A curriculum for
wellbeing

Improving all aspects of
wellbeing in curricula & schools

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EDITOR

VICTORIA PUGH

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The British Educational Research Association (BERA) is the home of educational research in the United Kingdom. We are a membership association committed to advancing knowledge of education by sustaining a strong and high quality educational research community.

Together with our members, BERA is working to:

- advance research quality
- build research capacity
- foster research engagement.

Since its inception in 1974, BERA has expanded into an internationally renowned association with both UK and non-UK based members. It strives to be inclusive of the diversity of educational research and scholarship, and welcomes members from a wide range of disciplinary backgrounds, theoretical orientations, methodological approaches, sectoral interests and institutional affiliations. It also encourages the development of productive relationships with other associations within and beyond the UK.

Aspiring to be the home of all educational researchers in the UK, BERA provides opportunities for everyone active in this field to contribute through its portfolio of distinguished publications, its world-class conference and other events, and its active peer community organised around 35 special interest groups.

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The British Curriculum Forum (BCF) aims to bring together all those with an interest in collaborative curriculum, research and development.

Through events, awards and grants the BCF supports communication and collaboration in the study and practical implementation of the curriculum in schools, colleges and wider educational settings. Connecting schools, colleges, universities and others, its work promotes the study of theoretical, innovative and practical aspects of the curriculum, drawing on a rich history spanning more than 40 years, and continuing the tradition of research and development founded by Lawrence Stenhouse.

The British Curriculum Forum is the successor to the British Curriculum Foundation, which was incorporated into BERA in 2014. The BCF has been in existence for over 40 years (and was previously known as the Association for the Study of Curriculum).

The BCF aims to:

- promote the study of theoretical, innovative and practical aspects of the curriculum
- provide an authoritative medium through which the opinions of teachers and others may be expressed on matters of the curriculum
- provide means of communication among all those concerned with the study of the curriculum and/or its practical implementation
- enable BERA to connect with schools
- enable practitioners to engage with research.

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Editorial

A curriculum for wellbeing

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The British Curriculum Forum's Curriculum for Wellbeing event was due to take place at the Sarah Bonnell School, London, on 14 March 2020. Its was to bring together practitioners, teacher educators, charities and other professionals to explore how pupil wellbeing can be incorporated into curriculum development. However, the Covid-19 pandemic made a face-to-face event impossible. Colleagues who were due to speak at the event instead recorded their presentations as a series of videos that is now available on the BERA website[1] – an approach that proved very successful. Many of those presenters have contributed summaries of their presentations to this report.

2020 has certainly given us all a lot to think about, and education in all its forms has had to adapt, re-adapt and adapt again to meet the needs of pupils, staff and policy in challenging times. Now more than ever, wellbeing should be a priority within our curricula and schools. This collection brings together a range of perspectives on a number of aspects of wellbeing – from mental health to identity and curriculum subjects – and highlights how these can inform a curriculum for wellbeing.

Jonathan Glazzard and **Samuel Stones** explore the reasons behind mental ill-health among school pupils, and set out both what a curriculum for mental health might look like and how it can be created. They highlight the worrying statistics on mental ill-health among pupils and the stigma that often surrounds it, with particular reference to vulnerable groups. They conclude by stressing the importance of partnerships when developing an age-appropriate mental health curriculum to support pupils.

Michael Eggleton presents a case study of the research-informed approach to social and emotional learning called RULER. He outlines the benefits of RULER when adopted alongside a trauma-informed approach to teaching and learning: both approaches can help to develop pupils' emotional literacy and articulations of

emotion, as well as emotional regulation. Michael also discusses the adaptations that his school made in order to continue this work through the period of remote learning necessitated by the Covid-19 crisis.

Michelle Jayman explores the need for whole-school approaches to supporting the mental health of both pupils and staff. She draws on current research to consider the ways in which the Covid-19 pandemic may have affected pupils and their mental health, and discusses the role that schools can play in supporting mental health despite the challenges and limitations that leaders and schools may be facing.

In their article looking at outdoor education **Tracy Hayes** and **Mark Leather** provide insight into the need for society to consider the wellbeing of both people and the environment. As members of BERA's Nature, Outdoor Learning and Play (Nolap) special interest group, the authors encourage readers to consider inequalities in access to public green spaces, particularly during the Covid-19 pandemic. They urge readers to explore playful pedagogies, and to challenge and question traditional approaches.

Branwen Bingle and **Rachael Bullingham** share their research on the interplay between the professional and personal lives of lesbian and gay teachers, highlighting the importance of a sense of belonging and acceptance to staff wellbeing. They conclude with the hope that we can create a culture of openness and inclusiveness within education so that all staff members can thrive.

Finally, **my own article** on the role of personal, social, health and economic (PSHE) education in developing relationships and wellbeing posits that in order for pupils to thrive schools must adopt a strong PSHE curriculum that meets the needs of its pupils and community. I explore the statutory requirements of relationships and sex education in primary schools as an element of PSHE, the use of inclusive resources and the importance of parent/carer and community partnerships in supporting quality PSHE education for all.

