Evaluation of Barnardos National Wellbeing Project

Summary Report – September 2023
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The Barnardos National Wellbeing Project

The Barnardos National Wellbeing Project is a new trauma-informed intervention strategy for children (4 – 18 years), together with their parents and significant others in their communities.

This National Wellbeing Project comprises a range of evidence-informed and creative service components that aim to foster calm, mind-body awareness and sense of belonging. The overarching objectives of the programme are to:

- Strengthen coping skills/stress relieving mechanisms
- Enhance integration
- Promote community engagement

Group-based programmes such as Breath-Body-Mind, Creative Mindfulness and Grow from Seeds are delivered in community settings and tailored to need. Delivery of service components is underpinned by interagency working and partnership with communities.

The Barnardos National Wellbeing Project is currently available on a universal basis in five pilot sites located across the East and Middle of the Republic of Ireland: MacUilliam (Tallaght); Tyrrelstown (Dublin 15); Clonmel/Carrick on Suir (South Tipperary); Athlone; and Thurles (North Tipperary).
The Evaluation of the Barnardos National Wellbeing Project


The aims were to:
- Examine the impact of the Wellbeing Project on child, young person and parent outcomes, including subjective wellbeing and emotional regulation
- Explore the experiences of participants in the Wellbeing Project and the factors that facilitate or inhibit the effective delivery of the programme

Two interrelated sub-studies were undertaken:
- A quantitative study involving the collection of pre and post outcome measures
- A qualitative study involving interviews and focus groups with programme participants and other key stakeholders.

The Quantitative Study

The quantitative study explored the impact of the Barnardos National Wellbeing Project on child and parent outcomes.

Child outcome measures

To examine if the service components improved child wellbeing, teachers reported on child emotional regulation before and after the delivery of programme components using a standardised outcome measure called the Emotion Regulation Checklist (ERC). The ERC comprises two subscales. Higher scores on ‘emotion regulation’ captures children’s ability to express emotions appropriately, their emotional self-awareness, and their empathy, while higher scores on ‘emotion lability/negativity’ indicates greater levels of anger dysregulation, mood lability, and lack of flexibility.

We also asked a subsample of older children to report on their subjective wellbeing using a brief questionnaire adapted from the Kidscreen-27 instrument. This brief, well-validated instrument provided insight into child self-reported psychological wellbeing and school wellbeing.

Parent Outcome measures

Parents who participated in parent wellbeing programmes completed three outcome measures to assess wellbeing, emotional regulation ad perceived level of social support. These included: the Warwick-Edinburgh Mental Wellbeing Scale – Short-form (WEMWBS-SF); The Emotional Regulation Questionnaire (ERQ); and the Multidimensional Scale of Perceived Social Support (MSPSS).
The Qualitative Study

The qualitative study comprised interviews and focus groups with a range of informants. The aims were to explore participants' perceptions and experiences of being involved in the Barnardos National Wellbeing Project, as well as any enablers and barriers to programme success.

Participants and data collection procedures

An overview of participation and data collection is shown in Figure 1.

Children and young people

In total, data was collected from 235 children and young people from 18 primary and post-primary schools across the wellbeing sites. Self-report data was also collected from 38 children from 5th class up to post-primary level.

A subsample of 53 children and young people participated in five focus groups; two in primary schools with 26 children (13 per focus group; 21 boys and 5 girls), and three in post-primary schools with 27 young people (6 – 10 per focus group; 12 girls and 15 boys).

Parents

A total of 12 parents completed quantitative measures. Seven parents also took part in the qualitative study participating in interviews (n = 2) or a focus group (n = 5).

