SOMERSET EMOTION COACHING PROJECT

FULL EVALUATION REPORT

JULY 2017

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>Aims of the project</td>
<td>2</td>
</tr>
<tr>
<td>Executive summary</td>
<td>2</td>
</tr>
<tr>
<td>Programme outline</td>
<td>4</td>
</tr>
<tr>
<td>Emotion coaching</td>
<td>5</td>
</tr>
<tr>
<td>Outcomes and findings</td>
<td>6</td>
</tr>
<tr>
<td>Methodology</td>
<td>34</td>
</tr>
<tr>
<td>Case Study Theme 1: Increased empathic awareness and improved ability to label and communicate emotions</td>
<td>11</td>
</tr>
<tr>
<td>Case Study Theme 2: Improved self-regulation and wellbeing in children and young people</td>
<td>15</td>
</tr>
<tr>
<td>Case Study Theme 3: Impact of using theoretical frameworks: understanding the neuroscience</td>
<td>17</td>
</tr>
<tr>
<td>Case Study Theme 4: Increased enjoyment and engagement in education settings</td>
<td>19</td>
</tr>
<tr>
<td>Case Study Theme 5: Meta-Emotion and increased wellbeing in adults</td>
<td>22</td>
</tr>
<tr>
<td>Case Study Theme 6: Improved relationships and communication</td>
<td>25</td>
</tr>
<tr>
<td>Case Study Theme 7: A culture of openness and a joined up approach</td>
<td>29</td>
</tr>
<tr>
<td>Case Study Theme 8: Increased wellbeing in the workplace</td>
<td>31</td>
</tr>
<tr>
<td>References</td>
<td>35</td>
</tr>
<tr>
<td>Annex A What is Emotion Coaching?</td>
<td>37</td>
</tr>
<tr>
<td>Annex B Participating organisations and champions</td>
<td>38</td>
</tr>
<tr>
<td>Annex C Dissemination Conference Report</td>
<td>39</td>
</tr>
</tbody>
</table>
In summary, the project has:

- promoted the use of Emotion Coaching techniques by community groups in their everyday practice with children and young people;
- provided a framework for helping practitioners to manage their own emotional self-regulation;
- integrated mindfulness into practice;
- supported children and young people's capacity for pro-social behaviour and emotional self-regulation;
- built on and strengthened current positive practices and partnerships that contribute to and promote community networks and collaborative work through a shared framework;

The project has had far reaching impact on both children and young people, parents and those adults who work alongside them. Over the two years it has run, there have been continued reports that engagement in an Emotion Coaching approach has led to: increased empathic behaviours and understanding of a repertoire of emotions; increased self-regulation of behaviour; increased enjoyment and engagement in education settings; improved relationships and communication; and an increased culture of openness. Additionally, those working in the children and young people's workforce have identified joined-up communication across services and increased wellbeing in the workplace.

To date, the project has spanned over two years and consists of three phases of training. During this time, the two organisations have worked together to train over 160 champions to take on leadership roles within their own organisations and across services working with professionals and young people. This has included working with Somerset Education Psychology Service and Emotional Literacy Support Assistants (ELSAs) to embed Emotion Coaching into their practice. The 2015–16 phase of the project was led by Dr Sarah Temple, a Somerset GP and director of EHCAP and Dr Janet Rose, a Reader in Education from Bath Spa University, now the Principal of Norland College. The 2016–17 phase of the project has been led by Dr Sarah Temple, Richard Parker, Head of Consultancy at Bath Spa University, and Rebecca Digby and Eleanor West, Research Associates at Bath Spa University. The project began its final phase in May 2017 and will complete at the end of December 2017. This will focus on facilitator training and is led by Dr Sarah Temple.

The project addresses key government policies which seek to raise the attainment gap for disadvantaged pupils and improve provision for children and young people with social, emotional mental health difficulties (SEMH) (DfE, 2013: 2014). It addresses Ofsted's new Common Inspection framework in relation to pupils' personal development, behaviour and welfare. The project takes heed of the Department of Health's Report "Future in mind" (Doh, 2015) which highlights the need to facilitate greater access and standards for CAMHS services, promote positive mental health and wellbeing for children and young people, have greater system co-ordination and generate a significant improvement in meeting the mental health needs of children and young people from vulnerable backgrounds. It responds to the Mindfulness All-Party Parliamentary Group report (2015) which emphasises the role of mindfulness in tackling the 'mental health crisis' and the promotion of its use in education. Finally, it helps to address the concern about emotional health and wellbeing highlighted by the recent Somerset Children and Young People Survey (SCYPS). The work resonates with the recent report to Public Health England (2014) which showed that:

- Pupils with better health and wellbeing are likely to achieve better academically
- Effective social and emotional competencies are associated with greater health and wellbeing, and better achievement
- The culture, ethos and environment of a school influences the health and wellbeing of pupils and their readiness to learn

The culture, ethos and environment of a school influences the health and wellbeing of pupils and their readiness to learn.
Executive Summary of Findings:
referral process for children and young people and improve access to services as specified in the following outcomes:
wellbeing, enhance skills in supporting children and young people’s emotional health and wellbeing, facilitate the
For further details on the 2015-16 phase, please see Rose et al. (2016b).

AIMS OF THE PROJECT: PHASE 2016-17
The key aims of the 2016-17 phase of the project build on the aims to increase understanding of emotional health and wellbeing, enhance skills in supporting children and young people’s emotional health and wellbeing, facilitate the referral process for children and young people and improve access to services as specified in the following outcomes:
- Strengthen the delivery and network of Emotion Coaching champions across Somerset, so they increase their impact on promoting children and young people’s social development and mental wellbeing
- Increase the number of key children and young people staff who have undertaken the Emotion Coaching training programme and increase their impact to promote children’s social development and mental wellbeing

EXECUTIVE SUMMARY OF FINDINGS:
PHASE 2016-17
1. In total 60 champions began the training, with 42 champions completing the training programme during the 2016-17 phase and remaining sufficiently committed to the project. Over 2 years 63 champions provided details of a cascading action plan, signifying their commitment to the project and confidence in disseminating their training in the workplace.

2. The main evidence of impact over the 2016-17 phase was collected from exit questionnaires and psychometric questionnaires from 50% of the 2016 training cohort.

3. Of the 42 champions who joined the project, 74% were identified as professionals within school settings (Teachers, Early Years practitioners, SENCOs, PFSAs), 17% worked in Secondary schools, 26% in Primary schools and 31% in an Early Years setting, 14% were health professionals within the primary care setting (Therapist, Health Visitor), and 12% were from a range of organisations within the children and young people’s workforce in Somerset including GetSet. During both the 2015-16 and 2016-17 phases of the project the majority of champions were white females.

4. 69% of the 30 completed questionnaires from the 42 champions who trained in 2016 agreed that the project and training increased awareness of emotional mental health and 25% agreed that it sometimes did.

5. 85% of the 30 completed questionnaires from the 42 champions who trained in 2016 agreed that Emotion Coaching training improved adult awareness, knowledge and self-regulation and 15% agreed that it sometimes did.

6. Emotion Coaching training had a positive impact on the champions themselves by increasing their neuroscientific knowledge of emotional regulation and mental health; by increasing their awareness and understanding of children’s emotions and the link between behaviour and emotions; by improving staff empathy and patience in taking the perspective of the child; by providing them with a new and structured tool, particularly having a step by step approach and ‘scripts’ to manage situations and by increasing their confidence and skills in managing challenging situations.

7. 91% of the 30 completed questionnaires from the 42 champions who trained in 2016 agreed that training in Emotion Coaching had a positive impact on professional practice, and 9% agreed that it sometimes did. Responses also indicated that Emotion Coaching training had a positive impact on the champions’ professional practice by improving the relationships and connections with children and young people and by reducing the number of behavioural incidents. It helped to de-escalate difficult situations, with a positive impact on children and young people’s behaviour. Many champions testified to the way it had changed their practice for the better, with significant number commenting on the positive impact of learning to regulate their own emotional states in order to effectively ‘tune in’ to the children and young people they worked with.

8. 85% of the 30 completed questionnaires from the 42 champions who trained in 2016 agreed that Emotion Coaching training improved children’s behaviour and wellbeing, and 14% agreed that it sometimes did. Responses also indicated that Emotion Coaching facilitated more discussion about emotions in conversations with children and young people; that it increased understanding in children and young people about their own emotions; that it helped children and young people to be more able to link their feelings to their behaviours and enabled them to calm down more quickly; that it helped children and young people to feel heard and valued and that it improved their problem solving skills and facilitated new solutions leading to more positive outcomes.

9. 75% of the 30 completed questionnaires from the 42 champions who trained in 2016 agreed that Emotion Coaching training supported a culture of openness and person-focus, whilst 25% agreed that it sometimes did. This was affirmed in statements made by the champions who commented how it provided a means to help children and young people to open up about their emotional mental health by creating acceptance that it is alright to talk about emotional mental health problems, and that it is alright to express uncomfortable feelings like anger or distress. The way in which Emotion Coaching has helped champions to see the whole person rather than just the problem is also evident, particularly in relation to helping practitioners to look ‘underneath’ or ‘beyond’ a child’s behaviour, creating opportunities to be more person-focused.

10. 69% of the 30 completed questionnaires from the 42 champions who trained in 2016 agreed and 27% agreed that sometimes the use of the Mental Health Toolkit project had increased access to and awareness of information about emotional mental health and specialist services.

11. 46% of the 30 completed questionnaires from the 42 champions who trained in 2016 agreed and 44% agreed that sometimes the project and use of the Mental Health Toolkit contributed to a more joined-up approach to sharing information with children/young people about emotional mental health.

12. In total eight case studies were generated by the champions which illustrate how Emotion Coaching has become embedded into practice and used by champions to support children and young people’s emotional mental health, improve behaviour, generate a culture of openness and facilitate joined up working.

13. The range of training resources developed over the two year programme with the support of the champions - including Emotion Coaching information sheets, parent leaflets, videos of champions cascading from all areas (primary, secondary, GetSet, SENCO, PFSAs), and links to further organisations and videos - have supported successful dissemination of Emotion Coaching within organisations.
The programme has spanned over two years which were divided into a 2015-16, 2016-17 and a final 2017 phase. 121 champions from Educational and Health sectors were trained during the 2015-16 phase and 42 champions in the 2016-17 phase. Both the 2015-16 and the 2016-17 phases began with an initial one day workshop introducing Emotion Coaching and the neuroscience of attachment, along with information about our involvement with the Somerset Children and Young People’s Health and Wellbeing Programme, safeguarding risk management and Mental Health Toolkit. The 2015-16 phase was followed by six half-day workshops. The first three focused on training in Emotion Coaching utilising adaptations of the Tuning into Kids evidence based programme (whilst retaining fidelity), exploring how mindfulness can be integrated into the work of practitioners, practical usage of the Mental Health Toolkit (MHT) and considering how the MHT can be used effectively to increase access to services. The final three workshops focused on planning ways to build capacity and networks, sharing services functions and developing ideas in relation to cascading the training with the champion’s own organisations. The 2016-17 phase consisted of four half-day workshops which followed a similar pattern to phase one. The first two workshops focused on training in Emotion Coaching and the final two were centre on networking and supporting champions with cascading their training within their settings and beyond. Materials that had been generated during the 2015-16 phase of the project were made available to participants through the MHT and the EHCAP website.

