

# A system mapping approach to understanding child and adolescent wellbeing

Research Report

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### **Summary**

Children and young people's (CYP) wellbeing and happiness at school is a priority for the Department for Education (DfE). An initial difficulty, however, is that there is only limited consensus in the literature and amongst practitioners on how 'wellbeing' should be conceptualised. Where there is greater agreement is on its multi-dimensional nature. The survey data and academic research literature identifies factors which are complex and overlapping and which affect children in different ways at different times over the period of their development.

For the purposes of this project the term 'wellbeing' was employed to identify a neutral state which may be viewed and assessed along a continuum from a high-level to a low-level. We also followed much of the literature in conceiving it to be a dynamic and interactive, rather than a static, state; one which is based on an individual's resilience and ability to thrive – a balance between the support and resources an individual can draw on and the challenges and demands they face.

The research question addressed was: What are the influences on children and young people's wellbeing? The aims of the project were:

- to understand the factors important for CYP wellbeing and their interrelationships from the perspective of practitioners and experts in child and adolescent wellbeing;
- to produce a 'system map'; and
- to inform policy.

The system mapping approach adopted provided a way of capturing practitioners' perceptions of the interdependencies and interrelationships between the various factors influencing CYP wellbeing. It enabled practitioners to contribute to the development of an holistic, visual representation of the multi-faceted nature of wellbeing and the identification of both positive and negative causal relationships. This approach is described in the methodology section of the report. The final system map that was developed and a commentary are included in the research outcomes section. We evaluate and discuss the limitations of this research approach and data collection in the conclusions section of the report.

We worked with a total of 21 practitioners from schools (mainstream and special covering both primary and secondary phases), the wider community and agencies working to support CYP's wellbeing over a series of three workshops (two in London and one in Sheffield) in January and February 2019. The first two workshops were designed to capture participants' perceptions of the factors influencing CYP wellbeing and the interrelations. The purpose of the third was to test the validity of the draft system map we had developed from the data collected at the first two workshops.

The project was limited in its scope, in terms of time and in the number of practitioners involved. Inevitably, therefore, it is subject to a number of caveats. Although the participants were not themselves an ethnically diverse group, they had extensive experience of working with CYPs from a wide range of backgrounds. Between them they possessed a depth of expertise on issues of CYP wellbeing, and this report reflects that expertise and experience. Whilst not comprehensive, this research contributes a subsection to what is potentially a larger, overarching 'wellbeing' map.

### **Key research outcomes**

A key distinction to emerge in all the workshops was between the 'internal' and the 'external' resources that a CYP is able to draw upon and the crucial significance of the interrelationship between the two in determining their level of wellbeing. Central to an individual's internal resources are the closely related intrapersonal traits of self-agency, self-awareness and self-efficacy. In relation to external resources, the central issue is not just whether they exist out there in the wider community but also whether they are properly targeted and whether and how far a child or young person has access to them. The potential link here is the nature of the advocacy, a function usually, though not exclusively, provided by an enabling adult, available to the CYP at the appropriate time.

There was largely a consensus amongst participants on the key factors influencing CYP wellbeing and what should be prioritised by practitioners, school leaders and government policy makers to enable a high level of wellbeing. These were:

- The nature of the overall educational and school environment
- The development of a range of appropriate intrapersonal and interpersonal skills
- A stable and safe family environment

Although factors outside the school environment were identified as strongly influencing CYP's wellbeing, participants considered that for many children support to build or strengthen the internal resources needed to manage the challenges and demands of life was most likely to come from within the school environment. This environment was identified as offering the potential for all children to have an equal opportunity of accessing the resources to build and strengthen their intrapersonal and interpersonal awareness, management and skills.

### Messages for policy makers

- 1. We need the big picture wellbeing is too often used as an umbrella term without any clear definition or understanding of the complex nature of the factors contributing to and influencing a high-level or low-level of wellbeing.
- **2.** The education system and CYP support systems as a whole should explicitly recognise, value and reward support for wellbeing within schools and the wider community.
- 3. Wellbeing needs to be recognised and valued in school culture and ethos.
- **4.** Supporting, nurturing adults are important to the development and wellbeing of CYPs.

# **Acknowledgements**

We wish to thank the following workshop participants for their enthusiastic and valuable contribution to the development of the system map presented in this report.