Other stakeholders

A range of other key stakeholders (n = 20) involved in programme development, roll out, implementation and delivery, were also involved in the qualitative study. This included: school staff (teachers, home-school-community liaison teachers and principals; n = 14); community-based family support workers (n = 1); and programme providers (Barnardos staff members; n = 6).
Figure 1: Overview of Participant Recruitment and Data Collection

**Barnardos National Wellbeing Project**

- **Supports delivered to Children and Young People in school settings**
  - Schools agree to participate and parent consent for child participation in research collected (n = 18)
  - Teachers agree to participate in the research and complete baseline assessments for children and young people (n = 298).
  - Children in 5th, 6th primary school classes and secondary schools complete baseline self-report measures (n = 47)
  - Follow-up assessments are completed by teachers for participating children (n = 235)*; Child and young people complete post-intervention self-assessments (n = 38)*
  - Sub-sample of children invited to participate in 5 focus group (n = 53); School staff (4 principals, 7 teachers and 2 home-school-community liaison teachers take part interviews)

- **Supports delivered to Parents in Community Settings**
  - 3/5 wellbeing groups agree to participate in the evaluation. Parents informed of the research and agree to participate (n = 14)
  - Baseline parent-self report assessments completed (n = 14)
  - Follow-up assessments completed by parents (n = 12); 2 parents lost to follow up; due to programme dropout
  - Sub-sample of parents invited to participate in interviews (n = 2) and focus group (n = 5); Interview conducted with community-based family support worker

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* 63 teacher reports lost to follow-up due to teacher absence and administration error
9 Child and young person self-assessments lost to follow-up due to school absence
Results of the Quantitative Study
Assessing the impact of the Wellbeing Project on Outcomes for Children and Young People.

A total of 235 children from 18 schools were included in the evaluation — the majority of whom were involved in Creative Breath Body Mind (CBBM) service components. The Grow from Seeds (GFS) component was delivered to primary school children only.

Emotional regulation
At baseline, the majority of children had good emotional regulation skills and were rated by their teachers as often or always demonstrating adaptive regulatory processes, positive emotions, empathy, and emotional self-awareness. Nevertheless, some children were demonstrating challenges, particularly in respect of emotional self-expression (47.2% of students in respect of their ability to name negative emotions), positive emotions and coping with transitions.

Analyses using dependent samples t-tests were conducted to evaluate the impact of the Wellbeing Project on teacher reported child emotional regulation (Table 1). There was a statistically significant effect of the intervention on children’s ability to regulate their emotions, suggesting that children were expressing more positive emotion and demonstrating greater empathy and emotional self-awareness after taking part in the Wellbeing Project. Post-intervention, children were also showing significantly less emotional dysregulation, such as anger and mood swings.

Table 1: Summary of Teacher-reported Emotion Regulation Scores Pre and Post Intervention

<table>
<thead>
<tr>
<th></th>
<th>Baseline M (SD)</th>
<th>Follow-up M (SD)</th>
<th>M diff</th>
<th>$t_r$ (95% CI), $p$</th>
<th>Effect size (d)</th>
</tr>
</thead>
<tbody>
<tr>
<td>All programmes (n = 235)</td>
<td></td>
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<tr>
<td>Emotional regulation</td>
<td>25.7 (4.44)</td>
<td>27 (4.29)</td>
<td>1.34</td>
<td>-6.60, (-1.73, -.93), 0.000*</td>
<td>0.43</td>
</tr>
<tr>
<td>Emotional lability/negativity</td>
<td>22.3 (7.49)</td>
<td>21.1 (7.04)</td>
<td>-1.26</td>
<td>4.85, (1.74, 1.76) 0.000*</td>
<td>0.32</td>
</tr>
</tbody>
</table>

* Indicates significance at the level $p<0.05$

Secondary sub-group analyses were conducted to investigate the impact of individual programme components on child emotional regulation. Dependent sample t-tests showed that children who participated in CBBM sessions demonstrated statistically significantly better emotional regulation and less emotional dysregulation at follow-up. No significant differences were found for those in the CM group. For children who received GFS, post-intervention emotional regulation scores showed a significant increase over time, however, scores in respect of emotional dysregulation did not change (See Figures 2 & 3).
There were no statistically significant differences between baseline and follow-up for either self-reported psychological wellbeing or school based wellbeing (Kidscreen-27 subscales). These findings indicate that there was no post-intervention change in how well students were faring in school, or in respect of their subjective wellbeing – although this data was only collected for a reduced subsample of participants (n = 38).
Assessing the Impact of the Barnardos National Wellbeing Project on Parents’ Outcomes

A small number of parents who participated in three wellbeing groups were included in the evaluation. In total, 14 parents completed baseline assessments, all of whom were female. Subsequently, two parents were lost to follow up, while an additional 3 only partially completed measures. This resulted in 12 complete cases for measures of wellbeing, and only 9 complete cases for measures of emotional regulation and perceived social support.

