



**Well School Tech**

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# COLLECTION OF BEST PRACTICES FOR WELL BEING MANAGEMENT

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**Erasmus+**

PROJECT N. 2016-1-LT01-KA201-023171

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# 1. INTRODUCTION TO THE PROJECT

Adolescence and pre-adolescence are crucial moments for the promotion of mental health and the prevention of mental disorders, taking into account that up to 50% of common mental disorders have their onset in adolescence, around 14 years of age.

The World Health Organization (WHO) estimated that, worldwide, up to 20% of children and adolescents suffer from a problem of emotional development or behavior and one out of eight suffer from a mental disorder. The WHO also highlighted that the problems related to mental health among adolescents represent the first cause of disability in the age group 10-19 and the third leading cause of death.

In Europe it is estimated that between 10 and 20% of children and adolescents suffer from mental health problems with prevalence ranging from 9.5% to 22 %.

In the last years, many studies have been undertaken to identify effective interventions for the prevention of psychological problems and the promotion of mental health among young people. Evidence show that the most effective programs are those carried out within curricular school activities. It is recommended that the programs:

- start as early as possible i.e. in pre-adolescent age;
- adopt approaches/techniques currently used among youth;
- promote "positive mental health" (emotional self-regulation, resilience, self-esteem, psychological well-being);
- promote the empowerment of students through effective communication, the definition of personal goals and problem solving at personal and social level;
- include different work sessions (more than 8), each lasting between 60 and 90 minutes;
- involve reference people in a structured way, in particular teachers and parents;
- are conducted in an integrated way by health care service providers and school personnel.

The promotion of mental health targeting adolescents should pursue the development of social, cognitive and emotional skills together with the definition of personal goals and achievement of self-discipline. The development of the so called "life skills" has demonstrated to attain significant improvements particularly for social relationships, self-acceptance, self-efficacy perceived in managing negative emotions and quality of life.

Life skills have been defined by WHO as "abilities for adaptive and positive behavior that enable individuals to deal effectively with the demands and challenges of everyday life". They represent the psycho-social skills that determine valued behavior and include reflective skills such as problem-solving and critical thinking, to personal skills such as self-awareness. Practicing life skills leads to self-esteem, sociability and tolerance.

According to the study published by WHO “Skills for health: An important entry point for health promoting/child- friendly schools” (2004), skills-based health education has been shown to:

- reduce the chances of young people engaging in delinquent behavior and interpersonal violence;
- delay the onset age of using alcohol, tobacco, and other drugs;
- reduce high risk sexual activity that can result in pregnancy or STI or HIV infections;
- teach anger control;
- promote positive social adjustment;
- improve health-related behaviors and self-esteem;
- improve academic performance. (World Health Organization [WHO], 2004. Geneva: pp 25-26).

Taking into account the aforementioned assumptions, the project overall aim is to foster secondary school students’ mental wellbeing through the development of an innovative pedagogical tool that will use as a basis the good practices and expertise in the field of mental wellbeing exchanged among the partnership, in particular concerning the development of the life skills as indicated by WHO to improve communication competencies, increase self-awareness and problem solving abilities. Partners will share knowledge concerning mental wellbeing management in school as well as strategies to involve in the best way all the actors that play an important role in the mental wellbeing of students, i.e. family members.

Project specific objectives are:

- 1) to exchange good practices for mental wellbeing management in the school context, in order to collect methodologies aimed at the students’ wellbeing with the direct support of the actors involved in the wellbeing and learning process of students i.e. teachers;
- 2) to provide teachers with the appropriate competencies and tools to monitor and manage the level of mental wellbeing of secondary school students,
- 3) to produce high quality resources for professionals and improve their competencies to deal with diversified groups of students, making use of new technologies and learner - centered pedagogical approaches.

With the active participation of students, the pedagogical resources collected among the partnership will be adapted and transferred to multimedia tools (website, videos, apps), available in 4 European languages, in order to have an effective and more attractive approach with the target group and cater their needs and expectations.

## 2. DESCRIPTION OF IO2

Collection of best practices for wellbeing management - IO2 The document will contain the best practices exchanged and shared among partners to improve students' psychological well-being and quality of life and provide them with skills in order to monitor and manage their level of mental wellbeing. Also, strategies to involve parents and family members in the process of the mental wellbeing improvement of students will be collected, in order to actively involve them as supportive actors of this process. Thus the document will provide effective and evidence-based examples of life skills development and addressing students' wellbeing management. A best practice may be a particular method, or it may be a whole program or intervention. As best practice will be considered practices that have been found to be successful in accomplishing their goals, and that can be used or adapted to the project products to be developed.