**Table 1: Workshop participants** 

Name	Role	Organisation
Katie Anderson	Safeguarding and Inclusion	Silverdale School
Lucy Bailey	Chief Executive Officer	Bounce Forward
Caroline Beswick		
Lucy Clark	Assistant Headteacher	Redwood Primary School
Steve Cowgill	Deputy Headteacher	Archibald Primary School
Suzanne Culshaw	PhD Student	University of Hertfordshire
Michael Eggleton	Deputy Headteacher	Charles Dickens School
Dan Fairchild	Youth Projects Manager	Horsham Matters
John Ivens	Headteacher	Bethlem and Maudsley Hospital School
Stuart Lindars	Deputy Headteacher	The Leigh Academy
Ruth O'Malley	Play Therapist	
Steve Rippin	Assistant Headteacher	Tapton School
Elizabeth Rose	Senior Officer for QA of Safeguarding in Schools	Manchester City Council
Lyndsey Shepherd	Head of School	Redwood Primary School
Dawn Smallwood	School Education Consultant	Bounce Forward
Charlotte Thompson	Public Health Nurse, Clinical Lead	Cumbria County Council
Michael Tomlinson		
Holly Wheatley	Teaching, Learning and Wellbeing Lead	Riverside School
Helen Yapp	Deputy Headteacher	Thomas Gainsborough School
Laura Zakubinska		

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### Introduction

### **Background**

Children and young people's (CYP) wellbeing and happiness at school is a priority for the Department for Education (DfE). An initial difficulty, however, is that there is only limited consensus in the literature and amongst practitioners on how 'wellbeing' should be conceptualised. Where there is greater agreement is on its multi-dimensional nature. The survey data and academic research literature identifies factors which are complex and overlapping and which affect children in different ways at different times over the period of their development.

In their review of the existing literature on child wellbeing a decade and a half ago, Pollard and Lee (2003) noted that although there was a considerable and rapidly expanding body of material, there was little agreement on how the term should be defined. Amongst the various definitions they identified, were 'wellbeing' as:

- an inherently positive state (for example, happiness or good health);
- a continuum from positive to negative, in the same way as one might view selfesteem;
- being determined by one's context (for example, standard of living);
- being conceived in terms of its absence (for example, depression).

It is, they concluded, a complex, multifaceted construct that has continued to elude researchers' attempts to define and measure it.

Similar frustration is both echoed in more recent literature and viewed as being compounded by additional factors (Fava, Li, Burke & Wagner, 2017). Understanding of wellbeing among children under the age of eight years old, for example, is limited because of a lack of research evidence, especially in the case of young children in marginalized groups (for example: children from ethnic minorities, disabled children and children at-risk). This is as a consequence of the research focus having been predominantly on children in middle to late childhood.

Amongst the most comprehensive of these was a study of 8000 age 14-16 year olds in England. This found that primarily the young people identified three overarching themes of wellbeing: the quality of relationships with others, safety, and freedom (Layard & Dunn, 2009). Within these themes, there were a number of subcomponents: family, friends, leisure opportunities, school, education and learning, their own behaviour, their local (physical) environment, their community, money, their own attitudes and health (mental and emotional, in particular).

Significantly in the context of this project, which focuses exclusively on the views of practitioners, there is some research evidence that has highlighted differences in the ways in which young people and adults conceptualise wellbeing. For example, in a comparative study of the perceptions of child wellbeing held by children (aged 8–12 years old), parents and teachers, the children conceptualised wellbeing as being dependent on interpersonal relationships with family and friends (Sixsmith, Gabhainn, Fleming & O'Higgins, 2007). They included pets in these relationships. Both parents and teachers on the other hand, tended to focus on the importance of school in relation to wellbeing. They also raised issues such as health and illness which the children largely omitted from their schema.

Wellbeing is commonly framed within a number of domains: physical, psychological, cognitive, social and economic. Indicators of wellbeing, both objective and subjective - although some commentators question the possibility of objectivity - are also identified in the literature. These include physical, emotional and mental health, safety, educational progress and achievement, family and peer relationships, behaviours, self-worth and self-esteem (see for example, Fauth & Thompson, 2009; and Rees, Goswami & Bradshaw, 2010).

The Children and Young People (Scotland) Act 2014 defines child wellbeing in terms of eight indicators: Safe, Healthy, Active, Nurtured, Achieving, Respected, Responsible and Included (SHANARRI) (Scottish Government, 2018). 'Included', for example, is described as 'Having help to overcome social, educational, physical and economic inequalities and being accepted as part of the community in which they live and learn.'

The SHANARRI framework offers a number of helpful waypoints towards the process of mapping the influences on children and young people's wellbeing by:

- **1.** distinguishing between 'protective factors' (i.e. those that eliminate risk or facilitate resilience, and have a positive impact on outcomes); and 'risk factors' (i.e. those that cause negative outcomes);
- **2.** recognising that risk factors often cluster together, and hence that young people who experience one risk factor are more likely to experience others and outcomes may then compound each other;
- **3.** identifying different types of 'drivers' which may impact upon wellbeing: in addition to those which are specific to the individual child, these relate to the family, the learning environment, the community and structural drivers such as the wider economy and labour market;
- **4.** highlighting that wellbeing outcomes may also act as drivers of other aspects of wellbeing, either at the same time or in the longer term (for example: not only is a highlevel of wellbeing an important outcome in and of itself, it also increases children and

young people's resilience thus enabling them to achieve and maintain a high-level of wellbeing even in adverse conditions or circumstances).