Pre-intervention scores on the WEMWBS indicate that parents in the study had relatively low mental wellbeing. At follow-up, wellbeing scores had improved and were comparable to expected population values. This change was not statistically significant, but may be considered meaningful at an individual level. Trends in the expected direction were also found in respect of emotional regulation (expressive suppression subscales) indicating that parents showed a reduced tendency to regulate themselves in a maladaptive manner (i.e. reduced suppression of emotional expressions and masking of feelings); however, this change was not statistically significant. There were no changes in respect of parents’ perceived levels of social support.

Figure 4: Parent Mental Wellbeing at Baseline and Follow-up

Results of the Qualitative Study

Qualitative analysis generated several themes and subthemes related to experience of taking part in the Wellbeing Project and its implementation in community-based settings.

Children and Young people’s experiences of the Wellbeing Project and perceived benefits

Children and young people generally reported high levels of satisfaction with the service components. The programme was seen as a positive experience and provided an opportunity to relax, unwind or re-energise within the school environment. For example, one secondary school student (CYPFG3, 2nd Year, girl) described how “after a few long classes, it’s fun to be a bit silly and I always felt more awake and energised afterwards”.

Children and Young people’s experiences of the Wellbeing Project and perceived benefits
Children and young people expressed a range of individual likes and dislikes in respect of programme activities. This variability in preferences suggests that the multifaceted nature of the programme is important, as it provides children and young people an opportunity to take part in numerous activities and learn what techniques and strategies are best suited to their own wellbeing needs. Indeed, children and young people perceived the wellbeing sessions to be beneficial. For example, students who took part in the CBBM component reported developing and using new coping skills and techniques to deal with stressful circumstances and cope with setbacks:

“I think that the programme helped me and others de-stress”
– CYPFG2, 3rd year, girl

“I think it was really helpful. If someone is stressed they might not know what to do, but the programme can help them”
– CYPFG3, 5th year, boy

“The counting does help you when you’re getting stressed”
– CYPFG5, 4th class, boy

“When I’m angry, I use it when I want to de-stress. When something goes wrong”
– CYPFG1, 3rd year boy

“I did some of the breathing we’d learned and that helped me to stay calm”
– CYPFG5, 4th class, boy

These findings suggest that the CBBM component provided a valuable opportunity to practise and learn how to apply new and/or different techniques that could be used in various circumstances in order to reduce stress and enhance feelings of wellbeing.

Benefits identified by children who took part in the GFS component related to fostering participation and positive classroom interactions. Some participants’ responses indicated that they had gained greater knowledge relating to inclusion and creating a welcoming, inclusive classroom environment.
During a focus group, when asked if they had learned anything from the activities, one young boy said “just because someone has a disability you don’t let them out” (CYPFG4, 3rd class boy), while another stated “you learn how to be nice” (CYPFG4, 3rd class boy). More generally, participants described having “fun working together” and “including everybody” (CYPFG4, 3rd class girl).

**Parents’ experiences of participation and perceived benefits**

Participating mothers reported positive experiences of the programme. For the majority of participants, the experience of connecting with other mothers was a key aspect of programme participation. Parents described initial feelings of self-consciousness and felt that they had to step outside their “comfort zone” to participate in the programme. Despite this, the group provided a source of moral support:

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"I enjoyed the group because they are all different people and they came in there and shared how they manage stress from different regions and different countries"

"Everyone is lovely and we’ve all got to know each other, so it’s been really beneficial"
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Parents described acquiring new knowledge and skills, as improved coping skills during their participation in the programme and highlighted how they were using new wellbeing techniques which they learned in the programme in their day-to-day lives.