Safeguarding issues were addressed at the first workshop of both the 2015-16 and 2016-17 phases. Safeguarding is the golden thread through all work in children and young people’s services. Emotion Coaching champions are expected to have a minimum of Level One Intercollegiate (Health Staff) or Basic Awareness (Education Staff) statutory training. Bath Spa and EHCAP facilitators hold current statutory safeguarding training at equivalent to Intercollegiate Level Three. We were mindful of the risks posed particularly in schools in managing safe discussions as emotions are more openly discussed. We were also mindful that in opening up discussions with professionals, parents, children and young people about emotions, there may have been disclosures.

Ongoing evaluation of the programme content was collected and collated to inform the programme as it developed. During the 2015-16 and the 2016-17 phases, participants were asked to complete evaluation forms after each workshop. During the 2015-16 phase, an evaluation by an external independent researcher was also commissioned by Bath Spa and EHCAP to support the evaluation of the workshops. This informed the structure of the 2016-17 phase of the project.

**Programme Outline: 2015-16 and 2016-17 Phases**

Emotion Coaching is a useful tool or approach in supporting children’s behaviour and mental and emotional health and wellbeing. It is based on the work of John Gottman and colleagues in the USA. It emphasises the importance of considering the emotions which underlie particular behaviours, “in the moment,” before dealing with limit setting and problem solving (Gottman, Katz and Hooven, 1997). Emotion Coaching views all behaviour as a form of communication and makes an important distinction between children’s behaviour and the feelings that underlie that behaviour. A key belief is that all emotions are acceptable, but not all behaviour. It is about helping children to understand their different emotions as they experience them, why they occur and how to handle them, leading to happier, more resilient and well-adjusted children. Emotion Coaching engages with the adult’s beliefs, attitudes, awareness, expression and regulation of emotion, their reactions to children’s expressions and the adult’s support or coaching of children’s emotions (their meta-emotion philosophy).

Gottman et al.’s (1996) initial research on Emotion Coaching drew attention to less effective ways of supporting children’s emotional regulation and subsequent behaviour. Adults who are predominantly ‘disapproving’ or ‘dismissive’ of children’s emotions tend to ignore, criticize or reprimand affect displays, particularly intense emotions, which may often manifest as challenging behaviour. Such adults may view stress-induced emotional expression as a form of manipulation, a form of weakness and/or something that should be avoided or minimized (collectively known as ‘emotion dismissing’). An emotion dismissing style, whether disregarding or punitive, has a negative impact on children's emotional regulation and behavioural outcomes, which includes their mental and physical health (Gottman et al., 1996).

Research on Emotion Coaching in England (Rose et al., 2015; Gus et al., 2015) complements the evidence base from the USA (Gottman et al., 1997; Katz et al., 2012; Shortt et al., 2010) and Australia (Havighurst et al., 2012; Havighurst et al., 2010), which points to the efficacy of Emotion Coaching in supporting emotional mental health, wellbeing and behaviour across the age range. Havighurst et al. (2009) have highlighted how Emotion Coaching can contribute to children’s ‘Internal Working Models’. Internal Working Models are created in the first few years of life through the attachment relationships with caregivers. Through attuned, social interactions caregivers guide children’s thoughts, feelings and behaviour. Attachment research has shown how ‘emotion-focused talk’ by the adult can teach children to use appropriate strategies to cope with stress, helping to build the architecture of their brains (Bowlby, 1988; Schore, 1994). This links to the idea of reflective functioning as well as to the work of Vygotsky (1987) and his notion of an ‘internal dialogue’.

Emotion Coaching assists the child to develop an internal dialogue about social and emotional experiences and aids them in regulating their emotions and social behaviour. Research evidence shows how Emotion Coaching can help children and young people diagnosed with mental health and other difficulties, such as depression (Hunter et al., 2011; Katz and Hunter, 2007) and behavioural difficulties (Havighurst et al. 2010; Katz and Winducker-Nelson, 2004). Moreover, the case studies in this project illustrate how Emotion Coaching can support early signs of mental health difficulties which may manifest as challenging behaviour. It is essentially an empathic and dialogic process which enables children to feel appreciated, to explore their feelings and relationships, to reflect with others and to confront their core emotions such as anger, fear and anxiety, rather than projecting them through challenging behaviour (Matthews, 2006). A key aspect of Emotion Coaching is its mindful nature and the way in which it operates as an ‘in the moment’ strategy. An integral part of the training programme incorporated the practice of mindful exercises and the importance of helping children and young people to ‘pause’ during emotional moments to support self-regulation. The narrative provided by Emotion Coaching creates a communicative context for a child’s emotional experiences to be explicitly and meaningfully processed within a relational dyad, and resonates with Siegel’s work on interpersonal neurobiology and his ‘hands model of the brain’ is a particularly useful tool that was used as part of the training programme to support understanding of how the ‘thinking brain’ can become separated from the ‘emotional brain’. Regular practising of ‘being mindful’ increases activity in the prefrontal cortex (thinking area) and decreases activity in the limbic system (emotion area) helping the more rational parts of the brain to moderate emotional impulses. Emotion Coaching facilitates practitioners to connect with children and young people and then re-direct them to more positive outcomes. It can operate as a stabilising factor to enable children to focus their energies on learning and to help them moderate the challenges of school life and beyond. (See Annex A for more information regarding this strategy – What is Emotion Coaching?)
Findings from the project are set out in accordance with the project’s Outcomes and Key Performance Indicators (KPIs). Some outcomes are grouped together for ease of access and to correlate with the data. For example, most of the Outcomes and KPIs related to the cascading strand of the project have been grouped together.

OUTCOME ONE:

To strengthen the delivery and network of Emotion Coaching champions across Somerset, so they increase their impact on promoting children and young people’s social development and mental wellbeing

KPI 2
• Lead champions: establish and maintain a Lead Champion Scheme to sustain the network into the future
• Enable people who have undergone the Emotion Coaching training to develop on going action plans to disseminate and deliver Emotion Coaching activities that will promote mental health and wellbeing of their target audience
• Promote the use of the Mental Health Toolkit and resources

Lead champions and specific organisations in each of the five district areas have been identified and led in cascading activities to ensure the sustainability of an Emotion Coaching network. The network is supported with online resources established with champions. Resources continue to be uploaded and materials developed by champions for others to use in the dissemination of Emotion Coaching. Throughout the 2016-17 phase of the project, champions were made aware of the Mental Health Toolkit (MHT) and have had opportunities to engage with its resources during training sessions. A parent support page, set up by a parent who attended the Emotion Coaching training, has received more than 300 parent followers. This has continued the cascading of information.

The final 2017 phase of the project will focus on training 15 Emotion Coaching facilitators to continue to embed Emotion Coaching within schools, settings and organisations. This final phase aims to ensure that the project maintains momentum and has a sustainable impact on children and young people’s mental health and wellbeing.

In order to coordinate participation across the network, a central database of Emotion Coaching Champions has been collected and maintained. Champions have provided comprehensive information on their place of work, specialist role and contact details. The database provides an overview of participation across the project and an opportunity to track training experience and cascading action plans. This can also include those individuals and organisations who have expressed an interest in receiving future Emotion Coaching training.

The final 2017 phase of the project will focus on training 15 Emotion Coaching facilitators to continue to embed Emotion Coaching within schools, settings and organisations. This final phase aims to ensure that the project maintains momentum and has a sustainable impact on children and young people’s mental health and wellbeing.

KPI 4
• Number and type of activities and or interventions delivered by the contract providers that have taken place to support the cascading process

Summary of cascading activities

Over two years, a total of 63 champions have provided details of their cascading and action plans for disseminating their Emotion Coaching work. All but one champion provided detailed plans which demonstrated that they had already implemented their cascading in their work settings and integrated their learning into their daily practice. Of these 63, 38 were identified as professionals within school settings (teachers, SENCOs, PFSA), four were health professionals within the primary care setting (health and community workers), and the remaining 20 professionals were from other organisations who have contact with children and young people. Many of the champions provided initial plans and later updated their progress with completed activities. It is clear that the champions located in both school and external settings are ensuring the integration of Emotion Coaching in daily practice.

Examples of some activities are provided in Table 1.

All the champions located within school settings had similar cascading activities such as delivering workshops to school staff and parents, setting up peer mentoring schemes, cascading via INSET days and school meetings with staff, governors and Heads. In some schools, mindfulness has been implemented at the start of the day across classes. Repeat training was set up in some of the schools by heads to be delivered in the new school term, which ensures the sustainability of Emotion Coaching within schools.

External to school settings champions integrated and disseminated their learning within their organisations. Examples of such activities involved training staff in Emotion Coaching techniques, incorporating Emotion Coaching within induction programmes for new staff, peer mentoring for staff and collaboration with champions within schools.

<table>
<thead>
<tr>
<th>Setting</th>
<th>Profession</th>
<th>Example of cascading</th>
</tr>
</thead>
<tbody>
<tr>
<td>School</td>
<td>PFSA</td>
<td>Cascaded to staff at an INSET day, Emotion Coaching used with transition group students who have an Emotion Coaching mentor. Planned INSET session in 2017 and workshop to parents.</td>
</tr>
<tr>
<td></td>
<td>Deputy Head</td>
<td>INSET and student focus every week. Pastoral team interventions are based on Emotion Coaching.</td>
</tr>
<tr>
<td></td>
<td>Head Teacher</td>
<td>Work in collaboration. PFSA delivered workshops and a mop up session afterwards for staff. Workshop to parents and can be used to deliver to other schools.</td>
</tr>
<tr>
<td></td>
<td>Pre School Teacher</td>
<td>Developing mindful play in groups.</td>
</tr>
<tr>
<td></td>
<td>SENCo</td>
<td>Integrating Emotion Coaching with Emotional Logic enabling frameworks for working with bereaved children. Sharing learning across Somerset.</td>
</tr>
<tr>
<td></td>
<td>GP</td>
<td>Talks were given to other GPs and techniques used at work with teenagers.</td>
</tr>
<tr>
<td></td>
<td>Domestic Abuse Service</td>
<td>Family Worker</td>
</tr>
<tr>
<td></td>
<td>Police</td>
<td>Victim and Witness Care Officer</td>
</tr>
<tr>
<td></td>
<td>Early Help</td>
<td>GetSet</td>
</tr>
</tbody>
</table>

KPI 5
• Maintenance of a web based presence including the use of social media for champions to share and support each other

A variety of web-based activities have ensured continued presence by and for champions including the use of Facebook pages and active Twitter feeds. Daily and weekly posting of up to date local as well as national information informs champions of the use and benefits of Emotion Coaching and related activities (such as mindfulness) in other areas of the country. A parents support page has been set up by a parent who attended the Emotion Coaching training.
KPI 6
• At least one active Lead Champion is named, and they have a programme of activities established to support network members in each district

As mentioned in KPI2, lead champions in each of the district areas and in specific organisations have been identified. Each of these champions has led in networking with local champions in their area with access to email lists to ensure independent working separate to the project. Each champion has developed an individual approach for their area which works for them. Effective networking has enabled champions to support teams in setting up their own groups and strong relationships within areas have been established in each area sharing their learning with others (e.g. ELSAs, parents). One champion is writing a booklet for teaching staff which summarises the core learning of Emotion Coaching.

KPI 7
• Emotion Coaching Project activities and resources are hosted on the Mental Health Toolkit

The Mental Health Toolkit (MHT) was introduced to the participants at the first workshop and each subsequent workshop included a focus on the MHT, including access to the toolkit. Participants were encouraged to make use of the Toolkit and some of its resources such as the MindEd resources. They were also made aware of the specialist services available to supporting mental health and wellbeing. During the 2015-16 phase of the project, a number of Emotion Coaching resources were generated by project leads and champions. These included detailed training programme notes and training materials (PowerPoint, video clip, activities), and examples of cascading sessions led by champions. These resources were made available to participants via the Somerset Emotion Coaching Project tab on the MHT and the link to the EHCAP website. Additionally, workshops were used as an opportunity for participants to familiarise themselves with resources available on the MHT and EHCAP website to support the cascading process. Workshop evaluations indicate that participants found this a productive time to access a useful resource. Illustrative quotes reflect this feedback:

‘It was very useful learning about online resources. I have looked already but feel less overwhelmed.’