### Framing the research project

For this research project, we adopted a system mapping approach as a way of capturing practitioners' perspectives of the interdependencies and interrelationships between the various factors and drivers influencing CYP wellbeing. This approach enabled practitioners to contribute to the development of an holistic, visual representation of the multi-faceted nature of wellbeing and the identification of both positive and negative causal relationships. This approach is described in more detail in the Methodology section of the report below.

We employ the term 'wellbeing' as identifying a neutral state which may be viewed and assessed along a continuum from a high-level to a low-level. Further, we follow much of the literature in conceiving it to be a dynamic and interactive, rather than a static, state; one which is based on an individual's resilience and ability to thrive – a balance between the support and resources an individual can draw on and the challenges and demands they face.

The aims of this project are:

- to understand the factors important for CYP wellbeing and their interrelationships from the perspective of practitioners and experts in child and adolescent wellbeing;
- to produce a 'system map'; and
- to inform policy.

The research question addressed is: What are the influences on children and young people's wellbeing?

In the Methodology section below, we outline our approach to system mapping, our methods of data collection and analysis and how we chose our research participants. The final system map and commentary is included in the Research Outcomes section. In the Conclusions section, we evaluate and discuss the limitations of the research approach and data collection. We also present a summary and discussion of the key messages for policy makers from this research.

### Methodology

As discussed above, 'wellbeing' is recognised in the literature as a dynamic and interactive 'state', not static, based in an individual's resilience and ability to thrive – a balance between the support and resources an individual can draw on and the challenges and demands they face. For this research, we have used 'wellbeing' to describe a neutral state, further defined on a continuum from a high-level of wellbeing to a low-level of wellbeing. Perceptions of what influences whereabouts on the continuum an individual is at any one time may be categorised as belonging to one or more of the domains identified within the literature; for example, the social or the psychological domain. This may be further influenced by context / environment, such as living in care, or cultural perceptions of wellbeing. Below we outline our approach in more detail.

### A system mapping approach

A 'system' can be considered as a framework of concepts, objects and / or attributes and the relationships between them – a structured set of 'things', factors or variables, working together. How these 'things' work together can be visualised in a system map.

A system map differs from a flow or spider diagram. Its importance lies in identifying and visualising the connections between the factors identified in the map as causal relationships – where one factor causes a change in the other (see, for example, Alford, 2017). Mapping as a process can be both an effective data gathering tool and, equally, a learning experience for those taking part in a collaborative process of identifying the various factors and the relationships between them. The physical act of participating in the development of a map as part of a group could be construed as contributing to the development of mental models, and part of a learning process in itself (Kinchin, 2016). The three events held for data collection for this project were defined as workshops rather than focus groups as participants took part in a collaborative process to construct or review a draft system map.

Determining what was and what was not included in the map was an important aspect of mapping. For this mapping exercise, we used the research question to frame the mapping process. For example, issues of school funding and teacher wellbeing that were raised were considered from the context of how they influenced CYP wellbeing, such as how they impacted, or were a result of, a wider focus and culture of wellbeing within the education system and an individual school.

The CYP wellbeing system visualised as a result of this research is made up of the causally linked factors as identified by practitioners, relevant to CYP's wellbeing. These factors are represented by boxes. Within a system map causal relationships are visualised as positive or negative, using a series of arrows. A positive causal relationship

is seen as one where both variables or factors increase in the same direction, i.e. an increase to variable *a* means an increase in variable *b*. A negative causal relationship is identified when the variables or factors change in different directions, i.e. an increase to variable *a* results in a decrease in variable *b*. The factor at the tail of the arrow has a causal effect on the factor at the point of the arrow.

A positive causal relationship is visualised with a solid arrow

A negative causal relationship is visualised with a series of dashes and a square arrow head

Factors can be clustered in themes or domains and their space and place on the map can indicate the 'level of', for example, wellbeing. The weighting of different factors, what has greater or lesser influence, can be visualised by using arrows of a differing thickness. We have not weighted the relationships in the final system map developed for this research, but we have considered the relative influences of different factors in the commentary. As discussed in the research outcomes below, the interrelationships between factors relating to CYP wellbeing are often cumulative and can affect different individuals in different ways depending on context and timing. The system map can visualise leverage points – these become obvious on the map as a result of the number of arrows representing causal relationships going to and moving from a given factor. Identifying leverage points can be important for policy decisions as they can help to identify points for interventions within the system.

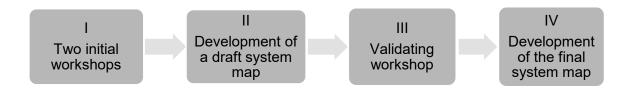
Feedback loops within the map identify the dynamic nature of the system and the interrelations. These can be **reinforcing loops**, which give a push in a given direction and enhance change. The original factor is changed by the feedback as a result of moving though the map. A **balancing loop** resists and dampens change. It counteracts the changes to stabilise the system – the original factor is unchanged. An example of a reinforcing loop within the education system in England might be: a demand for 'smaller class sizes' results in an increase in pupil attainment, which in turn increases the demand for smaller class sizes. This demand may be resisted by the lack of qualified teacher capacity in the system, funding, or other effective options to increase pupil attainment. Therefore, a balancing loop stabilises the system and maintains the status quo.