“I’m doing that [the tapping] sometimes in the morning, and just to get the body going and say ‘this is another day’ and ‘OK let’s do it’ […] And the part I loved, and absolutely loved was to give yourself a hug, because you’re so busy with everyone else all the time that you lose yourself as a person” (PI2)

Importantly, the techniques were seen as practical, brief and easy to assimilate into daily routines. Participants also highly praise the variety of activities in the programme. This was seen as allowing participants to learn a range of new skills which could integrated into different aspects of their day-to-day lives.
“Anything that we’ve learned its only like five minutes, it’s nothing too long, so if there’s something that’s gone wrong you can just do the breathing, do the tapping, put on some music – there’s loads of little skills that I’ve learned here that I’m using every day”
– (PFG1)

“There was lots of little things, it didn’t get repetitive, it didn’t get boring”
– (PFG1)

“Everything that we’ve learned here we can take away and do it ourselves at home, it’s all short, like, little five minute bursts of things, like when you’re drinking your coffee you can be breathing”
– (PFG1)

Overall, participants felt that engaging in the programme had helped them reduce their stress and reported feeling calmer, less reactive and better equipped to deal with stress:

“I’ve noticed now that before I could have flown off the handle about something, but now I’m able to deal with it in a calm way, and it still gets the job done in the same way”
– (P12)

“Over the last six weeks, my stress levels have gone a way down. I’m well able to use what we’ve learnt here to manage day to day”
– (PFG1)
Community stakeholders experiences of the Barnardos National Wellbeing Project

Addressing community wellbeing needs

One of the main themes to emerge from interviews with teachers and principals, as well as other school and community-based stakeholders, related to the challenges faced by children and young people, as well as parents, in terms of their wellbeing. Participants frequently referred to high levels of anxiety and mental health difficulties amongst community members, as well as low levels of wellbeing. Challenges for children and young people which were identified included anxiety, emotional dysregulation, behavioural challenges and school refusal. Teachers and other school staff also highlighted poor coping skills and resilience, as well as a lack of access to mental health and wellbeing supports for young students:

“In every year there are students that have severe anxiety. I would say we have at least 2, 3, 4 students with prolonged anxiety. (…) the waiting lists are incredibly long”
– (SI3)

“We’ve seen a massive escalation in the anxiety level in our school (…) we’ve just seen incredible increase in anxiety”
– (SI1)

“Similarly, high levels of stress and poor wellbeing amongst parents was also underlined. One community-based worker described how “I saw really high stress levels and parents not doing anything to look after themselves”
– (SI7).

(a) Impact of Covid-19

The recent experiences of Covid19 were identified as a significant exacerbating factor in relation to community mental health and wellbeing needs. Prolonged periods of school closures and restricted access to supports and services were linked to increased worry, stress and anxiety in children and young people, as well as reductions in positive coping mechanisms. Consequently, students were perceived as experiencing significant difficulties re-integrating into, and coping well in school environments:

“After the lockdowns in the last year, starting last year, what we noticed really was a huge change in their resilience. (…) the resilience was like as if it didn’t exist. If you tried to change, you know, change your routine (…) if they hadn’t been doing basketball for a few weeks and then it was their turn to do basketball again, like the stress and the anxiety was unreal”
– (SI5)

“Their resilience is just not there, comparative to classes going back the last couple of years around the same age. I’m teaching 12 years but as a whole school we’ve never seen as big a need for teaching children coping skills”
– (SI9)
Participants also described how ongoing Covid-19 restrictions in school settings had reduced opportunities to foster a sense of cohesion and community between students:

"We always prided ourselves on having a really good community spirit, like we're not a huge school. But we have a great community spirit and grace. Just great atmosphere, friendliness, kindness. In the school, because of the way they have to behave in Covid, which was - sit at their desks, you can't go talk to the other pod, you can't touch anything - All of that, all of those restrictions, we noticed they didn't know other children and other classes, the community spirit of the school was gone" – (SI5)

Overall, a number of interviewees felt that mental health and wellbeing had never been such as prescient issue as at the current juncture, with some stating that they had “never seen as big a need for teaching children coping skills” (SI9).

**Perceived benefits and advantages of the Barnardos National Wellbeing Project**

Positive perceptions of Barnardos National Wellbeing Project was a strong recurring feature of interviews and focus groups with stakeholders. Many participants commented that the “timing of the programme is excellent” (SI10), while others commented that the programme was addressing a pressing need for children, young people and families.