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1   See https://www.bera.ac.uk/a-curriculum-for-wellbeing

1. A mental health curriculum for schools

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1.1 INTRODUCTION

Back in 2017, the UK government published its five-year strategy for mental health in the green paper, *Transforming Children and Young People's Mental Health Provision* (DHSC & DfE, 2017). This was an exciting publication because it indicated the government's commitment to addressing the mental health 'crisis' in children and young people. The prime minister at the time, Theresa May, had referred to the problem of children's mental health as 'one of the burning injustices of our time' (DHSC & DfE, 2017, p. 3), and the green paper was an attempt to correct this.

Statistics suggest that approximately 850,000 children and young people in the UK — around 1 in 10 — have a clinically diagnosable mental health need (DHSC & DfE, 2017, p. 6). The prevalence of mental ill-health increases as children move into adolescence, and it is more common among boys than girls (DHSC & DfE, 2017, p. 6). Evidence suggests that young people who are living in care, those who are not engaged in education, employment or training and those who are lesbian, gay, bisexual and trans are at increased risk of developing mental ill-health (DHSC & DfE, 2017, p.7).

In this context, our presentation[2] sought to address the following questions.

- What are the causes of mental ill health in children and young people?
- What might a school curriculum for mental health look like?
- What is meant by an age-appropriate mental health curriculum?

1.2 WHAT ARE THE CAUSES OF MENTAL ILL-HEALTH IN CHILDREN AND YOUNG PEOPLE?

Multiple factors contribute to poor mental health in children and adolescents. Mental health is a component of overall health, but the interrelationship between biological, social and psychological factors can result in poor mental health (Engel, 1980). Children with disabilities are more likely to experience mental ill-health (DHSE & DfE, 2017). Risk factors are also present in schools, homes and communities (Glazzard, 2019). Social deprivation is associated with mental ill-health (Mental Health Foundation, 2016), and children who experience parental conflict and abuse are also at greater risk (House of Commons, 2018). There is a link between examination-related stress and specific mental health needs, including anxiety and depression (House of Commons, 2018). Additionally, the narrowing of the curriculum in secondary schools in recent years is also a contributory factor (House of Commons, 2018), as is bullying both online and in schools (Bradlow et al., 2017).

1.3 MENTAL HEALTH IN THE SCHOOL CURRICULUM

The education inspection framework for schools (Ofsted, 2019) requires schools to provide children and young people with a curriculum that supports them to be mentally healthy. Although this is generally unproblematic in secondary schools, research suggests that primary school teachers are more reluctant to use the term 'mental health', and instead demonstrate a preference for softer language such as 'feelings' and 'emotions'. This certainly suggests that in some primary schools the term 'mental health' is indeed the elephant in the room.

Attempts to eradicate the stigma associated with mental health are almost certainly undermined if negative associations are ascribed to the terminology. The term 'mental health' is not something that children need to be protected from. Children need to understand the difference between physical and mental health and the interrelationship between the two. Negative associations with the terminology are dangerous and can result in further stigmatisation of mental health.

Providing all children with an age-appropriate mental health curriculum is important because it develops their mental health literacy and can potentially change attitudes towards mental health. The curriculum should enable children to name and regulate their emotions and provide them with a range of strategies to help them manage their mental health. It should also both provide them with guidance on where and how to seek help and, through developing innovative approaches to student partnership, empower them to lead on this aspect of the curriculum.

1.4 AN AGE-APPROPRIATE MENTAL HEALTH CURRICULUM

Schools will need to plan an age-appropriate mental health curriculum that supports progression in knowledge, skills and understanding across childhood. Decisions will need to be taken in relation to when it is appropriate to introduce young people to specific mental health conditions, including anxiety, depression, eating disorders, addiction and self-harm. Schools will also need to plan an age-appropriate digital curriculum that introduces pupils to the benefits and risks associated with internet use and fosters the development of digital citizenship, digital literacy and digital resilience. Adolescence can be a particularly difficult time for young people due to biological, social and psychological transitions, and secondary schools will therefore need to address these specific issues at the points at which young people are beginning to experience them. Younger children in primary schools need to develop both emotional and social literacy and regulation skills.

1.5 CONCLUSION

In this brief paper we have argued that all children need an age-appropriate mental health curriculum that develops their mental health literacy and fosters positive attitudes in relation to mental health.

Furthermore, we suggest that this curriculum should be developed in partnership with young people, parents and the wider community, including local charities and other organisations. It should be tailored to address specific community issues as well as providing young people with a broad knowledge of mental health. Given that most people will experience mental ill-health at some point during their lives, this is a crucial aspect of the curriculum which cannot be left to chance.

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2. Emotions matter

Building emotional intelligence in children

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As a school we were aware that PE lessons help children to be physically fit. But what do schools have in place to make sure children are mentally well? As a school we relied on external services to support wellbeing. Why was this? Was it because we didn't feel sufficiently skilled to support the mental health and wellbeing of our pupils?

Around five years ago when I was appointed as deputy headteacher with responsibility for pastoral care, I made the decision to level the playing field for all and ensure that everyone's mental health was supported.

Sadly, I had no idea how to get started! Each week, my work email would be spammed with regular mail from companies claiming to have the answers for whole-school wellbeing and improved mental health. Most looked great, but when I dug a little deeper I found that their evidence bases were very limited. Was there anything out there that was proven to improve the mental health and wellbeing of pupils? Were there any longitudinal studies that would help inform my decision concerning where to start?