### Mapping workshops

In developing the wellbeing system map for this project, the aim was to reflect the views of practitioners working with CYPs on a regular basis. To achieve this, we held a total of three workshops. The first two of these were designed to capture participants' perceptions of the factors influencing CYP wellbeing. The purpose of the third was to test

the validity of the draft system map that we developed following the two initial workshops. (See **Figure 1** below)

Figure 1: The development of the system map



### **Initial workshops**

The initial mapping workshops were held in London on 18 January, 2019; and Sheffield on 28 January, 2019. Each of them had the same format. Importantly, the second workshop did not attempt to build on the findings from the first one. This was in order to ensure that any differences in the perspectives of participants working with CYPs from the two different geographical contexts were not lost.

Those invited to attend the two workshops included practitioners working in schools (mainstream and special covering both primary and secondary phases); in the wider community; and in agencies working with CYPs to support wellbeing. They were from rural as well as urban settings. Although the participants were not themselves an ethnically diverse group, they did work with CYPs from a wide range of backgrounds and contexts. A total of 19 participants attended the two workshops. Between them they possessed a depth of knowledge and experience of CYP wellbeing.

After accepting the initial invitation to attend a workshop, the participants were sent a follow-up email reminder with some suggested questions, which they could use to consult on with colleagues or students prior to the workshop. In order to get the most from the available workshop time, we used some light-touch structure to guide participants' thinking and input during the session. The first two workshops each ran for three hours.

Participants were introduced to the concept of system mapping; what we meant by a 'CYP wellbeing system'; why we needed to identify and label the key variables/ factors relating to wellbeing; and how we would recognise and present the relationships between factors to build the map. No previous experience of system maps was required from the participants. They were given the following working definition of wellbeing to consider:

'Wellbeing': a dynamic and interactive 'state', not static, based on an individual's resilience and ability to thrive – a balance between the

support and resources an individual can draw on and the challenges and demands they face.

They were also introduced to the concept of wellbeing as a continuum and how this might present itself within different domains. Initially they were asked to identify the influencing factors and relationships relating to their own area of expertise and experience, domain or dimension, of CYP wellbeing, noting these on post-it notes. They were then supported to work in one of two small groups to start to map the interdependencies and relationships, adding and discussing their post-it notes. Participants from schools were split by education phase – with one group consisting of primary and the other largely of secondary school teachers and leaders. Participants from other organisations were split across the two groups. They were given the following questions to consider during the activity:

- Is the way we have described the concept of 'wellbeing' useful?
- Should we be considering a different (e.g. more tightly defined) conceptualisation?
- If you accept the idea of a continuum of wellbeing, what are the factors or indicators that influence where an individual is on the continuum?
- How significant or otherwise are issues such as context, time, environment or cultural perceptions?

Participants were then prompted to think about where the factors they had identified might fall on a continuum between a high-level and a low-level of wellbeing, and the relationships between the factors. They were also asked to consider what might be the core, central factors relating to CYP wellbeing, which might form the foundation loop or loops for the system map - the 'system engine'.

For the second half of the workshop, participants were brought together to try to create a single map. We facilitated the discussion and map building process. Participants were asked to explain the factors they had identified, any relationships between these factors and to start to build a single map, if this was possible. This whole-group activity was digitally recorded to capture the participants' explanations and discussions, and photographs were taken of the single map as it was progressed. It was not assumed prior to the workshops that a single map covering both primary and secondary school, and potentially a range of contexts, would work. Participants did not, however, identify factors that they considered were fundamentally different between education phases or CYP contexts that required separate maps. The maps developed in the first two workshops were sufficiently high-level and generic to encapsulate the different contexts.

The next stage was the development of a single draft system map to be used as the basis for discussion in the third, final workshop. This draft map was primarily an amalgam of the outputs from the first two workshops. It was constructed using the digital

recordings; the photos of the emerging maps from the whole-group activities; and the final maps developed by participants. The process was an iterative one during which we considered the maps created in the workshops, identifying similarities and differences; conceptualised clusters of factors where necessary; and added arrows to the map as relationships emerged.

### Validating workshop

The final workshop was held in London on 15 February 2019 where we presented the draft system map. There were seven participants, five of whom had attended one or other of the previous workshops, and two who were new to the process. This latter group offered an opportunity to gauge how accessible the draft map was for someone not involved in its initial development and who was possibly unfamiliar with system mapping. The aim of the workshop was to ascertain the extent to which participants considered that, at this stage in its development, the system map offered a valid picture of the various factors influencing children and young people's wellbeing and the interrelationships between the factors. Participants were, therefore, encouraged to challenge, confirm or add to the map. While we sought to gain consensus on the validity of the system visualised, we were aware that we might need to consider further how to recognise within the map conflicting perceptions and interpretations.