"We need to equip kids as much as possible, we had such a struggle with the (students) this year. It's just such a burning issue" – (SI2)

"I was very keen to jump on board and access any extra mental health services and opportunities that we could for populations that are lacking those things at the moment” – (SI8)

"We were really looking for solutions, or outside help other than what we were doing. (...) the problems that we were seeing after we came back from Covid were much bigger than what we had anticipated or what we were prepared for” – (SI9)

"I have a big bunch and a lot of kids who love and crave attention. And I find there is no way I can meet all of their needs all the time” – (SI4)
Notably, the wellbeing sessions were also seen as providing children and young people with an opportunity to open up about their emotional experiences, to learn more about wellbeing and gain coping skills. Improvements in student emotional regulation were reported and stakeholders felt that children and young people were better able to manage their emotions in school after taking part in the programme:

“They felt free to talk, they were comfortable talking, to open up in the session”
– (SI15)

“It allowed this opportunity to talk to those children who we knew were carrying huge burdens. That was good. That was good, you know, because sometimes children don’t open up and it needed a programme to kind of help us with that”
– (SI10)

“This programme has really offered a way of teaching each of them how to process these things, when to relax, and just to deal with one worry at a time”
– (SI12)

“We would have seen how they’ve been able to put those strategies into use and just step back from things, talk about things, ask for help, you know, on just all the breathing strategies - no question it has. It has transferred into the playground and into their, into their friendships”
– (SI10)
There was a lot of challenging behaviour throughout the year, and in the last few weeks they seem to have settled a bit better and maybe have better skills to cope with different situations or whatever. Yeah, so, some improvement there”
– (SI1)

Perceived benefits for parents’ wellbeing were also highlighted and included improved self-care, enhanced coping skills and reduced stress levels. Overall, the programme was seen as helping to empower parents to strengthen their own wellbeing.

Wellbeing is on the menu now, they are conscious that they need to do something for themselves”
– (SI7)

Broader benefits
The roll out of the programme was seen as helping to strengthen supports for wellbeing in community settings, particularly schools. A number of participating teachers noted that the programme had been beneficial for their interactions with students. One teacher for example, described how they had gained new insights into students’ emotional experiences by observing their participation in wellbeing activities and felt that that they could use this information to better help their students. More generally, teachers and principals described how being involved in the roll out of the programme had contributed to upskilling and capacity building in relation to wellbeing. That is, school involvement in the programme was understood as helping to equip teachers with new tools, strategies and skills which they could use to support emotional regulation and wellbeing in their school communities. Teachers described how they continued to use programme-taught techniques, such as breathing and tapping, with their pupils to promote concentration and positive behaviour, as well as addressing student worries and challenges. This was seen as helping school staff feel more competent and confident in addressing student wellbeing:

The other thing I liked was in one of the sessions (facilitator) had a picture of their own bodies in a shape and they could mark in where they hurt when they’re worried about something. […] For me it was interesting to see what they were writing in, some had it in their head and others in their tummies. There were a range of different places they felt that stress and even just looking at that for me, it would be something that would help me to know what to target to help them”
– (SI4)

I’ve used that on a few occasions in different settings with kids throughout the school if they’re worried or if there are any issues, saying ‘remember the jar’ and to focus on their breathing. And I suppose the breathing exercises or whatever definitely is something they can carry forward”
– (SI1)
"I think there's massive upskilling after being done and it's needed. It's needed every single day of the week. You know, even first thing this morning we had a child in a state and he was having a bad morning and they (children) just don't have the skills to deal with that and they're trying to cope in school (...) that's a huge part of this is helping teachers feel that they can cope with this (...). So actually this upskilling for teachers is massive"
– (SI10)

Mechanisms for success

Overall, school and community based stakeholders were unanimous in describing positive responses to the wellbeing programme and all expressed an interest in continuing their involvement in Barnardos National Wellbeing Project. Key programme factors which were identified as important to programme success included the practical nature of the programme and the variety of activities which were offered to participants. The programme was also seen as providing participants with a space to foster wellbeing:

"It's about creating a safe physical and emotional space for people. (...) one of their aims is to make people feel comfortable and feel safe and able to share. It's about building connection and building relationships"
– (SI16)

"The programme is really practical and really effective in the immediacy of the classroom setting (...) So the breathing exercises, the counting, the visuals, and reminding them that they engaged in these really helped and were quite immediate in their effectiveness"
– (SI8)
 Appropriately targeting the programme to participant needs was also highlighted as important in ensuring the effectiveness of the programme. This included tailoring the programme to developmental need and creating a safe, supportive environment for participants.