‘I am reassured that the resources are well researched and used.’

‘I have accessed useful websites and articles relating to issues relevant to the things that our students are most troubled by.’

These findings echo those from the 2015-16 phase which found the Mental Health toolkit to be a useful resource with an appreciation of having access to helpful information.

KPI 8
• Maintain one database of contacts and activity across the Emotion Coaching network

In order to coordinate participation in the project throughout the 2015-16 and 2016-17 phases, a central database of Emotion Coaching champions has been collected and maintained. Comprehensive information on champion's place of work, specialist role and contact details provide an overview of participation across the project, and an opportunity to track training experience and cascading action plans. The database also includes reference to those individuals and organisations who have expressed an interest in receiving future Emotion Coaching training.

KPI 9
• To organise and deliver an end of project event that demonstrates the outcomes of the project have been achieved

The Somerset Emotion Coaching Project Dissemination Conference was held on Thursday 23 February 2017. Over 65 delegates attended including teachers, parents, education psychologists, GPs, public health commissioners, youth workers, social workers, ELSAs, Early Years and Children's Centre staff, GetSet, counsellors, parent and family support workers and other interested voluntary organisations.

Tony Clifford, Virtual School Head for Stoke on Trent and a member of the NICE steering group on children's attachment, gave a keynote address on the challenge of Emotion Coaching and the emerging national Attachment Research Community; Dr Sarah Temple, Dr Janet Rose and Karen Leafe of Ham Hill Primary school outlined the origins and development of the Somerset Project. Colleagues from Early Years and Get Set described ways in which they had used insights from neuroscience to put Emotion Coaching into practice; learning support staff and parent family support advisers explained the dissemination process within schools and other organisations. Kayleigh Parry and Clarissa Dams described how educational psychologists and Emotional Learning Support Assistants (ELSAs) can help support individual children and schools. Rebecca Digby and Ellie West from Bath Spa University presented the initial findings from the 2016-17 phase data and evaluations; Dr Sarah Temple and Louise Finnis of Public health outlined the arrangements for further development and support in 2017.

Overall evaluations of the Conference were very positive, with 74% of respondents evaluating the conference as excellent and 23% as good – 97% in all. All delegates who completed that section of the evaluation sheet indicated that they would strongly recommend a future conference to colleagues.

Delegates commented that:

‘The whole thing has such a positive vibe. Everyone is very passionate and the results are great’

‘Good to hear evidence base from learning and research findings’

‘It was great to hear how people are cascading the Emotion Coaching project in their schools/settings’

‘I’ve come away with some fantastic resources which I am looking forward to using’

“We need more quantitative evidence of this so that we can start working with other interested parties - more real life examples and case studies”

‘Making time to listen, connect and teach early on pays dividends later in terms of money saved and improved outcomes for everyone’

‘Children are our future – let’s work together to make Somerset a better place and cascade Emotion Coaching training’

OUTCOME 2:
Increase the number of key children and young people staff who have undertaken the Emotion Coaching training programme and increase their impact to promote children's social development and mental wellbeing.

KPI11
• At least forty selected staff, undertake the Emotion Coaching programme

The 2016-17 phase of the Emotion Coaching project attracted a high level of interest from education practitioners and some interest from health professionals. Out of the 42 participants who were trained, all provided self-reported data for the study and 30 completed exit questionnaires. The participants worked in a range of health and educational settings and were divided into two cohorts: 28 were part of cohort one, a group of health and education professionals working within the Early Years sector. 32 were part of cohort two; a group of health and education professionals who were working with primary and secondary aged children.

The majority of participants worked in educational settings across a range of age-groups (teachers, SENCos, PFSA's), 19 participants worked in Early Years or Pre-School settings, 17 in Primary School 1 and 7 in Secondary Schools. 6 were health professionals within the primary care setting [Health Visitor, Mental Health Therapist], and the remaining 11 professionals were from other organisations who have contact with children and young people in child and family support services (GetSet, Mentoring Advocacy, Safeguarding).
The overwhelming majority of participants were white females. While two were male, 58 were female, which is representative of the workforce across Somerset. The average age of the participants was 45 years. Of those who provided information about ethnicity, 49 described themselves as white British, two as White other, one as White-Caucasian and one as White-European. The sample has worked an average of 18 years with children and young people. Figure 2 denotes the gender ratios. This is representative of the sector.

The attrition rate for the majority of the training was relatively low, with 42 champions remaining engaged throughout the course. Attendance was recorded in a register and remained high for the first three workshops, (10%), although attendance dropped to around 50% in the final two workshops. This may have been because the final two workshops took place after the summer break and for many champions’ availability for training was affected by changes to roles and responsibilities, particularly in school settings. The majority of champions have been responsive not engaging (and their reasons) was compiled and sent to the commissioners during the course of the project. All non-engaging champions were contacted by email or telephone. The majority of champions have been responsive to support and have completed exit questionnaires after the final two workshops. Two terms later, 115 participants in year 3, year 4 and year 5 took part in assessments to explore the impact of Emotion Coaching training on children. This included use of the Thinking and Feeling Questionnaire and the Emotion Expression Questionnaire. The Thinking and Feeling Questionnaire (Zoll et al., 2005) is an empathy self-report which invites participants to make cognitive and affective empathic judgements within hypothetical contexts. For reasons of validation, the six items from Eisenberg et al.’s (1996, 1998) Child-Report Sympathy Scale are also included in this assessment. The Emotion Expression Questionnaire (Penza-Clyne and Zeman, 2002) looks at a child’s ability to describe and label their own emotion and their willingness to communicate emotion to others.

This case study reports on up to 29 of these participants who were in year 5. The average age of the year 5 participants was 9.25 with 12 males and 17 females that took part.

Findings:
27 of the 29 year 5 participants completed both the pre- and post- training versions of the Thinking and Feeling Questionnaire. For this group, there was an increase in the pre- and post- training overall means of the Thinking and Feeling Questionnaire ($M = 104, SD = 13.54$ pre-training; $M = 110.52, SD = 11.4$ post-training), as illustrated in Figure 26. A repeated measures t-test was conducted using Excel (v. 2016) revealing a statistically significant difference in the pre- and post- training overall means for the Thinking and Feeling Questionnaire ($t = 3.15, df = 26, p < 0.01$). Cohen’s $d$ was calculated to determine the effect size for this difference (Cohen’s $d = 0.52, CI = -0.25 – 1.29$) revealing a medium effect size difference (Cohen, 1988).
The Thinking and Feeling Questionnaire also revealed an increase in the pre- and post- training means of the Sympathy subscale among the 27 year 5 participants that completed both versions ($M = 22.26$, $SD = 3.06$ pre-training; $M = 23.52$, $SD = 2.72$ post-training), as illustrated in Figure 27. A repeated measures t-test was conducted using Excel (v. 2016) revealing a statistically significant difference in these means ($t = 2.72$ (df = 26), $p < 0.05$. Cohen’s $d$ was calculated revealing a small effect size difference (Cohen’s $d = 0.26$, CI = -0.5 – 1.02).

Figure 4: Year 5 pre and post Emotion Coaching training means for sympathy subscale

Among the 28 year 5 participants that completed both the pre- and post-training versions of the Emotion Expression Questionnaire, a decrease in the pre- and post- mean scores for the Expressive Reluctance subscale ($M = 27.18$, $SD = 6.55$, pre-training; $M = 25.29$, $SD = 5.49$, post-training) was observed, as illustrated in Figure 33. A repeated measures t-test conducted on Excel (v. 2016) revealed a statistically significant difference between the means of the pre- and post-training versions ($t = 1.97$, df = 27, $p < 0.05$). Calculation of Cohen’s $d$ revealed a small effect size difference in the pre- and post-training means for the Expressive Reluctance subscale (Cohen’s $d = 0.31$, CI = -1.06 – 0.43).

Both quantitative and qualitative data suggests that participants immersed within an Emotion Coaching environment increased their dispositional empathy (both cognitive and affective) and sympathy, indicated by the increase in participant’s determination of how another person may have been thinking and feeling in a given situation. The data also suggests an increase in children’s ability to describe and label their own emotions and their willingness to communicate emotion to others. These findings are in line with research (Eisenberg et al., 1998; Gottman et al., 1997; Havighurst et al., 2013; Kehoe et al., 2014) which shows that engagement in Emotion Coaching approaches such as recognising, labelling and validating children’s emotions through modelling empathetic behaviours, effectively contributes towards the development of pro-social behaviours that lead to meaningful social relationships.

Further evidence suggesting an increased ability to describe and label emotions and willingness to communicate with others results from engagement in Emotion Coaching can be seen in the following vignette. This provides an example of how supporting a child to describe and label emotions, and to communicate these to others has led to improved outcomes within an Early Years education context.

Vignette 1: An Emotion Coaching approach used to support a young child with describing and labelling emotions, and communicating feelings to others.

Professional Role: Early Years Specialist
Child/Young person: mixed pre-school class, age: 3 years

Vignette
A parent in the pre-school was concerned that Child A was upset at home before coming to preschool. Child A was unsettled at the beginning and last 15 minutes of each session. He found it difficult to concentrate on an activity and was constantly walking around the setting. His behaviour had an effect on the younger children, with one or two joining in and crying.
How did things change/how was anyone better off?

<table>
<thead>
<tr>
<th>Behaviour &amp; Affect</th>
<th>Who noticed? (Date)</th>
<th>Qualitative evidence</th>
<th>Quantitative evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents – October 2016</td>
<td>Child A gaining confidence in selecting own activities.</td>
<td>Parent commented that Child A is much more confident talking to peers outside the preschool.</td>
<td></td>
</tr>
<tr>
<td>Preschool staff – October 2016</td>
<td>Child A now completing activities</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Environment &amp; Circumstances</th>
<th>Who noticed? (Date)</th>
<th>Qualitative evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sept/Oct 2016</td>
<td>Key person regularly talks to Child A about how he is feeling. They discuss how he could feel better and use his favourite activities to calm him before moving on to new activities.</td>
<td></td>
</tr>
<tr>
<td>Child A approaches key person to say when he is feeling happy.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Skills &amp; Knowledge</th>
<th>Who noticed? (Date)</th>
<th>Qualitative evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 2016</td>
<td>Key person shared the 'Emotion Coaching Taster Session' leaflet with the parents and the hand model.</td>
<td></td>
</tr>
<tr>
<td>Child A now has a positive attitude to preschool and will be attending an extra session in January.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Attitude &amp; Opinions</th>
<th>Who noticed? (Date)</th>
<th>Qualitative evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 2016</td>
<td>Child A now has a positive attitude to preschool</td>
<td></td>
</tr>
<tr>
<td>Key person regularly talks to Child A about how he is feeling. They discuss how he could feel better and use his favourite activities to calm him before moving on to new activities.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

These findings correlate strongly with those from the 2015-16 phase of the project which showed how doing Emotion Coaching improved staff empathy and patience in taking the perspective of the child, as well as providing staff with a new and structured tool to manage. The findings from the 2015-16 phase also showed how Emotion Coaching generated more discussion about emotions in conversations with children and young people and increased understanding in children and young people about their own emotions, facilitating them to make links between their feelings and their behaviours.