## 3. PROJECT'S PARTNERS' INPUT

### 3.1. UNIVERSITY OF LODZ

**The main definitions of psychological well-being at school.** According to The World Health Organization (WHO) individual psychosocial well-being is a concept of health which includes complex of psychological, social and environmental factors. Theoretical model of psychological well-being according established by Ryff (1989), presents it as positive psychological health, including positive evaluations of oneself and one's past life, a sense or-continued growth and development as a person, the belief that one's life is purposeful and meaningful, as well as the possession of quality relations with other people, the capacity to manage one's life and world, and a sense of self-determination.

In accordance with Pyhalto, Soini and Pietarinen (2010, p.209): "learning for socio-psychological well-being within school can be seen as an active, collaborative, and situated process in which the relationship between individuals and their environment is constantly constructed and modified. In turn, socio-psychological well-being experienced by the members of the school community regulates their learning in many ways, for example, it can affect the ability to concentrate and observe the environment, perceive affordances, and interpret received feedback (Antonovsky 1987, 1993; Bowen et al. 1998; Deci and Ryan 2002; Kristersson and Ohlund 2005; Morrison and Clift 2005; Ryan and Deci 2001; Pallant and Lae 2002; Torsheim et al. 2001). Hence pupils' sense of engagement and empowerment in studying is regulated by their experienced relationships with peers and teachers, belonging to the class and school community, self-efficacy, and perceived control and agency over

one's action. Learning for socio-psychological well-being is not only about acquisition of knowledge and skills, but about an ongoing, interactive process of sense making and development in which motives and emotions play an important part (e.g., Lasky 2005; Lonka et al. 2000; Nonaka and Nishiguchi 2001; Paavola and Hakkarainen 2005; Wenger 1998; Wertsch 1993)".

Stroziak, Stroziak i Szwarc (2016; after Diener et al., 2002) use the term of subjective well-being (SWB) which refers to one's affective and cognitive self-assessment of life in terms of emotional reactions and cognitive judgements of satisfaction. They also note that children SWB should be considered as child's "(...) individual conviction about the degree of accomplishment of his/her living needs, approached in terms of satisfaction, happiness, fears and apprehensions". Thus, this could be the first definition of school well-being.

The second definition is based on the School Well-being Model conceptualization conducted by Konu and Rimpela (2002). In this model well-being in school is defined as a four-dimensional phenomenon. Thus, well-being was associated with teaching and education, as well as with learning and achievements. The Authors divided school well-being into 4 conditions such as: school conditions (connected with "having"), social relationships (connected with "loving"), means for self-fulfillment (connected with "being") and also health status. They explain "means for self-fulfillment" as pupils' possibilities to studying in accordance with their own resources. The "health status" is defined as symptoms of illnesses.

1. Konu, A.I. & Rimpela, M.K. (2002) Well-being in Schools: a conceptual model. *Health Promotion International*, 17, 79-87.
2. Ryff CD. Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *J. Pers Soc Psychol.* 1989; 57: 1069 – 81.
3. Stroziak, D., Stroziak, T. & Szwarc, K. The Subjective Well-Being of School Children. The First Findings from the Children's Worlds Study in Poland *Child Ind Res* (2016) 9: 39.

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1. Czapinski, J. (2004). *Psychologia pozytywna /Positive psychology/*. Warszawa: Wydawnictwo PWN.
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4. Heszen, I., Sęk, H. (2007). *Psychologia zdrowia /Health psychology/*. Warszawa: Wydawnictwo Naukowe PWN.
5. Kaczmarek, L., Sęk, H. (2004). *W stronę psychologii pozytywnej /Toward positive psychology/*. Poznan: Bogucki Wydawnictwo Naukowe.
6. Kaczmarek L. (2016). *Pozytywne interwencje psychologiczne /Postive psychological interventions/*. Poznan: Zys i spolka.

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## **THE MAIN FACTORS OF PSYCHOLOGICAL WELLBEING AT SCHOOL FAMILY RELATIONSHIPS**

Family is the background of the process of socialization, creating lifestyle patterns and building personal resources and values. Family has important impact for human development. Adolescence is the crucial time for building psychological wellbeing and family relations play the most important role in this process. Support, adequate control, positive parental attitudes, discipline and effective communication with family members strengthen their own development.

Research show, that family functioning is significantly related to measures of adolescent psychological well-being (existential well-being, life satisfaction, self-esteem, sense of mastery, general psychiatric morbidity), school adjustment (perceived academic performance, satisfaction with academic performance, and school conduct), and problem behavior (delinquent and substance abuse behavior) (Shek, 2002). Adolescents who were more satisfied with their quality of life reported fewer symptoms of depression and had families whom they perceived as being more warm and caring (Grey at.al., 1998).