Finally, project workers involved in programme delivery were highly praised and were identified as an important “ingredient” in programme success. It was noted that project workers’ skills were central to ensuring that participants enjoyed the programme and felt safe and comfortable participating in activities. This was the case for programmes targeted at both children and young people and parents:

“[facilitator] was amazing. Her interaction was very clear, very organised, very no messing - (...) also her interactions with the teachers were very good, very beneficial. Lovely calm approach and I suppose she was quietly kind of making them feel confident too about what they could do. And just her manner was just lovely. I mean, I think that person is crucial. No question, and she was excellent” – (SI10)

“[facilitator] was absolutely brilliant. She’s really likeable. And there’s no pressure on the children. A few might have been a bit slow to engage initially. Just because it doesn’t come naturally to them to talk about their feelings. Some of them are a bit embarrassed or don’t have confidence in talking about why they’re feeling a particular way. But I love how it’s non-threatening” – (SI14)

“[facilitator] is very good, she’s very skilled and kind. All of them have warmed to her. She does ask them to do things out of their comfort zone, (...), but [facilitator] makes it very safe for them because she has a great way” – (SI7)
The ability of Barnardos staff to engage and build relationships with organisations, services and community members was also seen as important in getting the programme off the ground. Moreover, this interagency approach was beneficial from the perspective of schools. The facilitation of the programme by an external professional was identified by school staff as opening participants up to a new voice and perspective, as well as helping children and young people to feel comfortable participating in the programme. Moreover, the provision of wellbeing support by an external organisation was also seen as helping to meet the wellbeing needs of children and young people which were difficult for teachers and schools to address:

“It’s a different voice. Like when [facilitator] comes in, you know, it’s not me telling them these things. I think sometimes they just need that different voice, and how she delivers it is brilliant”
– (SI2)

“The teachers in our school make a really big conscious effort to connect with children. But there is a difference when they’re in that circle with [facilitator]. They do say things about home that they wouldn’t say during maths with a teacher”
– (SI8)

“I find there is no way I can meet all of their needs all the time. Having someone come in who wasn’t trying to teach them something academic was such a good thing”
– (SI4)

Barnardos project workers were described as professionals who could guide teachers and school staff in learning how to use new coping skills and strategies in their classrooms and interactions with children and young people. Additionally, the delivery of the programme in classroom settings was seen as important as teachers were learning about, and subsequently using and reinforcing the skills more broadly in the school environment:

“This was perfect in that it was a professional person coming in, showing you the language around, showing the teacher the language around this and how to speak about it and how to be calm and to deliver it properly. Then that’s totally scaffolding then for the teacher then who can see, this is how you talk about this”
– (SI10)

“I’ve used some of the skills we’ve learned like the breathing techniques in different scenarios since. I’ve used them in the church one of the days when one of the children was getting very exasperated. I’ve used it on the playground and going to matches, so we really benefitted from it”
– (SI9)
Challenges

A small number of challenges to programme implementation and effectiveness were highlighted. Although there was strong enthusiasm for the programme, challenges engaging older primary school children (5th and 6th classes) were noted. Heightened levels of self-consciousness, potential discomfort in participating in activities and negative attitudes towards the programme were identified as potential barriers for these groups. Additional adaptation of programme sessions may be needed to meet the particular developmental needs of children at this developmental stage:

“You might be dealing with a class who are quite self-conscious, for who some of this movement and breath stuff is a bit like ‘that’s not cool, I’m not doing that’”
– (SFG1)

“I think but the older…well my experience anyway, was say the fifth and sixth classes were a little bit more self-conscious, particularly girls”
– (SFG1)

Although it was evident that some children and young people were using new wellbeing strategies in their day-to-day lives, this was not always the case and there were gaps in use of programme-taught skills beyond programme settings. Greater scaffolding and support for children and young people in translating skills and strategies into routine use was seen as important in promoting longer-term programme benefits. Indeed, although most teachers displayed high levels of programme buy-in, insufficient engagement in the earliest stages of implementation was noted as a challenge. Project workers felt this made delivery in these classroom settings more difficult and undermined the impact of the programme among participants.