Initially the participants were split into one of two groups, each of which included participants from the earlier workshops and a new participant. They were asked to consider:

- Are there any key factors missing or any that shouldn't be included?
- Does the system engine represent the central dynamic of CYP wellbeing i.e. does it reflect the wellbeing 'balance' identified in the previous workshops?
- Are all the relationships identified by the arrows 'causal'? Are there any further arrows to add?
- Are the domains/ themes you expected to see emerging in the map? How would you conceptualise these?

The two groups were then brought together to discuss and revise a single version of the draft map. This was an opportunity to share ideas between the groups, to confirm how the key domains/themes should be conceptualised, to consider the weighting of relationships and whether more than one map was needed. In the event it was agreed that a single map was capable of capturing the key influences on CYP wellbeing and their interrelationships.

Following the final workshop, we developed a further, more comprehensive and cohesive, version of the system map. This was then shared with two participants who

had not been able to attend the final workshop - discussed by phone with one and face-to-face with the other. The intention was not to make any significant changes to the map based on this further feedback but to provide a 'sense check' that the CYP wellbeing system was recognisable and the language used accessible. We made two minor changes to the language used as a result of this further feedback.

Importantly, the final map reflects the accumulation of discussion across practitioners, meaning that the *scale* at which practitioners agreed on a certain point is not reflected (for example, whether all practitioners or a smaller proportion raised a certain point). However, the iterative process of building the map and seeking practitioners' consensus, and the validation process of sharing the map with participants who had not yet seen it and situating it within the wider literature, was used to ensure the final map provided a representative overall view across practitioners.

### **Ethical considerations**

Participants received information on how their input would be used, how we would manage any data collected, and how we planned to report the research outcomes. Workshop participants signed a consent form and confirmed whether they gave permission for their contribution to be acknowledged in this report. Please see the Acknowledgement section above for a list of the research participants. All contributions are anonymised in the reporting of the research outcomes below.

### Research outcomes

### Overarching system map

The overarching system map (**Figure 2**) presents the workshop participants' views on what influences CYP wellbeing. We discuss the development of the system engine and the key influences on CYP wellbeing in the sections below.

### **Developing the system engine**

As noted in the introduction, we perceive 'wellbeing' as being a neutral term identifying an individual attribute as does, for example, the term 'self-esteem'. Perceived in this way, in judging the state of a person's wellbeing we do so along a continuum from high-level to low-level. In discussion during the workshops this continuum was generally interpreted by practitioners as the sense of an individual 'thriving' at the high-level end, and of 'struggling' at the low-level. It was felt by some, however, that thriving might be too aspirational a term and that realistically the notion of 'coping', might more accurately reflect the high-level state of wellbeing for the majority of CYPs.

In the system map (Figure 2), the system engine is identified in the pink coloured boxes. These represent the central dynamic of CYP as perceived by the workshop participants. It visualises the key distinction to emerge in all the workshops between the 'internal' and the 'external' resources that a CYP is able to draw upon and the crucial significance of the interrelationship between the two in determining their level of wellbeing. Central to an individual's internal resources are the closely related intrapersonal traits of self-agency, self-awareness and self-efficacy. That is:

- Self-agency: a sense of being in the driving seat when it comes to one's actions
- Self-awareness: knowing and understanding oneself, with the added implication that such knowledge and understanding is accurate and well-founded
- Self-efficacy: the belief that one will be successful in carrying out some particular task or activity

In relation to external resources, the central issue is not just whether they exist out there in the wider community but also whether they are properly targeted and whether and how far a child or young person has access to them. The potential link here is the nature of the advocacy, a function usually, but not exclusively, provided by an enabling adult, available to the CYP at the appropriate time.

positive support within wider <> specialist expertise <> use of uptake of community across range of educational 'labels' staff CPD recognition and <> focus on wellbeing & social needs available reward for wellbeing <> sense and childhood 0 <> use of illegal support from of belonging development within Strength of drugs & alcohol interdisciplinary <> access to necessary education system initial teacher training friendships approach to and type of social resources (external) support for media/networking' wellbeing <> value of wellbeing explicit within wellbeing the school curriculum recognised in <> recognition / value Sense of school culture placed on CYP support available stability of family identity and ethos wellbeing within school for wellbeing within structures the local community <> successful learning access to <> emotional literacy (early years) <> advocacy nurture within <> parental engagement language home development with school environment <> family > ability to economic <> access to learning need communicate feelings stability necessary <> secure resources attachment resilience (internal) <> ability to ⇔ required sleep achieved 
◀ Ability to form ensure safe relationships environment 'thriving'-Some types of development disorder self-efficacy <> abuse 'struggling' <> emotional regulation <> housing <> self-awareness conditions <> organisation <> basic needs skills (executive function skills) satisfied sense of isolation <> nutrition vulnerability mental health <> ability to cope with A change/transition physical health A positive causal A negative causal adverse childhood relationship relationship experience variables change in both variables change in the same direction opposite directions <> Level of...