During the spring term of 2015, I read about an evidence-based approach called RULER in the *New Scientist*. At the time, RULER had been around for over 25 years and extensive longitudinal studies have demonstrated its impact in thousands of schools across the US. It was created by a team of psychologists led by Dr Marc Brackett from Yale University. The studies show that the RULER approach helps improve pupils' emotional intelligence, reduces anxiety, reduces the likelihood of children developing mental health problems, improves attainment and reduces burnout and stress among staff, as well as reducing the likelihood of pupil getting into trouble with the police. RULER is now used in primary, secondary and further educational establishments, and even businesses, in the US.

The approach is underpinned by the vigorous and explicit teaching of emotional vocabulary: children are frequently taught to unpick how they are feeling, and to use a bank of strategies to regulate their emotions in the short term while also employing longer-term strategies to support happiness. RULER involves four core tools that help children regulate and understand their emotions. However, a single tool or theory is not expected to support every child: rather, it requires an understanding that each child is unique and that a range of tools will often be necessarily in order to help them regulate their emotions.

- The first tool is called the **charter**. This involves children creating a whole-class or -school agreement concerning how they wish to feel each day: for example, the children may want to feel listened to, respected, happy, safe, and so on. Having settled that, you can then agree ways in which all children can help to make this a reality. Finally, what will you do if someone doesn't live up to the charter? The children are encouraged to demonstrate forgiveness, but also means by which they can hold others to account. The aim is to create a climate of respect, and to really show that feelings do matter.

- The next tool is the **mood meter**. Its y-axis represents energy levels and its x axis the pleasantness of the emotion. Children are taught to plot their emotions on the mood meter, in full knowledge that there is no such thing as a negative emotion. The teacher then spends time using a language progression scheme to teach the individual emotions. Research has found that children have very few words to describe their emotions, and rely on obvious words to describe more complex emotions. As a result, children can't begin to regulate their emotions and can't describe those emotions in order to access appropriate support. If you can name it, you can tame it!

- The third tool is **meta moments**. During this stage children are taught a memorable routine to help them stay calm when things don't go right which gives them

the ability to use a regulation strategy. The children are also taught the science behind the emotion that they are feeling. Throughout the meta moment sessions children are regularly taught a range of strategies to regulate their emotions, which can include scaling, positive self-talk, mindfulness and much more.

- Lastly, if something does go wrong, how do you fix it? Children are taught a RULER version of restorative justice called the **blueprint**, through which they reflect on their own emotions and ability to regulate while developing empathy.

In our trial of RULER we have found that tweaks have been needed to be made in order to make it more user-friendly in UK schools, such as changing some of the taught language. As a school we have created a scheme of work, a language progression list, assessments and booklets for the children that are used during lessons. The booklets include proven long-term strategies to support happiness. This means that staff, regardless of their own backgrounds or teaching training, can teach social and emotional lessons to a high standard. Our language progression list is relatively short but is systemic throughout the school. The emphasis is on teaching a handful of words, and the subtle distinctions between them, really well each year. Our intention is that by the time children leave our school in year 6 they are adept at using a range of emotional vocabulary to describe how they are feeling.

During lockdown (summer term 2020) we turned our emotional language lessons into animations so that children could easily learn new vocabulary from the comfort of their own homes. Many schools across the country have now begun to use our animations, having realised that their pupils' emotional language was quite weak and that it was more urgent than ever before to support their mental health. This improved emotional vocabulary, along with being trauma-informed, proved vital as we supported children to return to school.

Since introducing RULER, we have noticed a huge reduction in the number of CAMHS[3] referrals from our school. Children can articulate and accurately describe their emotions, there are fewer barriers to learning within the classroom, and behaviour has improved substantially. Above all, children now know how to regulate their emotions and how to live healthier and happier lives. As teachers and staff we feel we know the children far better than we did before, and we now have solid strategies for helping children improve their wellbeing.

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3   Child and Adolescent Mental Health Services, the local services within the National Health Service that assess and treat emotional, behavioural and mental health difficulties among young people.

FURTHER READING

To find out more about RULER see the material published by the Yale Centre for Emotional Intelligence (ycei.org).

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3. Children's mental health is everyone's business

Making sense of roles, responsibilities & boundaries for schools

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3.1 CHILDREN'S MENTAL HEALTH: A SNAPSHOT

Pre-Covid-19, children and young people's (CYP's) mental health was already a major public health concern. National figures for England showed that 11.2 per cent of 5–15-year-olds had a clinically diagnosable mental health disorder; emotional difficulties, in particular, were on the rise (Sadler et al., 2018). Because accurate data on the number of CYP with pre-diagnosable, lower-level needs are not available, these figures showed only part of the picture, with other evidence suggesting that children's subjective wellbeing was in decline (Children's Society, 2019). The Covid-19 pandemic undoubtedly has had and is having a significant impact on the mental wellbeing of CYP, who are faced with the same uncertainty and instability as the rest of us but with their own unique challenges brought about by sudden school closures and austere lockdown measures. A study by the Childhood Trust (2020) highlighted the fact that CYP are reporting higher instances of depression, anxiety and loneliness compared to older age groups, and are particularly worried about their future schooling and transitions. A systematic review (Loades et al., 2020) concluded that the current crisis is likely to have a lasting impact across multiple areas of CYP's lives, and is expected to contribute to further negative psychological outcomes. As we continue to adjust to the 'new normal' of a radically changed day-to-day life, supporting mental wellbeing for *all* must be prioritised if we are to manage the myriad and profound challenges ahead.