**CASE STUDY THEME 2: Improved self-regulation and wellbeing in children and young people**

The case studies consistently show evidence suggesting adults and children or young people have worked together to co-create strategies to support children and young people’s self-regulation in times of high emotional states. Self-regulation refers to the self-directed processes that allow people to appropriately respond to their environment (Bronson, 2000). In line with literature (see for example, Gottman et al., 1996), case studies suggest that this has been enabled through mutual emotional respect. Adults in family contexts and within school settings have reported that Emotion Coaching has supported children and young people with effectively regulating their emotions, leading to pro-social behaviour. Additionally, there has been an identified decrease in anxiety or anger levels at home and in school.

The case studies also suggest that engagement in an Emotion Coaching approach has enabled adults to empathically support and consistently guide children and young people when intense emotions (and behaviours) are presented. Both practitioners and parents have reported that empathic responses on part of the adult have directly correlated with greater emotional regulation in children and young people. Indeed, within the case studies, adult attunement and self-regulation (see case study theme 5) was frequently identified as an important prerequisite for redirecting the young person towards a more positive outcome. This is illustrated in the following quotes:

‘Children can recognise and accept that it’s okay to feel a wide range of emotions, it’s how they manage them that they are learning (about).’

‘It supports children with identifying, understanding and managing their emotions in a variety of situations. (It is) helping children to become more empathetic.’

‘The young people I work with now better understand why they feel the way they do and Emotion Coaching has given them the tools they need to recognise and regulate their emotions. Explosions are definitely less frequent and less severe.’

The following case studies also show how Emotion Coaching can be used to de-escalate situations and enable children and young people to self-regulate effectively.

**Case Study 2: A case study demonstrating increased self-regulation in a young person**

<table>
<thead>
<tr>
<th>Professional Role: Parent and Family Support Advisor (PFSA)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child/Young Person: Male; Age: 15 years</td>
</tr>
</tbody>
</table>

**Background**

Child B was selected as their carer came along to the Tuning into teens parenting group. The birth parent was having difficulties managing strong emotions from Child B. The school was also finding elements of Child B’s behaviour challenging. Behaviours seen were: making loud unacceptable noises in class, swearing, confronting adults, physical aggression towards adults/peers and refusal to engage in learning. Child B’s behavior escalated to a level where there was a real concern, to the degree where a decision was made for the Child B to be placed in a separate provision within the school. This was a six-week programme where Child B would have access to 1-1 and small group sessions focusing on emotional intelligence and soothing strong emotions.

**Outcome**

Child B completed six weeks within the alternative provision. The carer attended the full six-week tuning into teens programme. Behaviour points and fixed term exclusions reduced within school. As part of the Emotion Coaching process the carer improved their responses to others, which in turn improved the relationship between Child B and Child B’s birth parent. It is worth noting that this (carer and birth parent) relationship took a large amount of coaching, support with setting clear boundaries and time to develop a respectful and consistent relationship. This also had a positive impact on Child B as he experienced a home environment that was calmer, more regulated and he was provided with more positive role models. As a result of engaging in the alternative provision which included use of the Emotion Coaching approach, Child B had a greater insight into his own emotions and how to regulate them.
Figure 6: Total impact of using an Emotion Coaching approach on children’s behaviour and wellbeing as identified by participants

There is clear resonance between the 2015-16 and the 2016-17 phase findings in relation to children’s behaviour and wellbeing with statistical results showing a clear improvement and narrative responses from champions testifying to the way in which Emotion Coaching enabled children and young people to calm down more quickly de-escalating incidents and generating more positive self-regulating behaviours.

CASE STUDY THEME 3: Impact of using theoretical frameworks: understanding the neuroscience

Participants in the case studies reported that the scientific rationale and neurobiology behind Emotion Coaching was especially helpful for both adults and young people. It was recognised that the opportunity to gain insight into the neuroscience underpinning the Emotion Coaching approach provided a meaningful theoretical starting point to engaging with children and young people. In particular, sharing knowledge of how the body’s stress response system worked contributed to children and young people feeling more empowered and better able to emotionally regulate.

Many participants cited ‘The Hand Model’ (Siegel, 2012) as an effective interactive tool. They described how this easy-to-use model enabled adults and children to understand how the ‘emotional brain’ sometimes loses its ally in the rational ‘thinking brain’ when we become upset or agitated (‘flip our lid’), and also how just by noticing what is happening in the body we can help to restore our emotional balance (Siegel, 2012).

‘I has a better understanding of how the human body and brain work. She can use this knowledge […] to regulate her emotions better.’

‘He has a better understanding of how his brain reacts and responds to different situations.’

The following case study illustrates how an understanding of neuroscience has helped to support a child with communicating their emotional experiences with others and with building more empathic relationships.
Case Study 3: A case study showing the impact of understanding neuroscience on emotions and relationships

**Adult Role:** Parent  
**Child/Young person:** Male, age: 11 years

**Background**
Child D was assessed as possible/probable ADD by a consultant paediatrician at aged 5.5 yrs. He was also described as a bright, sensitive, child who liked to do the right thing.

The consultant made it clear that other than prescribing medication it would be up to the school to provide appropriate interventions to support Child D. At this time the school was unable to offer anything other than sympathy.

Child D began to struggle to fall asleep, ‘stop thoughts’ and became prone to ‘flipping out’ in a way that had not happened before. Child D had never had issues falling asleep before – he had had a consistent bedtime routine and quiet time (usually reading) before sleep. We had used Bach Flower Remedy Rescue Sleep which often helped, otherwise it was a case of letting him talk, trying to soothe with distraction and stay with him until he fell asleep. When he flipped out, we agreed that if we weren’t at home we would take him directly to the car and get home as soon as possible. At home we tried different things to help him physically release. This included encouraging Child D to throw a ball as far as he could, use a punching bag or sometimes just holding him tightly helped. Each time was different and not always easy.

Child D’s parent was referred to work with an emotion coach and attended the Emotion Coaching conference during which time she learned about the ‘hand model’ of the brain and heard about the neuroscience behind Emotion Coaching. She also attended the Tuning into Kids training programme. Child D began to use ‘Headspace’ when finding it difficult to sleep or turn off his thoughts.

The mother sought referral for an SPD assessment. Child D was assessed as having Defensive Sensory Processing. Following the diagnosis, the mother and Child D learned the Alert Model and now use this to communicate Child D’s emotional state and discuss ways to either calm or alert to get into a state appropriate for what needs to be done.

**Outcome**

The ‘Hand model’ was fully understood by family members and became a way of understanding and communicating what was happening emotionally for Child D. This enabled greater understanding towards Child D and more empathic responses from family members.

As a result of communicating the hand model, Child D is more able to identify when he is becoming upset before it escalates. He pauses and with an adult, Child D is better able to assess how to help himself. In these situations, parents invite him to problem solve with their assistance.

Child D has demonstrated an understanding about SPD and Dan Siegel’s hand model of the brain to explain his emotional state to himself and others. He has a greater sense that he is not powerless and that there are steps he can take to help himself.

The consultant made it clear that other than prescribing medication it would be up to the school to provide appropriate interventions to support Child D. At this time the school was unable to offer anything other than sympathy.

Child D began to struggle to fall asleep, ‘stop thoughts’ and became prone to ‘flipping out’ in a way that had not happened before. Child D had never had issues falling asleep before – he had had a consistent bedtime routine and quiet time (usually reading) before sleep. We had used Bach Flower Remedy Rescue Sleep which often helped, otherwise it was a case of letting him talk, trying to soothe with distraction and stay with him until he fell asleep. When he flipped out, we agreed that if we weren’t at home we would take him directly to the car and get home as soon as possible. At home we tried different things to help him physically release. This included encouraging Child D to throw a ball as far as he could, use a punching bag or sometimes just holding him tightly helped. Each time was different and not always easy.

As a result of communicating the hand model, Child D is more able to identify when he is becoming upset before it escalates. He pauses and with an adult, Child D is better able to assess how to help himself. In these situations, parents invite him to problem solve with their assistance.

Child D has demonstrated an understanding about SPD and Dan Siegel’s hand model of the brain to explain his emotional state to himself and others. He has a greater sense that he is not powerless and that there are steps he can take to help himself.

This is illustrated in the following quotes:

- ‘The neuroscience basis has helped my understanding, particularly the ‘hand model’ to explain emotional responses.’
- ‘Children and young people are able to explain the hand model to their parents. I have used it in a one to one, with families and in group settings.’
- ‘It has helped me to understand the neurological reasons behind explosive behaviour, which in turn has made me better equipped to deal with this. I have also been able to explain to young people why they are feeling the way they do, which ultimately helps them to better regulate their emotional responses.’
- ‘They are beginning to recognise the physical effects of emotions on their bodies and explore ways of finding strategies to support themselves.’
- ‘A script to enable me to help the child understand their emotions and the importance of the emotions being felt but with limits on the behaviour that causes a further negative outcome.’

The theoretical underpinning of Emotion Coaching (the neuroscience) had a positive impact on the champions from the 2015-16 phase as well. The champions testified to their increased neuroscientific knowledge of emotional regulation and mental health as well as their increased awareness and understanding of children’s emotions and the links to behaviour. This increased their confidence to disseminate it to colleagues who may have been less open to this way of dealing with behaviour.

CASE STUDY THEME 4: Increased enjoyment and engagement in education settings

Research evidence shows that education and health are closely linked (Bradley and Green, 2013; Suhrcke et al., 2011). There has been a recent shift in Government educational policy towards promoting positive mental health in pupils and in creating opportunities for practitioners to look ‘beyond’ children and young people’s behaviour through more person focused practice in order to support their engagement in education.

The significance of the link between education and health is stated in the recent report by The National Institute for Health and Care Excellence [NICE 2015: 17] in which schools and other education providers are invited to ensure that ‘all staff who may come into contact with young people with attachment difficulties receive appropriate training.’ Similarly, the recent Framework Report for Initial Teacher Training [DfE 2016:17] suggests ‘providers should emphasise the importance of emotional development such as attachment issues and mental health on pupils’, as one of the core requirements for teachers entering the profession. In addition, The Department for Education’s publication ‘Mental Health and behaviour in schools’, states that ‘in order to help their pupils succeed; schools have a role to play in supporting them to be resilient and mentally healthy’ (DfE, 2014:6). An integrated approach to understanding the relationship between children and young people’s emotional health and wellbeing, and their success has underpinned the Somerset Emotion Coaching project. Directly related to this, case studies suggest engagement in an Emotion Coaching approach has led to an increase in children and young people’s enjoyment and engagement in schools and settings. The following case study illustrates how Emotion Coaching has helped a young person to improve their outcomes through more person focused practice.
Case study 4: A case study demonstrating a young person’s increased achievement and enjoyment for learning as a result of engagement in Emotion Coaching.

Professional Role: Social Inclusion Coordinator
Child/Young Person: Male, Age 15 years

Background

Child E had previously been excluded from a local secondary school and for some time staff had been aware that he had struggled to remain house bound during school hours as he wanted contact with his peers. Prior to this Child E had been living elsewhere in Europe and had talked at length about missing his family and friends there. As a result, Child E’s experiences of isolation were heightened. Staff were working in the family home and all staff had noticed an emotional decline prior in Child E.

As a result of using the Emotion Coaching approach, Child E opened up about his feelings and how isolated he felt – in his words how ‘lonely’ he was feeling. This enabled staff to future pace him about where his provision was heading and also to reinforce that they felt empathy for his situation. He was reassured that he would not be alone and that staff would maintain contact throughout this difficult time.

During a one-one English lesson, Child E became increasingly anxious, frustrated and angry. So much so that 30 minutes into the session I stopped all work and asked him: “Can I feed something back to you about what I am thinking?”