On the other hand, children who experience multiple transitions in family structure may face worse developmental outcomes than children raised in stable families (Fomby, Cherlin, 2007).

What's more, family quality of life is highly associated with adolescents psychological wellbeing (Armsden, Greenberg, 1987).

Arguments with parents and worry about family relationships' are at greater risk of contributing to young people's psychological distress than changes to family structure (Sweeting et al, 2010).

For the purposes of the project, it was decided that among skills that affect family relationships should

find parental attitudes/competences and family time management and cooperation skills - family leisure time.

1. Armsden, G. C., & Greenberg, M. T. (1987). The inventory of parent and peer attachment: Individual differences and their relationship to psychological well-being in adolescence. *Journal of youth and adolescence*, 16(5), 427-454.
2. Fomby, P. & Cherlin A. J. (2007). Family instability and child well-being. *American sociological review*, 72(2), 181-204.
3. Grey, M., Boland, E. A., Yu, C., Sullivan-Bolyai, S., & Tamborlane, W. V. (1998). Personal and family factors associated with quality of life in adolescents with diabetes. *Diabetes care*, 21(6), 909-914.
4. Shek, D. T. (2002). Family functioning and psychological well-being, school adjustment, and problem behavior in Chinese adolescents with and without economic disadvantage. *The Journal of Genetic Psychology*, 163(4), 497-502.
5. Sweeting, H, West, P, Young, R & Der, G (2010). Can we explain increases in young people's psychological distress over time? *Social Science and Medicine*, vol. 71, pp. 1819-1830.

## SCHOOL FACTORS

Studies have found that school performance, school attendance, teacher interaction and school/leisure conflict are all dimensions of adolescent stress and all are significantly associated with psychological distress (Sweeting et al, 2010). On the other hand, a heightened emphasis on achievement in schools may marginalize and demotivate students identified as unlikely to succeed. School disengagement has been associated with negative psychological and behavioral outcomes (Sweeting et al, 2010). Engagement in and success at school is an important marker of the wellbeing of students and, concomitantly, improved wellbeing has a positive effect on academic performance (Franklin et al 2009; Durlak et al 2011). In support of the latter point, recent studies have made strong links between academic outcomes and the quality of relationships in schools, prosocial behavior and resilience (DECS 2010). Research consistently states that there is a relationship between addressing the social outcomes of children and subsequent positive academic outcomes.

For the purposes of the project, it was decided that among skills that affect peer relationships should find **educational (key) learners competencies /cognitive abilities** and **teacher competencies**

1. Durlak, JA, Weissberg, RP, Dymnicki, AB, Taylor, RD & Schellinger, KB (2011). The impact of enhancing students social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development*, vol. 82, no 1, pp 405-432.
2. Franklin, C, Kim, JS & Tripodi, SJ (2009). A meta-analysis of published school social work practice



- studies: 19082007. *Research on Social Work Practice*, vol. 19, no 6, pp 667-677.
3. Sweeting, H, West, P, Young, R & Der, G (2010). Can we explain increases in young people's psychological distress over time? *Social Science and Medicine*, vol. 71, pp 1819-1830.
  4. <https://www.decd.sa.gov.au/sites/g/files/net691/f/decsannualreport2010.pdf>
  5. <https://www.det.nsw.edu.au/media/downloads/about-us/statistics-and-research/public-reviews-and-enquiries/school-counselling-services-review/models-of-effective-practice.pdf>

## **PEER RELATIONSHIPS**

After joining the school, the pupils come into a broad social environment. The younger children count on the opinion of the group and care for this to belong to some. But in adolescence the most important developmental need is to stay in the peer group. Peer group meets at that time the need for discretion, security and acceptance.

One of the groups is the classroom, which occurs as a team consisting of students interacting, which differ in the occupied positions and roles and have a common system of values and norms regulating their behavior in important class issues.

Thus, the term- peer relationships, refers to a few aspects of experience with peers. First of all, with peer acceptance and/or friendship (Gottman & Mettetal, 1986). According to other Authors (i.e. Parker & Asher, 1993) these two aspects should be distinguished as for both are related to well-being among school children. The third one contains loneliness or subjective feelings about the adequacy of peer relationship (Asher, Hymel, & Renshaw, 1984).

For the purposes of the project, it was decided that among skills that affect peer relationships should find empathy and communicational and interpersonal skills.

1. Asher, S.R., Hymel, S., & Henshaw, P.D. (1984). Loneliness in children. *Child Development*, 55, 1456-1464.
2. Gottman, J. M., & Metettal, G. (1986). Speculations about social and affective development: Friendship and acquaintanceship through adolescence. In J. M. Gottman & J. G. Parker (Eds.), *Conversation of friends: Speculations on a fective development* (pp. 192-237). Cambridge, England: Cambridge University Press.
3. Parker, J. G., & Asher, S. R. (1993). Friendship and friendship quality in middle childhood: Links with peer group acceptance and feelings of loneliness and social dissatisfaction. *Developmental Psychology*, 29, 611-621.