“In some areas teachers are so into it, they’re so engaged, you can tell that they’re practicing it throughout the week because when the worker goes in the following week they’re getting that feedback or they’ve left things in the class that the teacher has gone through. That makes a huge difference to the embedding of the programme. But there are others that are disengaged, or are doing something else, maybe having a conversation with somebody, and this effects the engagement of the children”
– (SFG1)

“For the children to continue using them independently, they would need probably nearly a full year, ongoing input around that and support and you know, or even if it was, you know, ongoing every couple of weeks, but the teacher was doing it in between. I mean, it would have to be a much bigger endeavour. If you’re talking about real impact, you know”
– (Si6)
“I think we need a champion teacher and they would be trained up to do something that (wellbeing worker) would do or there would be a few, a little group of teachers”

– (SIS)

Finally, challenges for project workers involved in programme delivery were highlighted, which included the intensive and multifaceted nature of the programme. A longer lead-in period for programme delivery was identified as potentially beneficial for future cycles of programme delivery as this would allow workers greater time and scope to get to know participants and adapt the programme to their needs.

“It is difficult at times because of everything... From the start to go out recruiting schools, to planning, to implementing, then to evaluate”

– (SFG1)
Discussion

This report outlines some of the key findings from the evaluation of the Barnardos National Wellbeing Project. These highlight, in particular, the impact of the programme on child social and emotional wellbeing and the experiences and views of key stakeholders who took part in the programme, as well as facilitators and barriers to programme success.

Overall, findings suggest that the Barnardos National Wellbeing Project helped children and young people develop coping skills and had a positive impact on child emotional regulation. At baseline, emotional self-expression and regulation were highlighted as particular area of need for children and young people. At follow-up there appeared to be a considerable improvement in children and young people’s ability to name their negative emotions, whilst fewer children were reported as showing poor self-regulatory skills in the classroom. The results of the qualitative study support these findings. Children and young people described how programme participation facilitated opportunities for relaxation and calm. The programme was also seen as helping to build and enhance knowledge of mind-body connection and facilitating the development of adaptive stress management skills, such as meditative practices and breathing techniques. Additional benefits in respect of inclusion and positive interactions in classroom settings were also noted by participating children. Teachers and principals corroborated these findings and perceived the programme to have been effective in helping students acquire coping and wellbeing skills. In some instances observable effects on behaviour within the classroom, the school yard, and in children’s friendships were described.

However, some limitations must be noted. The strongest change in respect of emotional regulation was found for those who participated in CBBM sessions. Children who took part in GFS also showed improvements on teacher-reported emotional regulation, although no change in respect of anger dysregulation was found. Children who participated in CM did not show any change over time. Gaps in adoption of new wellbeing skills and strategies were also highlighted. While children and young people who participated in the programme generally found the programme to be useful and enjoyable, not all students reported using the new skills and strategies in their day to day lives. Further supports and/or training for children and young people which can promote the transfer of learning and newly acquired mindfulness-based skills and strategies to their lives and personal experiences outside of the programme may be needed.
The findings provide partial indication that the programme had a positive impact on parent wellbeing. Parents reported improvements in their overall mental wellbeing. Although not statistically significant, these changes may be meaningful and indicative of increased positive emotion and improvements in mental functioning post-intervention. Following programme participation, parents reported feeling calmer, less stressed and less emotionally reactive. Parents also highly appreciated the opportunity for self-care and regulation, as well as connection with others through attendance at the individual wellbeing session. Participating in the programme was perceived as useful in normalising their experiences of stress, as well as reducing their sense of isolation. Parents felt they had acquired useful skills and strategies through programme participation which they could implement in daily routines to reduce stress and improve wellbeing.

Some important findings in relation the implementation of the Barnardos National Wellbeing Project emerged. These related to the reach, acceptability and appropriateness of the programme, implementation adaption, as well as programme adoption and challenges to programme success. Enthusiasm for the Wellbeing Project was a recurring and strong feature of the qualitative findings with both programme participants and other stakeholders involved in delivery. Satisfaction with, and positive perceptions of, the wellbeing programme were widespread. Importantly, the programme was perceived as addressing a pressing need at a community level and as successful in creating supportive community-based spaces in which participants felt safe to share their experiences, build relationships, and practice wellbeing-focused activities. Additionally, participants and stakeholders alike praised the practical and varied nature of activities offered during programme sessions. These features were viewed as promoting the appeal and relevance of the programme across a range of children, young people and parents. Indeed, across the qualitative findings there generally was no unanimity regarding which elements of the wellbeing sessions were most effective or beneficial, rather, there was considerable individual variability regarding “what works best” depending on preference.