Figure 2: A practitioner perspective on what influences CYP wellbeing

Its positioning within the system map identifies the central importance of advocacy and its relationship not only with the accessibility of external statutory, educational and community resources, but also with the levels of family, peer and friendship support. External advocacy has the potential to empower CYP, but how successful it is in achieving this will in part, as the map indicates, be determined by such inner resources as self-awareness and self-efficacy. These in turn are significant in enabling CYPs to act as self-agents or self-advocates.

Mapping the interrelationships, positive and negative, between the internal and the external or between other factors influencing a child or young person's wellbeing inevitably poses questions of balance and level; and these were much debated during the workshops. The major difficulty lies in attempting to capture the ways in which the interaction between various of the influences will vary in strength for individual CYP depending not only on the level of their inner resources, but also in different contexts and at different times. Factors influencing wellbeing are often cumulative in nature. This in turn makes it difficult to determine how significant the interaction will be for an individual's wellbeing at any given point. For example, a 'sense of belonging' is important in a general sense, but its significance is not fixed for all CYPs. Therefore, rather than using adjectives or adverbs in the description of factors within the map we have, for the most part, used the symbol <> to indicate 'level of'.

With 'vulnerability', for instance, the level experienced by a child or young person was in part considered to be the result of 'external' factors, either adverse or supportive, within the family, friendship groups, the school or the community. Participants in the workshops identified causal relationships between a range of factors - the level of adverse childhood experience, basic needs or the stability of family structures - and the level of a child or young person's vulnerability. Equally, however, internal factors such as a child or young person's capacity to cope with change or transitions, or their level of emotional regulation, were also considered to influence their level of vulnerability.

### Key influences on CYP wellbeing

There was largely a consensus amongst participants on the key factors influencing CYP wellbeing and what should be prioritised by practitioners, school leaders and government policy makers to enable a high level of wellbeing. These key factors, which appear as clusters on the overarching system map and are reproduced separately below, were:

- 1. The nature of the overall educational and school environment
- 2. The development of a range of appropriate intrapersonal and interpersonal skills
- **3.** A stable and safe family environment.
- The nature of the overall educational and school environment

Factors outside the school environment were identified as strongly influencing a child or young person's wellbeing. Nevertheless, it was considered that for many children support to build or strengthen the internal resources needed to manage the challenges and demands of life was most likely to come from within the school environment.

This environment was identified as offering the potential for all children to have an equal opportunity of accessing the resources to build and strengthen their intrapersonal and interpersonal awareness, management and skills. Workshop participants felt strongly that the extent to which the value of positive wellbeing was recognised within both the school culture and ethos, and the educational environment more generally, was pivotal to CYP wellbeing (see **Figure 3**). This included the wellbeing of all members of the school community, not just the pupils.

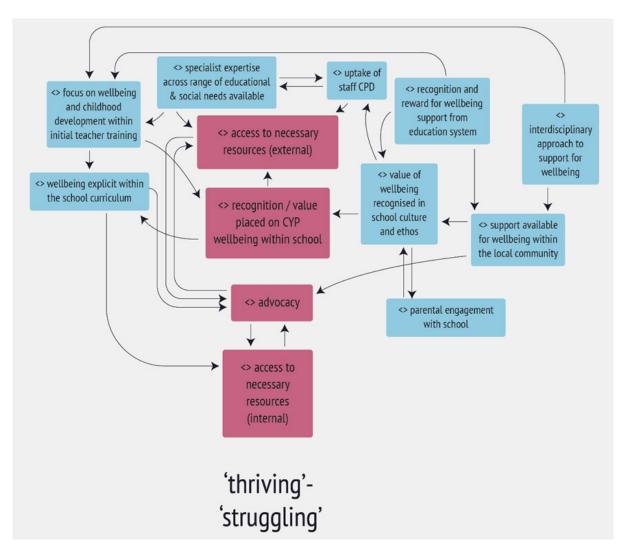


Figure 3: CYP wellbeing within the overall educational and school environment

Participants were clear that although interventions such as the introduction of 'wellbeing' within the content of the curriculum had some benefits, its effectiveness was reliant on other factors. In particular, the extent to which school leaders, teachers and support staff

value and model appropriate behaviours and ways of thinking, and demonstrate the self and social awareness and relationship skills that encourage a high-level of wellbeing.

Although some schools were felt to be successful in prioritising wellbeing and saw the benefits, participants felt that schools' leadership teams often felt constrained by external factors such as performance measures. They either did not recognise a link between wellbeing, pupil behaviour and successful learning, or felt unable to make the necessary changes within the current funding framework. It was thought that the value of wellbeing was likely to be more of a focus for all schools if there was recognition and reward for effectively enabling its support. This could, for example, be through the inspection regime or through funding.