He agreed to this so I said: “I have noticed over the last two weeks that something is bothering you and making you feel emotional. I can see from your face and how you are sitting in the chair that you are not happy and I suspect you are feeling frustrated and at times angry.”

“It is ok to feel this way but I find it helps me when I can talk through my feelings with another person rather than keep them to myself. You know that we have agreed to work together but I feel right now that you are not in a good place to do this. How can I help?”

At this point Child E began crying and started talking about how lonely and isolated he was feeling being stuck at home away from his peers. He talked about how not having his mobile phone was a really big issue for him because he had been using facebook to stay in touch with old school friends and now he could not. He also talked about how he missed his family in Europe.

Following this conversation, we agreed to abandon the planned lesson and instead do research on the internet on how to get his phone fixed. We also designed a lesson around using Google earth and he took me on a virtual tour of his home town, explaining where he lived, where his friends lived and where he had gone to school. This was a very cathartic experience for Child E and it increased the trust he had in me. He now knows that I understand a little about what he has lost and why he gets lonely.

Outcome

Using an Emotion Coaching approach appears to have led to an increase in optimism and enjoyment when Child E works with us. My relationship with Child E’s family has also improved as they now realise that I am not simply interested in educational matters but in Child E himself as a person. Whilst still fragile, he has become quietly more optimistic and now let’s staff know that he looks forward to seeing them each week. The family have joined in several joint sessions with Child E since we began with the intervention.

Prior to intervention all staff had noticed an increase in frustration, anxiety and several traits of learnt helplessness were beginning to emerge from this young person:

“Child E was very agitated when I arrived this morning, he was very anxious and confused…..”

“A said he was worried about it yesterday too.”

This eased after the emotional recognition had happened and staff commented:

“Just to let you all know that Child E had a very successful morning at forest school to quote him ‘I absolutely love it here!’”

Prior to using Emotion Coaching, all staff feedback indicated a deteriorating level of self-regulation and an increase in pessimism around the future. After the intervention staff noticed an increase in happiness and an acceptance of the provision and where it was leading him to. More work was completed and there was more problem free talk and openness:

“A really good session with Child E yesterday afternoon! I didn’t realise I was doing drama until we started the emotions board game, really great, I think my acting shocked Child E, I had to act out losing a board game and being angry, when I flipped the board over and messed the Uno cards up. Child E said I think we ought to put this game away, it was hilarious! Finished off with his favourite game of escape on the i-pad. No doubt he will tell you all about it when you see him. I’m looking forward to today’s teaching session with him this morning.”

Since Emotion Coaching intervention Child E and his family have been joining in the sessions and the atmosphere seems much more settled for everyone. On a recent visit, Child E was shocked when I arrived at the door. The family were all eating lunch in the dining room. We worked in the front room, Child E’s dad found a coffee table for us to work on. The house was very lively. In addition, relationships between family members seem less tense, and the family seem more aware of Child E’s needs. A family member commented:

“Child E was very settled yesterday morning. The house was much calmer…the house is so much quieter. He engaged well with all work tasks on multiplication and division and enjoyed the games on the i-pad at the end of the session.”

Child E was able to talk about many of his feelings regarding his previous home and school and he is working well. He talks more about missing school and wanting to be back in a school. Though he is finding the process of ‘finding another school’ lengthy and dispiriting.

Child E is able to talk about previous life with affection and he has shared emotional reminiscences with staff:

“Child E was lovely yesterday afternoon. We are going to look on Google earth at where his family live next week and he was excited about sharing this with me.”

This evidence which suggests improved enjoyment in academic studies as a result of engaging in the Emotion Coaching approach is supported by findings from various other studies (see for example, Davis, 2003) which have shown how the quality of teacher–child relationships can influence both social and cognitive development. In particular, this case study demonstrates how Emotion Coaching has helped champions to see the whole person rather than just the problem. It also shows how engagement with an Emotion Coaching approach has created opportunities to build empathy and patience with a young person, by learning to take their perspective. Further evidence across Emotion Coaching case studies shows a link between a positive wellbeing and improved outcomes, as illustrated in the following quotes which cite increased educational aspirations and an enjoyment of school:

‘I is attending school more frequently, is happy in school and motivated to get the results she needs for college.’

‘S feels happier to come into the school and access his lessons.’

‘M is being considered as a school prefect.’
Although data on the impact Emotion Coaching had on children and young people’s attainment was not acquired in this study, it is worth noting that a similar project; ‘Attachment Aware Schools’, yielded actual increased attainment using Emotion Coaching as a strategy (see, Rose et al. (2016a)).

**CASE STUDY THEME 5: Meta-Emotion and increased wellbeing in adults**

Meta-emotion philosophy reflects the integration of values, beliefs and awareness of personal emotions and the emotions of others, and being able to take these into account when interacting (Gottman et al., 1997). Links between adults’ meta-emotion philosophy and children or young people’s ability to regulate emotion emerged as a significant theme across the case studies.

Champions also reported that noticing and examining their own beliefs and attitudes, and their reactions to children’s emotional expressions led to improved stress regulation for themselves and others. An increased awareness of emotions and change in meta-emotion philosophy was also identified by parents in their feedback on the outcomes of using the Emotion Coaching approach. The following quotes show professional and parental reflections on this developed awareness:

‘First of all I use the strategies that I have learned to help me regulate my own emotions. Then work with the children.’

‘I am using practical mindfulness techniques with children, young people, families and classes at school. This constant reminder has raised my own awareness to the benefits.’

“Mum is better able to support; she has a greater awareness of her own emotions and is more able to allow (child S) to problem solve.”

“I am glad that I got the parenting support and did the Emotion Coaching course. I stress much less now.”

Increased awareness of emotional mental health was measured via the use of a psychometric questionnaire which ascertained the champions’ meta-emotion philosophy. Statistical analysis of the psychometric questionnaire suggests that participants became less ‘dismissing’ in their beliefs and attitudes about emotions and emotional expressions in children and young people and became more ‘Emotion Coaching’ in their attitudes and beliefs.

The Emotion Coaching questionnaire (McGuire-Sniekus et al., forthcoming) derives from pre-existant assessments of emotional styles and meta emotion (Lagace-Seguin and Coplan, 2005; Gottman et al., 1997), then subjected to principal components analysis and structure equation modelling on separate samples. With 39 items, the minimum score for this questionnaire was 39 and the maximum score was 195. Higher scores indicate higher Emotion Coaching beliefs and behaviour. In total 26 matched pre- and post-questionnaires were obtained from the champions. The pre-training average for this sample was 152.65 (SD = 14.78) and the post training average for this sample was 161.04 (SD= 10.64) as illustrated in figure 8.

A repeated measures t-test was conducted to determine if there was a significant difference in the pre- and post-training Emotion Coaching Questionnaire means where t = -4.3, df = 13, p < 0.01. There was a medium effect size Cohen’s d = 0.79 based on the average standard deviations from the two means, correcting for dependence between means, using Morris and DeShon’s (2002) equation. The findings are therefore, statistically significant.

Figure 7: Overall pre and post training Emotion Coaching mean scores showing an increase in Emotion Coaching style

This data suggests that participants changed their meta-emotion philosophy indicated by a reduction in levels of emotion dismissing beliefs and attitudes and an increase of Emotion Coaching beliefs and attitudes. This is consistent with other evidence of Emotion Coaching used for parenting programmes (Gottman et al., 1997; Havighurst et al. 2010; Wilson et al., 2013).

An increased awareness of emotional and mental health is also suggested in champion’s responses in the exit questionnaires. Among the 30 participants that completed the KPI assessments, 69% agreed that the training increased awareness of emotional / mental health; 27% sometimes agreed and 5% disagreed, as illustrated in Figure 9.

Figure 8: Total increased awareness of emotional and mental health

Case study 5 provides an example of how engagement in an Emotion Coaching approach can support a parent in gaining awareness of her own and other’s emotions, and impact positively on mental-health. It also suggests a shift in both the parent’s and young person’s meta-emotion philosophy.
Case study 5: A case study showing that an increase in awareness of emotions has led to changes in meta-emotion philosophy and supported wellbeing

Professional Role: Parent and Family Support Advisor
Child/Young Person: Female, Age 10 years

Background
I was asked to work with Child F 18 months ago when the school was providing Emotion Coaching support through a TA but Child F continued to struggle with her emotions. This included being frequently teary, emotional outbursts, difficulties resolving friendship issues, feeling “different” and often unable to focus on her learning. Also at home Child F had become increasingly aggressive towards her three younger half-siblings and frequently oppositional towards her mother and stepfather. When we first met she was in regular contact with her birth father, often staying with him one night a week. Initially, I worked directly with Child F providing emotional health and coaching support and then I mentored a school Teaching Assistant in Emotion Coaching to provide regular support on a daily basis. I also worked briefly with Child F’s parent to raise awareness of Child F’s emotional needs. This was successful and there were improvements at home and in particular at school. The case was re-referred to me after the family hit a crisis and requested my support. I then worked intensively with the parent introducing her to Emotion Coaching learning and she recently attended a Tuning Into Kids parent course.

The background to this case includes a long history of domestic and emotional abuse by the birth father of Child F.

Outcome

Previous to working with myself, Child F was very angry and emotional at home and in school. Home life was very stressful and parents were frequently called into school over Child F’s emotional health. Child F is now a lot less angry, worried and emotional and she is much happier in herself. Child F is also not in contact with her birth father, partly due to legal circumstances but also through birth father’s choice.

The parent reported that, as a result of engaging with Emotion Coaching:
“Emotion Coaching helped a lot with Child F and for me. I’m much more aware and able to approach parenting in a calmer way, so I notice when she gets angry and upset. I feel more in control of myself now. Child F used to do the same as me, get angry and fly off the handle and now I deal with it better and she does too. We still get stressed but can connect better at these times and find a way sort things out.”

“School is totally different now I don’t get called in, Child F has very little struggles emotionally. She used to have daily emotional outbursts and now manages much better and copes really well with all aspects of school. She’s in year 6 and SATS is a worry for her and we are able to talk about in a helpful way. Child F’s attitude has changed now and she feels part of her family. She is no longer “different”. She has changed her surname by her choice and she is much more settled.”

She also commented that:
“There is much less aggression towards siblings. Before she would resent them and get frequently angry. There are still battles between them but much less aggressive and less often.”

“Relationships are much improved between us. We understand each other better and can express ourselves. She knows she can talk to me and I feel more confident for us to talk without the need to fix things.”

Child F and her mother are both happier, more resilient and able to cope with life’s ups and downs more effectively. I did work intensively with mother over several sessions and she attended a Tuning Into Kids course. Child F’s mother is no longer scared of her own and Child F’s big emotions. She is calmer, centred and confident to parent. Both Child F and mother’s stress levels have massively reduced and they are actively using Emotion Coaching tools effectively.

As the case study illustrates, engagement in an Emotion Coaching approach may support increased self-regulation in adults. Awareness of increased self-regulation is also suggested in participant exit questionnaires completed at the end of phase two of the Emotion Coaching training programme. Data from the questionnaires shows that 91% agreed that the training had a positive impact on adult awareness and self-regulation, 9% sometimes agreed, and 0% disagreed. This is illustrated in Figure 10.

Figure 9: Total post Emotion Coaching training scores showing adult awareness and self-regulation

Qualitative data from champions suggests further evidence of increased ability to self-regulate following Emotion Coaching training. For instance, champions recognised that engaging in self-regulating behaviours made difficult situations involving children and young people less stressful and exhausting, which led to a positive impact on both adult and children or young people’s wellbeing:

‘Being more mindful about helping children to recognise and identify their emotions. The first session when we looked at how we could approach this was very helpful - for example with the clip from ‘Inside Out.’

