guide for headteachers and commissioners.* (No. 9781847752475). Nottingham: Department for Children, Schools and Families.

Fielding, N. & Thomas, H. (2008). Qualitative interviewing. In N. Gilbert (Ed.), *Researching social life* (3rd ed., pp. 245–265). London: Sage.

Jeyasingham, D. (2011). *Evaluation of Trafford children and young people. Service Targeted Mental Health in Schools project.* Manchester: Trafford Council.

Larkin, R. (2011). *Targeted Mental Health in Schools project (TaMHS). Local project evaluation: Middlesbrough.* Middlesbrough: Middlesbrough Council.

Lewins, A. & Silver, C. (2007). *Using software in qualitative research: A step-by-step guide.* London: Sage.

Merton, R.K. (1949). *Social theory and social structure.* New York: Free Press.

Miller, P.K., Wilson, N., Dickson, A. & Gaffney, J.C. (2013). Implication pitfalls for Targeted Mental Health in Schools: Evidence from a qualitative evaluation of the Cumbrian programme. *Cumbria Partnership Journal of Research, Practice and Learning, 3*(1), 41–46.

Pye, M., Kleve, O. & Hooper, B. (2011). *Targeted Mental Health in Schools (TaMHS): North Somerset April 2010 - April 2011. Final evaluation.* Somerset: North Somerset TaMHS programme.

Silverman, D. (1994). Analyzing naturally-occurring data on AIDS counselling: Some methodological and practical issues. In M. Boulton (Ed.)*, Challenge and Innovation: Methodological Advances in Social Research on HIV/AIDS* (pp. 69–93). London: Falmer Press.

Silverman, D. (1997). *Discourses of counselling: HIV counselling as social interaction.* London: Sage.

Silverman, D. (2006). *Interpreting qualitative data: Methods for analysing talk, text and interaction* (3rd ed.). London: Sage.

Strauss, A. & Corbin, J.M. (1998). *Basics of qualitative research: Techniques and procedures for developing grounded theory* (2nd ed.). London: Sage.