A particular issue was the use and benefits or otherwise of 'labels' in society and the education system. This was strongly debated in the first workshop. For example, the explicit recognition and labelling of a child's learning needs could be considered to be beneficial for identifying the support required; but equally it could lead to an increase in a child or young person's sense of isolation and hence their vulnerability.

# 2. The development of a range of appropriate intrapersonal and interpersonal skills

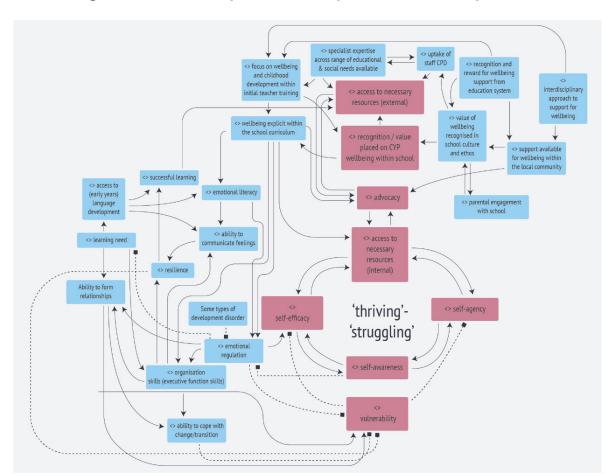


Figure 4: The development of intrapersonal and interpersonal skills

The complex and interrelated factors that influence CYP wellbeing were considered to require that schools adopted an interdisciplinary approach to its development. In addition, they should be provided with the necessary support to build capacity and expertise in understanding how to help pupils develop the personal skills and internal resources needed to thrive (see **Figure 4**).

Several of the participants were working with external organisations to support pupils with, for example, building resilience or the development of executive function skills such as organisational and planning skills and self-regulation. Executive function skills also include the ability to concentrate, working memory, concept formation and idea generation, the ability to move from one task to another and inhibitory control. The level of access to language development, especially in early years, was also felt to impact on CYP's emotional literacy and communication skills and their self and social awareness.

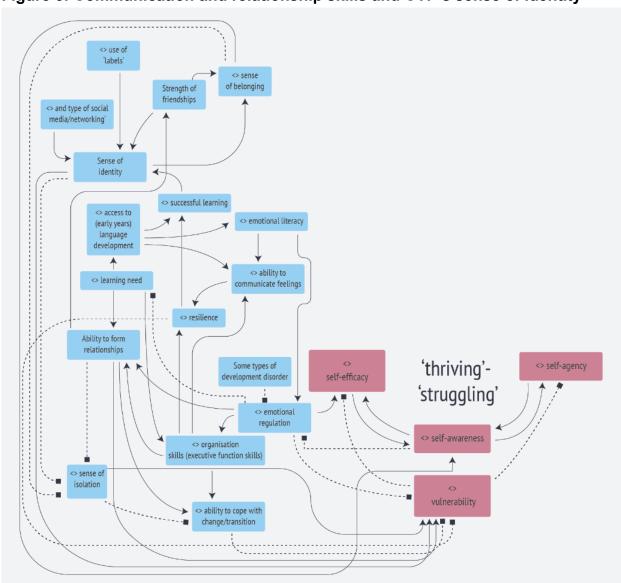


Figure 5: Communication and relationship skills and CYP's sense of identity

As well as being in part framed within their cultural and family context and beliefs, CYP's perceptions of self and identity are often considered to be closely related to their ability to form appropriate and positive friendships. In some of the research literature referred to earlier, for example, CYPs commonly stressed the great importance of friendships to their wellbeing. The workshop participants, however, focused more on the enabling communication and relationships skills required to maintain healthy relationships and a sense of identity and belonging (see **Figure 5** above).

### 3. A stable and safe family environment

Relationships were also considered in the context of CYP's ability to make secure attachments with a caring, nurturing adult. Adverse childhood experiences in particular were identified as potentially having a damaging impact on CYP's ability to form relationships. Parental (carer or guardian) engagement with the school was seen to influence both the home and the school's level of focus and value given to wellbeing. The stability of family structures, the nurture and safety of the CYP's environment, and positive and specialist support from the wider community, were interrelated and influence the wellbeing of the child or young person.

A lack of basic needs, such as good housing and nutrition, were considered to influence physical and mental health, and increase a child or young person's level of vulnerability and subsequently decrease their level of wellbeing (see **Figure 6**).