‘I have given time to reflect on children’s behaviours and why they are doing them.’

‘With children who have been at risk of exclusion, I have gained a better understanding in supporting their emotions without the daily telephone calls to parents.’

Champions also recognised that they had improved their professional practice by communicating more effectively and consistently with children in stressful situations, and that this had helped to de-escalate volatile situations:

‘De-escalating a child from running out of school and be able to control their anger.’

‘I find that if children’s emotions are recognised quicker, they calm quicker.’

Adults’ meta-emotion philosophy showed a replicated statistical improvement in the measures from the 2015-16 phase champions with accompanying improvement in their awareness and self-regulation. Their professional practice was transformed as they embedded this way of working with children and young people into their personal and working lives.

CASE STUDY THEME 6: Improved relationships and communication

A recurring theme in both participant responses to exit questionnaires and case studies was improved relationships and better communication between adults and children or young people, and between children. For instance, within the context of schools and settings, practitioners reported that there was an increased level of trust between themselves and children and young people which was expressed through stronger, more reciprocal relationships. It was also identified that, after a period of Emotion Coaching exchanges, children and young people felt able to trust in the adult to help them, to listen and empathise with them, and to not judge them.
Case study 6: A Mindful Emotion Coaching approach used to support young children with developing pro-social behaviours

Professional Role – Deputy Head Teacher Primary
Child/Young Person: Mixed reception and year 1 class  Age: 4-6 years

At the beginning of the Autumn term, we identified a small group of children in school who were showing signs of emotional and behaviour difficulties and who we considered to be at risk of exclusion. They appeared to be finding the demands of school life especially challenging and were struggling to manage their emotions. We noticed some common flash-points for these children which triggered these emotional difficulties. This included making mistakes, perceived criticism from peers and being asked to complete work which they found challenging. Attention seeking behaviour (both positive and negative) was regularly reported by staff. We recognised that some of the causes behind their behaviour could be linked to wider problems outside of school, like home life challenges, low self-esteem or unmet attachment needs.

As a result, in October, we decided to begin a nurture group. We decided to focus on Emotion Coaching as part of a range of therapeutic interventions to help build these children’s emotional resilience and to promote a feeling of security and routine, by implementing firm boundaries in a supportive, empathic environment. Emotion Coaching was our key approach because we recognised that it supports difficult emotions ‘in the moment’. The book by Alison Hart was used to introduce the children to Brain Function, and we found that the children really latched onto the language of ‘dinosaur brain’ and the concept of ‘flipping their lid’ described by Dan Siegel’s Hand Model. Through Emotion Coaching, we were able to show the children that they would be heard. To support this, we used phrases such as -

‘Talk and I will listen.’
‘I think this might be difficult for you because your dinosaur brain is in charge at the moment. Let me help you.’

During difficult experiences, we helped children to recognise and name their feelings:
‘I think you are feeling ….. that would make me feel … too.’

We integrated other therapeutic interventions into the group, like Mindfulness and ‘Team Teach’; which provides opportunities for children to build stronger relationships with several different adults. The group also had fun together participating in creative and practical activities like Art, cooking and Forest School, to help build their self-esteem. We made it clear that every session would begin with a ‘clean slate’, so they would be able to learn from what had happened before and with support, problem solve to find a new way of reacting next time.

Illustrative examples of this include:

‘He can trust people to listen and accept his emotions.’
‘She is able to appropriately express her thoughts and feelings, and will seek me out to let off steam and problem-solve situations.’

‘She has brought a friend to my office and said "I’ve told her you will listen and help.”

Champions also stated that the development of reciprocal relationships and trust was supported through creating defined emotional, and sometimes physical, spaces for reflection and by ensuring time for children and young people to engage in mindfulness. The following vignette provides an example of this:

‘I think you are feeling …… that would make me feel … too.’

During difficult experiences, we helped children to recognise and name their feelings:
‘I think this might be difficult for you because your dinosaur brain is in charge at the moment. Let me help you.’

To support this, we used phrases such as -

‘Talk and I will listen.’
‘I think this might be difficult for you because your dinosaur brain is in charge at the moment. Let me help you.’

During difficult experiences, we helped children to recognise and name their feelings:
‘I think you are feeling ….. that would make me feel … too.’

We integrated other therapeutic interventions into the group, like Mindfulness and ‘Team Teach’; which provides opportunities for children to build stronger relationships with several different adults. The group also had fun together participating in creative and practical activities like Art, cooking and Forest School, to help build their self-esteem. We made it clear that every session would begin with a ‘clean slate’, so they would be able to learn from what had happened before and with support, problem solve to find a new way of reacting next time.

Outcome

Mindfulness was found to be very effective at creating calm in the room and helping the children to relax. When we started the group in October, the children were able to stop and focus for 3 minutes only, by Christmas, this had risen to 9 minutes and the children were reporting that they really enjoyed the sessions, and particularly enjoyed listening to ‘Andy’ (the lovely voice on the CD!)

By Christmas, after some tweaking we were running like clockwork and Emotion Coaching really started to show its benefits. We had a timetable that was working well. This included an integrated curriculum with activities which focused on children’s emotional wellbeing, academic progress and a slot dedicated to celebrating the many successes of the group.

One of the children, our biggest success, is now attending his reception class full time, but he is always welcome to come back...

This case suggests that engagement in Mindful Emotion Coaching and creating a nurturing space has contributed to positive outcomes for young children. These findings are in line with studies on mindfulness which have purported that it contributes to emotional resilience, greater awareness and coping strategies in perceived stressful situations (see, Passmore et al. 2013).

All of the case studies reported that children and young people experienced improved relationships and better communication at home following family involvement in Emotion Coaching training. Whereby relationships had previously been extremely fraught, there a suggested marked improvement in the home environment with lower levels of aggression between adults and children or young people but also between siblings. This is illustrated in the following quotes:

‘Mum is able on occasion to be less dismissive or able to not respond immediately to (name’s) difficult behaviours.’

‘She has developed a better relationship with her mother and is less verbally and physically aggressive at home.’

‘Name has a better understanding of her relationship with her mother and can spend more time with her without confrontation.’

The following case study also suggests that engagement in Emotion Coaching has supported improved relationships for a child in both the school and home environment.
Case Study 6a: A case study demonstrating increased improved relationships in school and home environments.

**Professional Role: PFSA**
**Young Person: Male, Age: 8 years**

**Background**
Child H’s mum is a single parent diagnosed by the Adult Mental Health Team with an Emotionally Unstable Personality Disorder (Impulsive Type). Initially this was treated by prescribing anti-depressants and sleeping tablets. Mum regularly self-harms and had a history of suicide attempts. Mum has been involved in multiple relationships which have involved domestic violence.

Child H’s attendance was below 70%, he was extremely hyper-vigilant and wasn’t engaging in education. He was very aggressive towards staff members and other pupils. He assaulted the Head Teacher and was excluded twice from school for violence. Child H had unmet attachment needs, he was extremely hyper-vigilant and didn’t feel safe and secure in school. Whilst he was at school he was worried about his mum and as a consequence wanted to be at home. Exclusion from school therefore suited him and reinforced his distrust of adults.

Child H’s classroom Teacher and Teaching Assistant were coached in Emotion Coaching. There was a particular need to address the needs of the staff, because they were taking Child H’s emotional outbursts personally which left them feeling disempowered and deskilled.

Mum accepted support for herself and her son, Child H, from the PFSA, support staff and Educational Psychologist. The PFSA needed to build a relationship based on trust and Emotion Coaching with the mum was key to this process. The Emotion Coaching support centred around Daniel Siegel’s principles and mum read his book ‘No – Drama Discipline’.

<table>
<thead>
<tr>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mum started to understand that a lot of her problems were based on her own childhood experiences. With support centred on Emotion Coaching, Mum is now a lot calmer and rational. Mum finds the pause between using Steps 4 and 5 very helpful. She values that ‘time out’ to think rationally and act appropriately. She is utilising Emotion Coaching all of the time to tune into her sons thoughts and feelings. Mum’s community psychiatric nurse reported that mum is no longer using or needing her medication. It was agreed that the support the PFSA has provided with Emotion Coaching has been of great benefit to this mum and Child H.</td>
</tr>
</tbody>
</table>

Emotion Coaching was successfully used to de-escalate a situation with Child H in the Head Teacher’s room. Child H had a chair held up in front of him and was making threats with it. Child H was very distressed and angry, but at the same time he presented as frightened. The PFSA firstly spoke very calmly to Child H and told him that he could see that he was very upset and explained that she wanted to reassure him. He then told Child H that he really cared about him and because he cared he didn’t want to see him hurt himself with the chair. The PFSA then moved away from him and continued to reassure and reiterated that he wasn’t asking him to do anything but give Child H sometime to calm down. The PFSA then used this opportunity to connect and recognise Child H’s feelings and name his emotions. Child H then lowered the chair and was open to being soothed.

Emotion Coaching has also helped the class teacher and teaching assistant to tune in early and recognise early warning signs. They have been able to connect with Child H before situations have escalated. This has been done through naming emotions and, if appropriate, soothing. EC6 is still struggling to explore solutions to problems, or to find good solutions. However, he is able to now self soothe and take himself off to a quiet area.

Using Emotion Coaching in the home environment and at School is having a positive outcome in Child H’s wellbeing and is improving his school attendance.

In line with recent research carried out by Havighurst et al. (2010), this case study provides support for the efficacy of Emotion Coaching as a parenting intervention which contributes to improved child emotional knowledge and behaviour. It also suggests that consistent guidance which draws on Emotion Coaching can have a positive impact within educational environments.

Finally, as illustrated in the following quote, it was also recognised that there was increased trust and support between families and professionals/practitioners.

’My relationship with name’s family has also improved as they now realise that I am not simply interested in educational matters but in name himself as a person.’

These findings resonate with literature which identifies that the provision of advice, emotional support and training empowers positive parenting and is an effective strategy for working with families. (see for example Grayson, 2013). It is recognised that supporting parents requires specialist skills and the literature calls for additional training for teachers to feel competent and confident to fulfil this role (Goodall and Vorhause, 2011). The specialist support offered by staff to families through Emotion Coaching in this case study provides evidence of the positive impact that this approach can have on both family and school relationships.

Once again, the results from the 2016-17 phase endorse the findings from 2015-16 phase. A number of case studies from the 2015-16 phase reflect the way in which Emotion Coaching supported the work of a range of professionals with the families of children and young people, enhancing relationships and improving communication.

**CASE STUDY THEME 7: a culture of openness and a joined up approach**

The Somerset Emotion Coaching project is underpinned by a commitment to promoting a joined up approach to supporting children and young people’s emotional health and wellbeing. The importance of promoting a joined up approach and facilitating a culture of openness and was recognised by champions in their responses to questions in exit questionnaires. In addition, two case studies suggested that engagement in Emotion Coaching contributed to a person centred and a joined up approach to supporting young people.

Among the 30 participants that completed the assessment examining the extent to which Emotion Coaching training promoted a culture of openness which is person focused, 73% agreed, 25% sometimes agreed, and 2% disagreed, as illustrated in Figure 11.

**Figure 10: Total scores showing an awareness of the importance of a culture that is person-focused and open**

The Mental Health Toolkit (MHT) was also identified as having a role in supported a joined up approach and was recognised by champions in their responses to questions in exit questionnaires. Among the 30 participants who completed questions about the MHT which focused on extent to which Emotion Coaching training contributed to their understanding of the mental health toolkit and a joined-up approach, 46% agreed, 44% sometimes agreed, and 10% disagreed as illustrated by Figure 12.
In addition to evidence in questionnaires which shows participant’s positive perspectives on Emotion Coaching training had contributed to their use of the Mental Health Toolkit and had facilitated a joined up approach within mental health services. The following quotes provide an illustration of participant’s feedback: ‘The MHT is helpful for signposting services and resources as a one-stop shop.’