3.2 THE ROLE OF SCHOOLS IN SUPPORTING CYP'S MENTAL WELLBEING

Before the pandemic, the pivotal role of schools in supporting CYP's mental wellbeing had been well established. A report from the children's commissioner for England (2019) called for greater attention to be paid to preventative approaches and early intervention. This echoed earlier proposals outlined in the government's green paper (DHSC & DfE, 2017) and embedded in the new relationships and sex education and health education curriculum (DfE, 2019) which includes mental health as a compulsory component. It was anticipated that extending provision in schools would ease the burden on overstretched specialist services that were failing to provide timely and appropriate support for those in need. Now more than ever, CYP require swift access to mental wellbeing support wherever it is available. There are several sound reasons for singling out schools as the ideal settings for mental health support: the majority of children attend school, and it is estimated that they spend over 7,800 hours there over the course of their education (OECD, 2014); staff know pupils well and can recognise when they are experiencing difficulties, while early support reduces the need for more intensive intervention later on. Many CYP, particularly those with limited access to technology, have faced barriers to accessing help during lockdown, with schools closed and services transitioning to digital delivery. Schools are often a safe haven for CYP experiencing difficulties and, as a result of the pandemic, there are now likely to be more pupils struggling with their mental health for the first time.

3.3 STAFF WELLBEING

While undoubtedly children's mental health is everyone's concern, school staff who encounter pupils in need of support should feel confident and well-equipped to respond. However, there is a body of evidence that suggests this is not the case. Research by Education Support (2019) revealed that staff were often overwhelmed by their workload, with 78 per cent of all education professionals having experienced behavioural, psychological or physical symptoms due to work stresses. Moreover, a culture of presenteeism is evident, in which teachers continue to work despite ill-health due to unspoken pressure not to take time off. A Health and Safety Executive survey (2018) found that the rate of work-related stress, depression and anxiety reported by education staff was among the highest across all occupations in Britain. Returning to school post-lockdown, teachers and others working in education are facing unprecedented challenges, and their own mental wellbeing must be supported if they are to function effectively and if schools are to remain a lynchpin of mental health provision for CYP.

3.4 WHOLE-SCHOOL APPROACHES AND THE 'NEW NORMAL'

Greenfield's model of teacher resilience (2015) identifies three dimensions to consider with respect to challenging environmental factors:

- relationships (for example, support from colleagues, leaders, and family and friends)
- beliefs (such as hope, purpose and self-belief)
- actions (such as problem-solving and reflection).

A number of authors have cautioned that notions of resilience can, inadvertently or otherwise, place a burden on the individual (see for example Luthar & Cicchetti, 2000). Nonetheless, Greenfield's dimensions are inextricably tied to the environment and culture in which we work, and responsibility for mental wellbeing should be embedded within effective whole-school approaches. Such approaches prioritise mental wellbeing for all and recognise the need for clear systems and processes which ensure that staff have explicit responsibilities and boundaries, and feel supported. According to the Department for Education (DfE) (2018, p. 5):

School staff cannot act as mental health experts and should not try to diagnose conditions. However, they should ensure they have clear systems and processes in place for identifying possible mental health problems, including routes to escalate and clear referral and accountability systems.

Inevitably there are challenges associated with implementing and sustaining whole-school approaches. Securing 'buy in' from all stakeholders is essential, and school leaders play an essential role in achieving this. Effective approaches require commitment, and there is the risk of key messages being vague or becoming diluted over time. In the current climate, school leaders are urged to put kindness, dignity and wellbeing at the heart of their institutions – to allow pupils to connect with adults and ensure staff are effectively supported (Mental Health Foundation, 2020).

As the pandemic persists and education professionals continue to navigate unchartered waters, the DfE has embarked on several mental health initiatives. For example, the Wellbeing for Education Return programme (Speck, 2020) has injected much-needed funding for schools and colleges. Part of this funding will be used to recruit local experts to train nominated staff to support CYP's wellbeing and resilience and provide advice to school leaders. Furthermore, the DfE announced a pilot project with Education Support which aims to address staff mental wellbeing, providing online peer-support and telephone supervision from experts. The DfE's pledge to develop a wellbeing charter for the teaching sector (Dickens, 2020) is a welcome step towards universal whole-school approaches. The charter aims to create an open, stigma-free culture around mental health, and will include commitments from the government to regularly measure staff wellbeing, and to embed this into training, guidance and policy. Researchers concerned with mental wellbeing and education have an important role to play in monitoring and assessing evolving strategies and responses, and ensuring that new practice is informed by robust, evidence-based research.

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4. More than fun & games

The serious side to outdoor education

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4.1 INTRODUCTION

BERA's Nature, Outdoor Learning and Play (Nolap) special interest group (SIG) provides a focus for the wealth of outdoor learning research taking place in the UK and beyond. We encourage critical debate from methodological, philosophical, political, creative and educational perspectives by creating a forum for academics, practitioners and students to engage critically in debates around nature, learning and play in outdoor settings. Nature, outdoor learning and play is about much more than fun and games (although these are important): it has a serious side that is concerned with enabling us to explore some of the most pressing problems facing the world and find positive ways for humans to coexist with the more-than-human world in a more sustainable way. Playful, nature-based activities provide ways of learning about the outside world and understanding our place within it, and enabling the development of positive relationships with nature, other people and ourselves (Leather et al., 2020; Hayes, 2016, 2017). Outdoor practice actively seeks to help make these connections with nature, in natural places, to generate an ethic of care, from the local to the global.