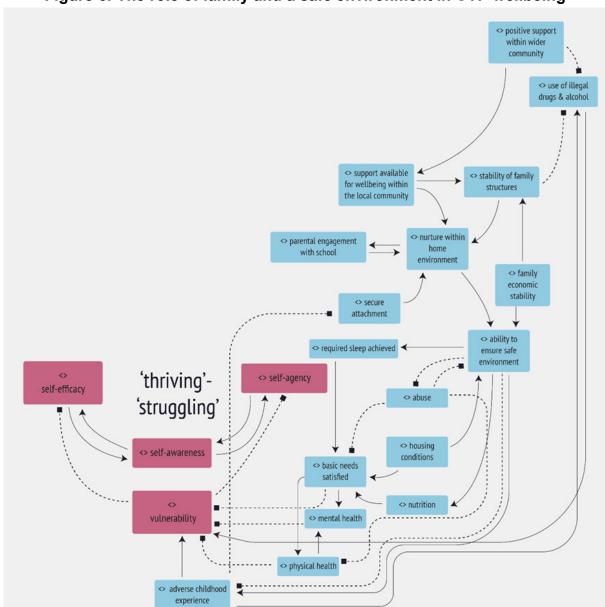


Figure 6: The role of family and a safe environment in CYP wellbeing

### **Conclusions**

### Reflection on the system mapping process

Using a system mapping approach emphasises the need to focus on the linking of ideas and the identification of relationships between relevant factors. During the workshops, as researchers we sometimes needed to step back to ensure that we did not influence the making of connections and identifying relationships in order to ensure that the map reflected the participants' perspectives not ours. The intention was to confine our role to asking questions and prompting thinking.

Some participants had strong individual expertise and views about specific aspects of CYP wellbeing, others had a more general understanding. Developing ideas for an overarching concept map was a challenging activity to ask them to take part in, but they rose enthusiastically to the challenge. The process enabled practitioners from different contexts and with different experience and expertise to develop an understanding and to visualise CYP wellbeing as a system, drawing on different disciplinary fields and areas of practice.

Recording the discussions during the final stage of each of the workshops was invaluable for our analysis. It enabled us to return to the discussions if, for example, we were unsure where further arrows needed to be added to the map, what was meant by a particular term on a post-it note, or the underpinning idea that helped us to conceptualise some of the factors identified by the participants.

Practitioners are busy people, so we limited the number and time of the workshops in order not to overburden them. The opportunity to return with our initial interpretations in a draft map for discussion and validation with the practitioners in the third workshop was of major importance in the process. We felt that in the first two workshops, we were often identifying what were participants' emerging, but undeveloped, ideas about the factors influencing CYP's wellbeing and, in particular, about the relationships and interdependencies between them. By taking these initial ideas away and creating a single draft map for the practitioners to come back to, to reflect on and to revise as necessary, we were able to access a deeper understanding and capture more developed ideas about the influences and their interconnectedness.

### Limitations of the data

It could be claimed that the final system map presents essentially a Western philosophical view of the importance of self, with insufficient emphasis on the role of community, cultural beliefs and religion on wellbeing. This is an important caveat. Although the participants occupied a number of educational and pastoral roles in a

variety of settings, and had expertise and experience of working with a wide range of CYPs from different backgrounds and cultures, they were not an ethnically diverse group.

Their numbers were also small, with only 21 participants in total. As such, their views cannot be considered to be necessarily representative of CYP practitioners as a whole. Rather what is offered is a snap-shot based not on an extensive survey but on research that was limited in terms of time and scope.

Nevertheless, taking into consideration the caveats referred to above, given the make-up of the groups and what is apparent from a brief trawl of the literature, we are generally confident that the system map which emerged from the work of the participants presents an accurate and valid picture. This research, therefore, contributes a sub-section to what is potentially a larger, overarching 'wellbeing' map.

### Key messages for policy makers

A major strength of the system map is that it allows consideration of a whole system, rather than being confined to factors in isolation. Below, we outline what this project suggests are key messages for policy makers.

We need the big picture - wellbeing is too often used as an umbrella term without any clear definition or understanding of the complex nature of the factors contributing to and influencing a high-level or low-level of wellbeing. It is commonly linked to single ideas such as 'happiness', or to mental health issues, without recognising the wider complex interplay and balance of intrapersonal and interpersonal skills, access to external resources, and the demands and challenges of life that sit behind 'wellbeing'.

The education system and CYP support systems as a whole should explicitly recognise, value and reward support for wellbeing within schools and the wider community, making clear the relationship between the factors contributing to high-levels of wellbeing, CYP behaviour and life-style choices and successful learning.

Wellbeing needs to be recognised and valued in school culture and ethos. Workshop participants were clear that a whole-school approach to wellbeing that is both implicit in the everyday behaviours and ways of thinking of all members of school – staff and pupils – and explicit across the curriculum is needed. The introduction of a wellbeing curriculum into a school that does not recognise, understand or value wellbeing within its culture, is likely to have limited impact.

A clear message from practitioners is that supporting, nurturing adults are important to the development and wellbeing of CYPs. Within the school environment greater capacity and interdisciplinary expertise is needed to enable effective support and development for the 'whole child'. For example, teachers and support staff are likely to need additional training to understand how all CYPs can be supported to build and strengthen their executive function skills, which were considered to contribute to a high-level of wellbeing. The relationship between the level of executive function skills, wellbeing and successful learning is an important message for schools and policy makers.

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