‘I have accessed useful websites and articles relating to issues relevant to the things that our students are most troubled by.’

In evidence to questionnaires which show participant’s positive perspectives on Emotion Coaching training and a joined up approach, the following case study suggests that engagement with Emotion Coaching has facilitated a person centred approach in an educational context. The study also indicates that, when dovetailed with mental health services, there have been improved outcomes for a young person.

Case study 7: a case study illustrating how Emotion Coaching dovetails with public mental health services to support a joined up approach

Professional Role: Support Teacher Secondary
Child/Young Person: Male, Age: 15 years

Background

I had been working with Child J at home since October 2014. He had not attended school since year 9 and had become very isolated; spending much of his time in his bedroom. He had experienced several depressive episodes during which he found it difficult to get out of bed. His anxiety was such that sometimes he found it an enormous challenge to engage in conversation with others. In school he had worked at a high level academically for his age, particularly in Maths and Science, and he expressed to me how important academic success was for him. He had been taking medication for his depression for some time.

Our goal at this stage was to encourage him to move from home into the Centre for Tuition, where he could receive more appropriate support. I used Emotion Coaching as a strategy to help him manage his extreme anxiety. It became clearer to me that he might be suffering from a specific anxiety disorder, in the form of a specific phobia, and that he was using his anxiety to cope with the identification and naming of this emotion, was the first step towards managing the symptoms.

I noticed that although at the start of the session he had talked in a whisper, as the session progressed, his voice became stronger and clearer. In further sessions, with encouragement, he began to talk more freely to me. He now engages in two-way conversations and will ask questions.

Building on this progress, I once again approached the idea of moving tuition into the Centre. As part of the Emotion Coaching approach, I expressed empathy for his feeling of anxiety by offering examples of situations which have made me feel anxious, like starting a new job or walking into a room of strangers. I talked about the physical symptoms of anxiety; heart beating quickly, feeling sick and sweaty, or difficulty speaking and concentrating and how these are all normal responses which everyone experiences sometimes. I reassured him that it was absolutely normal to feel anxious about change and that many of our young people report that they feel exactly the same. I told him that in my experience our young people do, with support, make a successful transition into the Centre and offered a couple of examples. We agreed that an appropriate challenge for him try to would be to visit the Centre during a quiet time with his mother, for one hour a week. He achieved this twice at the end of the summer term.

The increased resilience in a young person over a period of time suggested in this case study is credited to a joined up approach to supporting emotional health. Education and health services working together in this way is inline with a key aim of the Future in Mind (2015) report which seeks to support children and young people’s mental health and wellbeing through improved joint working across the NHS, public health, voluntary and community, local authority, education and youth justice sectors. Further, champions engaged in disseminating Emotion Coaching have identified collaboration with other institutions (charitable organisations such as MIND, schools within a cluster group) on their action plans as a means to embed the Emotion Coaching approach across settings involved with children and young people.

CASE STUDY THEME 8: increased wellbeing in the workplace

For Champions who integrated Emotion Coaching into their everyday practices, an increase in adult wellbeing was an emerging theme from both quantitative and qualitative data. Among the 30 participants who completed the KPI Assessment, 71% agreed, 23% sometimes agreed and 4% disagreed that the training improved wellbeing, as illustrated in Figure 3.
Case study 8: a case study showing increased enjoyment and wellbeing at work

The following case study is an example of the positive impact of Emotion Coaching and person-centred practice on practitioners’ wellbeing. Evidence from exit questionnaires suggests that through Emotion Coaching, champions recognised that they were more ‘in-tune’ with the emotional expressions of others. They also commented on the personal and professional rewards they had experienced as a result. The following quotes illustrate feedback from champions:

‘I have a more empathic approach to all people I meet and work with. I notice how others behave and this helps me appreciate their strengths and weaknesses. I now have a more supportive approach to everyone, which has improved my own wellbeing.’

‘It has helped me to share with my team and for them to take my role more seriously.’

‘I am thinking differently in both my work and personal life. (It has) benefited all my relationships.’

The following case study is an example of the positive impact of Emotion Coaching and person-centred practice on practitioners’ wellbeing.

Case study 8: a case study showing increased enjoyment and wellbeing at work

Professional Role: Primary Teacher
Child/Young Person: Mixed Primary, Age: 4-11

Background

I come from a behaviour management background, where for years I worked with reward and sanction systems, like marbles in the jar. I have been teaching for 20 years and am therefore very used to trying out new techniques and strategies. I have to admit, when I first arrived at the Emotion Coaching training I was sceptical about whether it would make a difference.

However, the process of learning about Emotion Coaching and using it with children has made me a much more reflective teacher, and it has also taught me the value of listening to other people. It was particularly interesting listening to others during the workshops, and I realised that we encounter similar challenges in the workplace. I now appreciate that if we talk, we can come up with ideas together. It is easy to develop a rather fixed mind-set and there is a danger of being too target driven and forgetting to notice the child. When I think about the history of an individual child sometimes, it is no surprise that they are finding it difficult to regulate their emotions.

On a personal level, considering children from an emotional point of view has made me feel empowered as a teacher.

Outcome

My approach has changed and other people see that. I feel different – definitely. Emotion Coaching makes complete sense to me. I think that in the past, I had misunderstood children. Now I am far more relaxed and probably more jovial and happy to banter. I notice that I have more empathy towards others which this has led me to make some key changes to my practice.

Firstly, I use my first name now with the parents and have given the children permission to use it too, although they often choose not to!

Secondly, I have worked on just ‘being there’ more – for example being out there in the mornings to greet the parent. I also check on people – adults and children. I will now ask ‘Are you okay?’ If I see something, I ask. I used to get cross with children, so that when we discussed playground incidents they had been involved in, I would have been disapproving in order to elicit some remorse – for example I might have said ‘Just look at your behaviour.. ‘or ‘I am so disappointed in you’. The language I use now is different. When we discuss an incident together, it is the child’s perspective I am interested in hearing, ie. ‘Tell me what you think happened?’

As a school we have adopted a different mind-set. We are thinking more long-term now and asking ourselves, ‘Where will we be in a year?’

I would like to see Emotion Coaching included in PGCE training for new teachers. I believe that this would have a very positive long term effect on children and staff in years to come. In our school we are introducing Emotion Coaching slowly in order to embed it properly. The Head Teacher, the SENCO and myself are all committed to developing it as a key strategy across the school, but we recognise that the most effective way to encourage an emotion based approach is by working with children and staff ‘in the moment’ as opportunities arise. It is then that we can then suggest exploring the situation from the child’s point of view.

Ali Hart’s ‘Dinosaur Brain’ has also been really successful with younger children in our school. The children confidently refer to their dinosaur brain when they want to explain what is happening to them. The ELSA is also using this book to support children, and we are hoping to bring everyone working with the children on board in the future.

Since the training, I have continued to develop my practice by keeping up-to-date with resources. I use the MTK once a week, and have found updates from other websites like www.gse.harvard.edu very helpful too.

As well as demonstrating the personal benefits of Emotion Coaching, this case study shows that Champions felt enthusiastic and determined to promote Emotion Coaching within their organisation until it is fully embedded in practice. The case reported that modelling ‘the five steps’ of Emotion Coaching and opening up conversations with colleagues ‘in the moment’ was a particularly effective strategy to supporting others to explore Emotion Coaching within their own practice. This is inline with comments from champions in exit questionnaires.
METHODOLOGY

All data was independently analysed by analysts who did not participate in the training. Independent analysis was then matched to themes from quantitative data in order to detect correlations and these were subsequently developed as case studies (Yin, 2009). Verification of the findings was undertaken by the research leaders via reference to recorded feedback during the workshops and via the post-workshop evaluations. Relationships were identified between phase one and phase two findings by a programme leader to support analyst triangulation. The report was compiled by both the training programme leaders, researchers and the analysts.

The quantitative analysis comprised of two parts. In part one, professional assessments (including a cohort of health/education professionals working within the Early Years sector and a cohort of health/education professionals working with primary/secondary aged children) of the impact of Emotion Coaching training were analysed through self-report assessments of pre- and post-training scores of an Emotion Coaching Questionnaire, an Exit Questionnaire which assessed themes of Professional Practice (PP), Adult Self-regulation (AS) and Behavioural Impact on Child (BIC); Key Performance Indicators which assessed awareness of emotional/ mental health, culture of openness and person-focused; improved wellbeing and mental health toolkit and joined-up approach; and the Job-Related Affective Wellbeing Scale (JAWS). In part two, pre- and post-training assessments on the impact of Emotion Coaching on children across three year groups were analysed. These included the Thinking and Feeling Questionnaire (with subscales including Sympathy, Cognitive Empathy and Affective Empathy); Belonging Questionnaire; and the Emotion Expression Questionnaire (including subscales of Expressive Reluctance and Poor Awareness). Summary and inferential statistics were conducted using Excel (v. 2016) and pre- and post-means were visualised with means-plot figures where statistically significant or at least small effect size differences were observed.

The qualitative data was also analysed in two parts. This included thematic analysis using inductive coding (Creswell, 2002), largely utilising constructivist grounded theory and constant comparative method (Charmaz, 2006; Strauss and Corbin, 1990). Part one focused on participant case studies, vignettes and free-text responses in Exit Questionnaires, and part two examined pre- and post-training assessments on the impact of Emotion Coaching on children across three year groups.

Full details of the limitations of the methodology will be published in a peer reviewed paper.

Authors:
Rebecca Digby
Eleanor West
Sarah Temple
Rebecca McGuire-Sniekies
Olivia Vatmanides
Antoinette Davey
Stephanie Richardson
Janet Rose
Richard Parker

Citation:

REFERENCES


What is Emotion Coaching?

Emotion Coaching is based on the work of Gottman and Katz and colleagues (Gottman et al., 1999). It is essentially comprised of two key elements - empathy and guidance. These two elements underpin the adults’ approach whenever ‘emotional moments’ occur. Emotional empathy involves recognizing, labelling and validating a child’s emotions, regardless of the behaviour, in order to promote self-awareness of emotions. The circumstances might also require setting limits on appropriate behaviour (such as stating clearly what is acceptable behaviour) and possible consequential action (such as implementing behaviour management procedures) but key to this process is guidance: engagement with the child in problem-solving in order to support children’s ability to learn to self-regulate and to seek alternative courses of action, preventing future transgressions. Gottman has described Emotion Coaching as involving 5 steps:

1. Be aware of child’s responses
2. Recognize emotional times as opportunities for intimacy and teaching
3. Listen empathetically and validate child’s feelings
4. Help child to verbally label emotions – helps soothe the nervous system and recovery rate
5. Set limits while helping child to problem-solve

The main research evidence base for Emotion Coaching comes from America and Australia. Randomised Control Trials in America have demonstrated that Emotion Coaching enables children to have better emotional regulation, more competent problem-solving, higher self-esteem, better academic success, more positive peer relations and fewer behavioural problems (Gottman et al., 1999). Emotion Coaching has been used to support children with developmental difficulties (Havighurst et al., 2013; Katz and Windecker-Nelson, 2004), depression (Katz and Hunter, 2007) and those exposed to violent environments, including inter-parental violence, maltreatment and community violence (Shipman et al., 2007; Katz et al., 2008; Cunningham et al., 2009). Emotion Coaching has also been positively correlated with secure attachments (Chen et al., 2011), and used effectively reduce the externalising behaviours of children with ASD (Wilson et al., 2013). It has also recently been identified as a protective factor for children with ODD (Dunsmore et al., 2012) and for children at risk (Ellis et al., 2014).