4.2 A CURRICULUM FOR WELLBEING, THE NOLAP WAY

There are concerns around contemporary issues such as obesity, poor mental health, and lack of engagement with and poor understanding of the natural world. We cannot ignore that the environment is under threat from the things we do, and the way we do them. We argue that a curriculum for wellbeing needs to provide effective ways of addressing concerns about the health and wellbeing of both people and the environment. The Department for Environment, Food and Rural Affairs' 25-year plan (2018) is clear that our approach to healthy (or otherwise) lifestyles is shaped by our early experiences and the environment around us. We

therefore need to reflect on our own experiences and consider how they impact on our practice and on the way we design and teach a curriculum for wellbeing. And we need to challenge ourselves to consider different ways of doing things, because what we have been doing, the way we have been doing it, hasn't worked — the pandemic has highlighted that.

Nature has never seemed as vital as it does today as we live through the Covid-19 crisis. It has been noticeable over the last months, as we adjust and attempt to plan a for new normal (whatever that may be), just how important it is for our health and wellbeing to have access to a local outdoor space (see Natural England, 2020). There are many studies that show how being outside can benefit your health (see for example White et al., 2019), whether it involves bird-watching, walking or simply eating lunch in the garden. And there are many initiatives encouraging us to make the most of nature on our doorstep and in our gardens, parks and local green spaces. For many (including ourselves), nature 'has become our sanctuary', somewhere that offers solace and healing (National Geographic, 2020). However, the pandemic has also highlighted the disparities between those who are fortunate to have private outdoor spaces (gardens and allotments) and/ or access to nearby accessible greenspaces and those who do not, and the impact of the pandemic is felt by outdoor educators around the world (Quay et al., 2020).

We are witnessing extremes of inequality that show how access to good quality green space is a social justice issue. The closure of parks disproportionately impacts Black, Asian and minority ethnic and poorer communities who have less access to shared spaces or private gardens. With the additional closure of and restricted access to many school grounds, first schools, community gardens and city farm parks, there are limited options for many people. People are also reporting reluctance to access outdoor spaces due to concerns about contracting or spreading the virus, and/ or breaking the guidelines on what is allowed (Natural

England, 2020). As a result, much of the outdoor learning sector has been devastated, with staff furloughed and centres closed. They will need support to recover.

The Institute for Outdoor Learning has highlighted how difficult these times are, and the significant changes that the virus is causing. It is seeking to ensure that UK and home nation governments are aware of, and fully consider, the impact that Covid-19 and the associated government guidance is having (IOL, 2020). While the current situation is a troubling one that we, as educators and researchers, must address, we also need to maintain our focus on the other pressing problems facing the world: not just the global pandemic, but climate change and biodiversity loss. We need to find positive ways for humans to coexist with non-humans more sustainably, and we suggest that viewing outdoor learning through a 'place responsive' lens can help shift our perspectives (Leather & Thorsteinsson, in press).

4.3 LOOKING FORWARD WITH HOPE

In the Nolap SIG's current work we are exploring how we can shift perspectives on nature through pedagogical practices.4 We are asking critical questions around how we can combine science- and arts-based approaches in order to shift perspectives away from a human-centred view of the world to one that views humans as only one thread in the web of life. We will be offering evidence-based suggestions for incorporating this into teaching practice, with the aim of positively affecting societal and environmental change. Within this, we focus on inclusion – on how we can effectively support children, young people and adults with range of differing abilities and opportunities to access their local outdoor spaces (Hayes et al., 2016).

We must find ways to make nature more accessible to everyone, through local and national policies and educational initiatives, and perhaps by reframing how we conceptualise 'nature' (Leather & Gibson, 2019). We need to invest in 'ways of encouraging and creating better quality green space amidst our urban landscapes' (Friends of the Earth, 2020). With the gradual reopening of educational places, outdoor spaces will be vital and we therefore need to consider how best to do this in a considered and mindful way that acknowledges the needs of the environment as well as people. We are interested in playful pedagogies that challenge traditional, more conventional,

pedagogies, and which contribute positively to a range of improved health and educational outcomes for

students and educators. We welcome your thoughts on how best to do this, and hope that you will join us.

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5. The importance of being

Exploring the interplay between personal & professional identity for lesbian & gay teachers

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5.1 INTRODUCTION & BACKGROUND

In 2016 the authors undertook a small-scale project examining the experiences of 12 self-selecting gay and lesbian teachers working in primary and secondary schools in England. The project aimed to give voice to individuals' lived experience as educators identifying as 'out' in the workplace.

In the UK we have the right, under law, to be protected from discrimination (Equality Act, 2010). The Stonewall *School Report* showed that while anti-LGBT bullying and language had decreased across Britain's schools since the previous survey in 2012, almost half of all LGBT pupils still face bullying at school for their sexual orientation (Bradlow et al., 2017). Homophobic bullying does not just affect LGBT pupils: anyone can be the victim of this kind of persecution. It was clear during the protests against the delivery of the No Outsiders project in Birmingham primary schools in summer 2019, for instance, that homophobia impacts upon the wellbeing of teaching staff and pupils, regardless of sexual orientation (I Am BHAM, 2019). By giving lesbian and gay teachers the chance to talk about their individual circumstances, we hope to help improve the situation for all.