The adaptability of programme content was also identified as an important aspect of implementation. Project Workers modified content depending on the needs of each group (developmental stage, temperament) as well as participants’ response to activities (e.g. level of engagement). This approach was seen as crucial to maximising satisfaction with the programme, promoting positive responses and facilitating benefits for participants. This requires skilled, committed facilitation and it is crucial to note that project workers were highly praised for their ability to create a calm, organised, safe space for participants, as well as their ability to engage sensitively and responsively with children, young people and parents participating in wellbeing programmes. Overall, the collaborative model and partnership working between community-based service providers and schools demonstrated here was highly valued and seen as enhancing intervention quality and efficiency.

Despite these positive findings, challenges to programme implementation success and effectiveness also emerged. The delivery of a range of programme components, in varying context and to differing populations of children and young people was a challenging undertaking for project workers. Pressures on their time and heavy workloads were highlighted, while the challenge of delivering service components to a wide range of groups were also emphasised. For instance, older children attending the transition classes of 5th and 6th in primary schools were identified as not engaging nor benefitted with the programme to the same extent. The qualitative findings point also point to gaps in the adoption of new skills, with some participants reporting not using the skills and strategies taught to them outside of the programme.
Conclusions and Lessons

Adversity in childhood can have a significant and lifelong impact on health and wellbeing. Trauma-informed services and supports which are integrated at a community level and which tackle stress and promote wellbeing are an increasing public health priority. The findings reported here point to the utility and potential effectiveness of a community-wide wellbeing programme which aims to reduce stress, promote regulation and wellbeing in children, young people and parents living in communities impacted by disadvantage, inequality and marginalisation.

Key lessons include:

■ Integrated, awareness-based supports delivered in community settings can result in improvements in child emotional regulation, as well as potential benefits for parent wellbeing. These findings are important. Communities that experience disadvantage, marginalisation and other adversities are at increased risk of health and wellbeing inequities. Indeed, stakeholders emphasised a pressing need for mental health and wellbeing support within community settings and there was strong enthusiasm and buy in for the delivery of the wellbeing programme.

■ Skilled facilitation of the Barnardos National Wellbeing Project was central ingredient to implementation success. The collaborative, interagency approach in the Wellbeing Project appears to be important in promoting programme engagement and impact.

■ The provision of co-facilitation supports and/or greater time for project workers to get to know participants and the kinds of activities/programmes which will be most effective may be beneficial.

■ Challenges to engaging and ensuring benefits for all children and young people were highlighted. Greater understanding of what works for whom and in what circumstances is needed. Further qualitative exploration may be useful in developing more in depth understanding of pathways to programme success and effectiveness within each of the programme components.

■ Some children and young people may also need additional supports and/or preparation in translating the skills and learning to their lives and personal experiences outside of the programme, particularly if they are younger or more vulnerable. Fostering links between the programme and children’s families may also help to promote greater use beyond programme settings and the sustainability of programme outcomes.

■ The responsiveness of participants is vital to programme effectiveness. Consultation was a key aspect of the design and development of the programme, further engagement in the context of programme implementation may be beneficial. Promoting greater participant involvement in the delivery and providing community members with a say in the supports they receive and how they learn may be warranted.

Find out more…

A full report on the evaluation of the Barnardos National Wellbeing Project is available from research@barnardos.ie
About Barnardos

As Ireland’s leading children’s charity, helping vulnerable children since the 1960s, Barnardos works with vulnerable children and families to provide practical, social and emotional support. Barnardos supports children and families all across Ireland who have been affected by traumatic life events such as abuse, parental mental health, neglect, separation, bereavement and addiction. Our core purpose remains the same; ‘to help the most vulnerable children in society achieve their full potential – regardless of their family circumstances, their gender, race or disability’ – Because Childhood Lasts a Lifetime.