The findings from this study correlates with other research in England. Two pilot studies (Rose et al., 2015; Gilbert et al., 2014) show that by using Emotion Coaching when children experience ‘emotional moments’ which may manifest as challenging behaviour, significant improvements can be made in:

- adults’ attitudes to children’s behaviour as adults become less ‘dismissive’ of children’s emotions, generating a more relational model of behaviour management
- reducing the number of behavioural incidents by improving children’s behaviour and ability to regulate their behaviour
- staff wellbeing and efficacy via the way adults manage children’s behaviour and its effect on adults’ reduced stress levels

Emotion Coaching appears to promote the development of social and emotional competencies within children and young people. It can be a valuable tool for practitioners in their work with children and young people. The reported improvements in adult self-regulation during behavioural incidents and enhanced social relationships with children and young people have important implications for professional practice. The common participant claims of practitioners who have been trained in Emotion Coaching testify how it can help to generate a more consistent response to parental emotion coaching. Research in Autism Spectrum Disorders, 7, 767-776.


ANNEX A

What is Emotion Coaching?

Emotion Coaching is based on the work of Gottman and Katz and colleagues (Gottman et al., 1999). It is essentially comprised of two key elements - empathy and guidance. These two elements underpin the adults’ approach whenever ‘emotional moments’ occur. Emotional empathy involves recognizing, labelling and validating a child’s emotions, regardless of the behaviour, in order to promote self-awareness of emotions. The circumstances might also require setting limits on appropriate behaviour (such as stating clearly what is acceptable behaviour) and possible consequential action (such as implementing behaviour management procedures) but key to this process is guidance: engagement with the child in problem-solving in order to support children’s ability to learn to self-regulate and to seek alternative courses of action, preventing future transgressions. Gottman has described Emotion Coaching as involving 5 steps:

1. Be aware of child’s responses
2. Recognize emotional times as opportunities for intimacy and teaching
3. Listen empathetically and validate child’s feelings
4. Help child to verbally label emotions – helps soothe the nervous system and recovery rate
5. Set limits while helping child to problem-solve

The main research evidence base for Emotion Coaching comes from America and Australia. Randomised Control Trials in America have demonstrated that Emotion Coaching enables children to have better emotional regulation, more competent problem-solving, higher self-esteem, better academic success, more positive peer relations and fewer behavioural problems (Gottman et al., 1999). Emotion Coaching has been used to support children with developmental difficulties (Havighurst et al., 2013; Katz and Windecker-Nelson, 2004), depression (Katz and Hunter, 2007) and those exposed to violent environments, including inter-parental violence, maltreatment and community violence (Shipman et al., 2007; Katz et al., 2008; Cunningham et al., 2009). Emotion Coaching has also been positively correlated with secure attachments (Chen et al., 2011), and used effectively reduce the externalising behaviours of children with ASD (Wilson et al., 2013). It has also recently been identified as a protective factor for children with ODD (Dunsmore et al., 2012) and for children at risk (Ellis et al., 2014).

The findings from this study correlates with other research in England. Two pilot studies (Rose et al., 2015; Gilbert et al., 2014) show that by using Emotion Coaching when children experience ‘emotional moments’ which may manifest as challenging behaviour, significant improvements can be made in:

- adults’ attitudes to children’s behaviour as adults become less ‘dismissive’ of children’s emotions, generating a more relational model of behaviour management
- reducing the number of behavioural incidents by improving children’s behaviour and ability to regulate their behaviour
- staff wellbeing and efficacy via the way adults manage children’s behaviour and its effect on adults’ reduced stress levels

Emotion Coaching appears to promote the development of social and emotional competencies within children and young people. It can be a valuable tool for practitioners in their work with children and young people. The reported improvements in adult self-regulation during behavioural incidents and enhanced social relationships with children and young people have important implications for professional practice. The common participant claims of practitioners who have been trained in Emotion Coaching testify how it can help to generate a more consistent response to parental emotion coaching. Research in Autism Spectrum Disorders, 7, 767-776.
behavioural incidents, resonating with literature which highlights the importance of consistent responsiveness in promoting social and cognitive growth (for example, Landry et al., 2001). The frequent descriptions by participants of the way in which Emotion Coaching de-escalates incidents and helps both the children/young people and adults to ‘calm down’ suggests improvements in the stress response system and reflects how children/young people (and adults) felt more able to regulate their emotional responses (Rose et al., 2015).

ANNEX B
Somerset Emotion Coaching Project 2016-17 phase: Participating Organisations

<table>
<thead>
<tr>
<th>Primary and Middle Schools</th>
<th>Secondary Schools, Colleges and Special Schools</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thurlebear Primary School</td>
<td>Fairmead Special School</td>
</tr>
<tr>
<td>Early Birds Pre-school</td>
<td>West Somerset College</td>
</tr>
<tr>
<td>Sunshine Morning Nursery</td>
<td>Brymore Academy</td>
</tr>
<tr>
<td>St John and St Francis Church School</td>
<td>Castle School</td>
</tr>
<tr>
<td>Oaklands Community Primary School</td>
<td>Avalon School</td>
</tr>
<tr>
<td>Sticky Fingers Templecombe</td>
<td>Taunton Deane Partnership College</td>
</tr>
<tr>
<td>Wellsprings Primary School</td>
<td>Robert Blake Science College</td>
</tr>
<tr>
<td>Frome Opportunity Nursery</td>
<td></td>
</tr>
<tr>
<td>The Olive Tree</td>
<td></td>
</tr>
<tr>
<td>Watery Lane Pre-school</td>
<td></td>
</tr>
<tr>
<td>Little Acorns Pre-school</td>
<td></td>
</tr>
<tr>
<td>St James Church School Nursery</td>
<td></td>
</tr>
<tr>
<td>Knights Templar First School and Little Vikings</td>
<td></td>
</tr>
<tr>
<td>Frome Primary</td>
<td></td>
</tr>
<tr>
<td>Willowset Preschool</td>
<td></td>
</tr>
<tr>
<td>Milverton Primary School</td>
<td></td>
</tr>
<tr>
<td>Millfields Prep School</td>
<td></td>
</tr>
<tr>
<td>Trull Primary School</td>
<td></td>
</tr>
<tr>
<td>Kingsmead School</td>
<td></td>
</tr>
<tr>
<td>The Mill Nursery</td>
<td></td>
</tr>
<tr>
<td>St John School</td>
<td></td>
</tr>
<tr>
<td>Priorwood Primary School</td>
<td></td>
</tr>
<tr>
<td>Exford C of E First School</td>
<td></td>
</tr>
<tr>
<td>Milford Playgroup</td>
<td></td>
</tr>
<tr>
<td>Long Sutton C E Primary School</td>
<td></td>
</tr>
</tbody>
</table>

Champions from Other Services

Getset (South Somerset, Mendip, Taunton, West Somerset, Sedgemoor)
Pathways to Independence Knightstone House
Somerset County Council Early Years Advisory Service
Safeguarding, Care and Quality Assurance
Somerset Fostering Children’s Social Care Services
Virtual School CLA
PROMISE
MIND
Somerset Youth Services

ANNEX C
Somerset Emotion Coaching Dissemination Conference
Thursday 23rd February 2017

N = 31
How did you rate the conference overall? (please tick box as appropriate)

<table>
<thead>
<tr>
<th>Excellent</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>23 (74%)</td>
<td>7 (23%)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

How did you rate the individual sessions?

<table>
<thead>
<tr>
<th>Session</th>
<th>Excellent</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotion Coaching - the challenge; the ARC and the experience in Stoke</td>
<td>31 (100%)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Somerset Emotion Coaching Programme: an overview</td>
<td>19 (61%)</td>
<td>10 (32%)</td>
<td>1 (3%)</td>
<td></td>
</tr>
<tr>
<td>Neuroscience and Emotion Coaching in practice</td>
<td>22 (71%)</td>
<td>7 (22%)</td>
<td>1 (3%)</td>
<td></td>
</tr>
<tr>
<td>Cascading the programme</td>
<td>18 (58%)</td>
<td>8 (26%)</td>
<td>2 (6%)</td>
<td></td>
</tr>
<tr>
<td>Support from the Education Psychology Service</td>
<td>16 (52%)</td>
<td>10 (32%)</td>
<td>1 (3%)</td>
<td></td>
</tr>
<tr>
<td>Research findings from the project</td>
<td>18 (58%)</td>
<td>8 (26%)</td>
<td>3 (10%)</td>
<td></td>
</tr>
<tr>
<td>Where do we go from here?</td>
<td>18 (58%)</td>
<td>9 (29%)</td>
<td>1 (3%)</td>
<td></td>
</tr>
</tbody>
</table>

Would you recommend a future conference to colleagues?

<table>
<thead>
<tr>
<th>Yes, strongly</th>
<th>Probably</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>26 (84%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Which parts of the conference were most useful, and why?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hearing the passion and vigour in people’s approach</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seeing what is working on the ground</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Practical approaches that clearly work well</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hearing the stories of attachment awareness and emotion coaching – seeing and hearing the changes it has so far made</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Case studies with young people and videos</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How different agencies have been using emotion coaching</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The next steps for continuing the project</td>
<td></td>
<td></td>
</tr>
<tr>
<td>All the speakers were honest and passionate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coming away with some fantastic resources which I am looking forward to using</td>
<td></td>
<td></td>
</tr>
<tr>
<td>An evidence base from learning and research findings</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How people are cascading the emotion coaching project in their schools/settings</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I always find these sessions invaluable and inspiring</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The range of activities taking place was inspiring</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Which part(s) could have been improved, and why?</th>
</tr>
</thead>
<tbody>
<tr>
<td>None – very good including choice if venue</td>
</tr>
<tr>
<td>It needs more on data eg changes in exclusions etc.</td>
</tr>
<tr>
<td>We need more quantitative evidence of this so that we can start working with other interested parties</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>What are the key messages for schools, local authorities and other organisations from this conference?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Just do it!</td>
</tr>
<tr>
<td>That we need to change the way we educate our children</td>
</tr>
<tr>
<td>Meeting children’s emotional needs is vital</td>
</tr>
<tr>
<td>That emotional intelligence matters and should be more recognised within education.</td>
</tr>
<tr>
<td>More please! (I’m a parent)</td>
</tr>
<tr>
<td>Parents should be supported to understand emotions and how they affect behaviour</td>
</tr>
<tr>
<td>It works – keep investing in it</td>
</tr>
<tr>
<td>We need to prioritise emotional health as much as academic learning</td>
</tr>
<tr>
<td>We need education leadership to recognise that whole school approach needed to tackle SEMH and school improvement team need to take this on board</td>
</tr>
<tr>
<td>That it needs to have a multi-agency approach if it is to work really well</td>
</tr>
<tr>
<td>We need all services/schools/departments working together - to learn, change ethos – so we all practice EC.</td>
</tr>
<tr>
<td>The power of using emotion coaching as a preventative measure. It will lead to more resilient confident children whilst making potentially enormous cost savings</td>
</tr>
<tr>
<td>To keep cascading the information</td>
</tr>
<tr>
<td>Adopt Emotion Coaching and Mindfulness practices to reduce:</td>
</tr>
<tr>
<td>• Families searching for diagnosis</td>
</tr>
<tr>
<td>• Pressure in services</td>
</tr>
<tr>
<td>• Numbers of CYP escalating into services that could be avoided</td>
</tr>
</tbody>
</table>

Further information about the project can be found at:
www.cypsomersethealth.org
www.emotioncoaching.co.uk
http://attachmentawareschools.com/