We know that poor mental health among lesbian, gay and bisexual people is often linked to experiences of homophobic discrimination and bullying, and in light of this we wanted to explore the culture in UK schools. Schools as working environments for LGBT teachers in the UK have only been partially examined: Edwards, Brown and Smith (2016, p. 3) identify 'understanding the lived experiences of lesbian and gay teachers working in schools following the abolition of Section 28' as a knowledge gap. In this way we hope to expand the evidence base for open and inclusive environments for teachers — particularly in the primary sector, where very little research has been done — to provide positive models of practice.

5.2 RESEARCH OVERVIEW

Our study sought to examine whether the decline in homophobia witnessed in the years since the cultural apex of 1986–1987 (Anderson et al., 2016) has impacted on teachers' lived experiences within UK schools. We wanted to know if being open about their sexuality, rather than working in a context of silence, affected their experiences in terms of their teaching and/or the behaviour of colleagues and pupils. We called for openly lesbian and gay participants teaching in primary and secondary schools to take part in semi-structured telephone interviews in order to answer questions about their experiences with staff, senior leaders and pupils in school settings.

Participants came from a range of settings and contexts across all compulsory phases of education and various parts of the UK. All were asked questions about their:

- demographic and professional background
- individual perceptions of openness or being out
- working environment
- relationships with colleagues
- students' behaviour.

From the interviews we produced 12 transcripts which were then analysed using reflexive thematic analysis. For the purposes of this article we reflected on elements that related to health, wellbeing and resilience, in recognition of the fact that discrimination affects these and often, consequently, our life chances.

5.3 FINDINGS

The responses that were most positive in terms of participants' overall mental and social health were those from the secondary sector, which were more likely to describe 'being open' as meaning that staff and pupils were aware of their sexual orientation; there were also several references to pupils acknowledging their own

sexuality in response. One participant who was a primary teacher was also able to reflect, 'I've just realised that there is a lot of support and my experience has been acceptance from everyone'.

The positive discussions overwhelmingly centred on being able to speak openly about home lives and families in the same way as heterosexual colleagues did, whereas the more negative anecdotes focused on the 'revelation' of sexual orientation in a culture of silence. For some, the initial silence was prompted by witnessing the hostility displayed by colleagues and senior leaders towards the lesbian and gay community in general. Even where there was no outward hostility to the individual there were accounts of the use of the word 'gay' in a derogatory way, or asking, 'Why are we doing all this gay stuff at school?', indicating the presence of homophobic views among colleagues and/or pupils.

In terms of wellbeing, where the participant felt there was an overall sense of acceptance and a positive workplace culture, health and wellbeing went hand-in-hand. However, throughout the transcripts the dominant narrative was of the need to protect others' wellbeing by not challenging their views aggressively, or sometimes even at all, which placed a strain on the respondents as they policed their language in order to fit in. However, it wasn't all negative by any means: many reported incidents in which the culture of openness allowed them or others to deal supportively with emotional situations linked to relationships and/or sexual orientation.

Although 10 of the 12 participants mentioned their awareness of homophobic behaviour, and either restricted their own behaviours to avoid it or else directly experienced it in the workplace, seven also reported that they didn't feel they had ever experienced it directly. All participants could identify examples of support from colleagues, and all but one identified receiving support from management.

Resilience, or the ability to recover from difficulties associated with homophobia or conforming in a tolerant rather than open environment, was most often seen in terms of response to language. Participants detailed incidents of homophobic language being used in relation to them, or directly to them, by colleagues and pupils. While some staff used such language in the context of inappropriate jokes or naïve attempts to negate the lesbian and gay experience, pupils tended to use homophobic expressions in response to being told off or as a way of insulting their peers. Several participants discussed the confidence that they had to challenge overt and covert homophobia among colleagues and pupils. Often their level of confidence in doing so was

linked to personal definitions of being out, and how open they were about discussing themselves personally.

Preliminary conclusions from our study indicate that teachers are experiencing the shift from hostility to openness and inclusivity that legislation in the UK demands. However, there remains a great deal of variation between individual settings, and a pervading sense of reverse relative deprivation: many of our participants still saw surviving a low level of abuse as a successful outcome rather than expecting to thrive as lesbian and gay teachers.

5.4 CONCLUSION

If we are to have a curriculum for the wellbeing of everyone, we all need to work towards a culture of openness and inclusivity for our current cohorts. This means not relying on lesbian and gay teachers to develop the health, wellbeing and resilience required to act as trailblazers: while these teachers' visibility is important, all staff have the potential to be allies who are discernibly supportive rather than quietly tolerant.

In efforts to realise that potential, we can draw clear parallels between teaching and other environments that could help us better frame our understanding moving forward. In relation to sport, for example, Griffin (1998) offers us a taxonomy of climates affecting lesbian and gay athletes over time, with sociocultural attitudes evolving from the hostility of the 1980s, through a period of conditional tolerance, to a more contemporary era of openness and inclusivity. This taxonomy has been used to inform research into the experience of PE teachers within the last five years, which found that teachers were still guarded about their private lives in professional settings, choosing silence about their sexual orientations as a coping mechanism in hostile environments (Edwards et al., 2016). This echoes the findings of Fahie (2016), who concluded that LGBT teachers were less likely to challenge homophobic behaviour within the school environment because of tensions between religious values and legislated rights.

Thus, true inclusivity does not yet appear to be fully embedded for our lesbian and gay teachers: what is required now is a fully research-informed workplace culture that celebrates openness. Genuine acceptance allow each of us to be ourselves, as one of our participants made clear.

> *...[I]t hasn't been an issue at all. No, not at all. If anything I suppose it's... as my mum would say, 'now I can get to know the real person'.*

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6. PSHE guidance for relationship development in primary schools

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6.1 INTRODUCTION & BACKGROUND

There can be no doubt that relationships form an important part of children's lives, and this has certainly been highlighted during the Covid-19 pandemic. This summary will consider the ways in which a strong personal, social, health and economic (PSHE) education curriculum can support relationships development and wellbeing within primary schools.

It is important to note that PSHE as a subject has often been underfunded, with teachers receiving little or no training. A study by the Ealing health improvement team (2017) found that one-third of teachers did not teach PSHE regularly, and more than two-thirds lacked confidence teaching PSHE. This echoes a study undertaken by the Sex Education Forum (2018) which found that only 40 per cent of primary teachers felt that PSHE provision in their school was of high or very high quality.

Among the provisions of the Children and Social Work Act 2017 were that relationships and health education (RHE) in primary schools and relationships, sex and health education (RSHE) in secondary schools would become statutory requirements. These requirements came into effect from September 2020 (DfE, 2019), although an extension to summer term 2021 has been granted to schools that need additional time to meet them due to the ongoing Covid-19 crisis.

The granting of statutory status to RHE and RSHE provides an opportunity to audit provisions in schools and develop areas that need further support.

It has been made clear by the Department for Education (DfE) that all aspects of relationships education and RSE, as set out in the guidance, are statutory and that pupils cannot be withdrawn from these sessions. However, in primary education, parents and carers have the right to withdraw their children from sex education, and it therefore is important that primary schools make clear, in their PSHE/relationships (and sex) education policies, which lessons are relationships education and which ones are sex education. These policies also need to make clear what pupils who are withdrawn from sex education will do in these sessions instead.

When developing a strong PSHE curriculum, in primary or secondary schools, there are a number of factors that need to be considered: figure 6.1 shows some key elements to address.
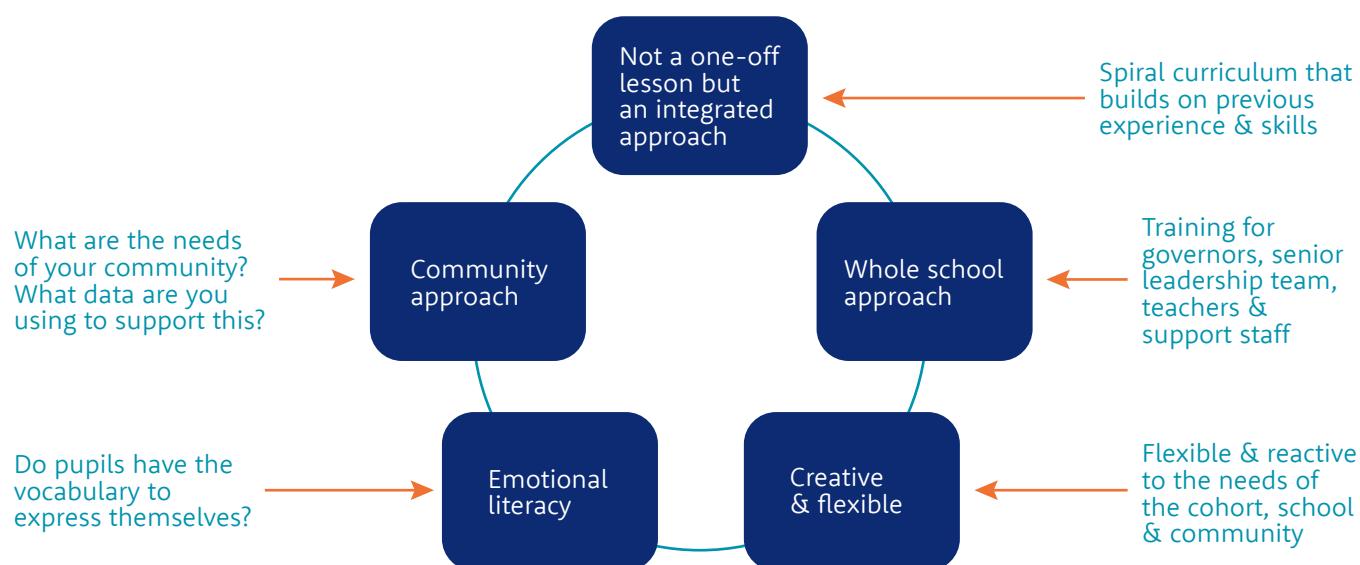
6.2 AGE-APPROPRIATE RELATIONSHIPS EDUCATION

RSHE is much more than just 'the sex bit'! The new guidance organises relationships education into five areas that cover much more than what might be considered the traditional view of relationships education:

- families and people who care for me
- caring friendships
- respectful relationships
- online relationships
- being safe (DfE, 2019, pp. 20—22).

Figure 6.1
An illustration of the key elements and questions to consider when implementing a high-quality PSHE curriculum

Relationships education takes into consideration the complexities of friendships, diversity and online communication throughout the curriculum, and these can be taught in a creative and age-appropriate manner. Ensuring that pupils are taught skills that enable them to become resilient and critical online allows them the freedom to enjoy friendships online with their friends while being aware of the anonymous nature of some online platforms, fake news and trolling – all of which can be detrimental to wellbeing.

According to the PSHE Association's *10 Principles of Effective PSHE Education* (2014), it is important to,

> *'plan a "spiral programme" which introduces new and more challenging learning, whilst building on what has gone before to reflect and meets the personal developmental needs of the children and young people.'*

This allows for the development of skills as well as knowledge of specific content, rather than the popular 'drop-down days' whereby pupils spend a day focused on a particular topic which they then have no opportunity to revisit in future (Pugh & Hughes, 2021). Johnston (2012, p. 224) cites the benefits of a spiral curriculum as 'allow[ing] a logical progression from simplistic ideas to complicated ideas'. By building upon topics each year, pupils have time to process, question and develop their understanding in a supportive and scaffolded way.

6.3 RESOURCES TO SUPPORT RELATIONSHIP EDUCATION

Wissman (2019, p. 19) stated that 'above all, [picture books] can cultivate the social imagination and help us imagine new possibilities for ourselves and the world'. Using books and images that show a variety of families, religions, races, genders and sexual orientations can instil a sense of belonging for pupils, families and visitors who can recognise themselves in the images they see. They are useful and inclusive tools in the primary classroom that can ignite discussion. Having pupils engage with stories about diverse families, ensuring that displays show diversity, and teaching pupils how to have respectful discussions can help allow them to have meaningful conversations with their peers about a range of issues and topics. One picture from a book can be used to develop a discussion for a whole lesson or series of lessons without the need for expensive resources. Using graffiti walls (large pieces of paper along one side of the room, or sheets of static whiteboard paper) can be used for pupils to draw or write on. This can be an effective baseline and assessment technique: introducing new topics and then asking pupils to revisit the wall and add to them. This allows teachers to plan appropriate and inclusive next steps in learning. Photos of the pictures and words can make powerful displays, or be used to show progress.

6.4 WORKING TOGETHER

Sykes (2016; cited in Cox & Sykes, 2016, p. 140) discusses the benefits and challenges of cultural diversity, and suggests that traditional family beliefs and cultural understanding can all enhance respect for others. Williams (2021, p. 40, cited in Pugh & Hughes, 2021) asserts that 'this can be showcased by involving families in learning through:

- parent pop-ins;
- celebratory assemblies;
- "marvellous me" — a box that the child fills with special things and shares with the class'.

Working in partnership with parents and carers, senior leadership teams (SLTs) , governors, communities and local charities can enhance wellbeing for all by promoting a shared vision and sense of community, and by drawing upon the expertise and skills within the local community. The sense of belonging that can be enhanced by this relationship can often provide families with the support they need in more difficult times, and can also signpost people to organisations that may be of use to them at different times of their lives.

It is vital that school governors, SLTs, teaching and support staff have quality training and feel confident in their school's PSHE/relationships (and sex) education and way in which the curriculum will be delivered. In line with the DfE guidance (2019), parents/carers must be consulted in order to develop a school RSHE policy. This can be done using a simple questionnaire, an online forum, virtual discussion group or (socially distanced) focus group. It is important to remember that parents/carers cannot alter the statutory elements of the curriculum, but there can be discussions around to which year groups certain lessons should be taught, what resources should be used, and so on.

Over the years PSHE has often been portrayed as circle time, a simple 10-minute discussion for when there are a few extra minutes in the day — but it is so much more than that. By introducing a quality PSHE curriculum that incorporates RSHE and wider PSHE elements such as environmental and economic awareness, we can provide pupils with the skills and knowledge needed to navigate and thrive in the world we live in, focusing on wellbeing, health and respect for all.

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Afterword

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It is clear from the contributions to this collection that there is no single, definitive answer to how to develop and implement a high-quality curriculum for wellbeing. Instead, leaders and schools must consider a range of factors such as mental health support, emotional literacy, the welfare of teachers and staff, a sense of belonging and how curriculum subjects can be developed to ensure that pupils have the skills and knowledge they need in order to thrive. Although this may seem a huge task, undertaking an audit of what successful practice is already in place can be an effective and revealing way of assessing what more can be done. By involving the wider community – such as governors, parents/carers, local businesses, community leaders and so on – the curriculum can be enriched and developed to support both pupils and those communities.

The Covid-19 pandemic has created opportunities to move away from traditional or typical ways of promoting wellbeing, and encouraged educators to think even more creatively about the support and resources they provide. Despite the challenges that schools, external agencies and their families have faced during this time, there are numerous examples of innovative and effective support for wellbeing and changes to the curriculum that provide case studies of effective practice, delivery and evaluation which can be used by others within their own settings.

As we move forward, it is vital that we draw from and develop existing creative and inclusive approaches to curriculum design in order to create an effective and high-quality curriculum for wellbeing that can benefit all members of society.