## **PERSONAL/INDIVIDUAL RESOURCES**

The term "personal resources" has no clear definition, but usually occurs in the context of coping with stress. It was noticed that in the course of the struggle with a variety of life events, a person (adult and a child), there are mediators, which can immunize our functioning. As a result, these events are not experienced as harmful or threatening. Personal resources, therefore, represent the most common biological, psychological and social characteristics that have a positive effect on coping with stressors.

Transactional concept of stress by Lazarus and Folkman (1984) considers all the resources that you use to manage this process. Resources by Hobfoll (2002) are those properties that are in themselves valuable or become valuable as a means to achieve other important objectives.

Resources in terms Moos and Schaefer (1993) are complex system of personality and cognitive factors, which are part of the context of the psychological coping".

Resources can change intensity of experienced stress, which affects the psychological well-being. It is recognized that people who have a higher level of resources, probably less likely to receive various events as stressful, quickly solve problems and as a result have a chance to increase resources.

Poprawa (1996) reports that the most frequently mentioned personal resources include: social support, a sense of personal control over stressful events, positive, slightly inflated self-esteem and self-acceptance, generalized self-confidence, optimism, self-efficacy, coping with difficult situations.

For the purposes of the project selected the following two skills associated with personal/individual resources: coping and self-esteem.

1. Hobfoll SE. Social and psychological resources and adaptation. *Rev. Gen. Psychol.* 2002; 6, 4:307-324.
2. Lazarus R.S., Folkman S. (1984), *Stress Appraisal and Coping*, Springer Verlag, New York
3. Moos R.H., Schaefer J.A. (1993), *Coping Resources and Process: Current Concepts and Measures*, [w:] L. G o l d b e r g e r, S. B r e z n i t s (eds.), *Handbook of Stress. Theoretical and Clinical Aspects*, The Free Press, New York, 234-257
4. Poprawa R. (1996), *Zasoby osobiste w radzeniu sobie ze stresem*, [w:] G. Dolinska - Zygmunt (red.), *Elementy psychologii zdrowia*, Wydawnictwo Uniwersytetu Wroclawskiego, Wroclaw, 101-136.

## **SCOPE OF APPLICATION:**

*Lower secondary school/ 12-16 years old / Poland*

## **DESCRIPTION OF METHOD/STRATEGY**

### **Parental competencies training (“School for parents”):**

#### 1. Aims/goals:

Developing various parental competences e.g. positive attitudes, support, adequate discipline, communication strategies

#### 2. Procedures:

Workshops/lessons during which parents learn about specificity of adolescence, how to recognize their actual parental attitudes, creating appropriate family bonds, develop social and emotional competencies of children and how to strengthen their development and wellbeing during adequate discipline. During the workshops are used different learning methods (lecturers, active methods, discussions).

#### 3. Benefits:

Participants get specific knowledge about importance of their attitudes and competences for adolescents’ development. They have the opportunity to confront their experience in the group, strengthen their parental competences in order to get more own and their child satisfaction of life.

#### 4. Measuring and evaluation:

Polish standardized tools to measure parental attitudes are:

- Scale of Parental Attitudes - version for adolescents (SPR), author: M. Plopa, (2005). The tool enables measurement of perceived parental attitudes of father and mother, such as acceptance-rejection, excessively demanding, autonomy, inconsequent, excessively protective.

Plopa M. (2008), *Psychologia rodziny: teoria i badania /Family psychology - theory and research/*, Krakow: Oficyna Wydawnicza „Impuls”.

English tool:

- Parenting Sense of Competence Scale

(PSOC) - measure parental self-perceptions of skills and knowledge regarding parental functions (Johnston & Mash, 1989). These assertions yield a satisfaction subscale that captures how pleased parents are with their parenting role and an efficacy scale that captures how parents perceive their competence in the parenting role (Ohan, Leung, & Johnston, 2000).

Johnston, C., & Mash, J. E. (1989). A Measure of Parenting Satisfaction and Efficacy. *Journal of Clinical Child Psychology*, 18(2), 8.

Ohan, J. L., Leung, D. W., & Johnston, C. (2000). The parenting sense of competence scale: Evidence of a stable factor structure and validity. *Canadian Journal of Behavioural Science-Revue Canadienne*

### **Parent training program (PET)**

1. Aims/goals:

developing parental competences e.g. democratic style, no use of parental power; communication and conflict resolution skills, acceptance of child as s/he is, authentic, congruent expression of true feelings without blame, avoidance of labels and judgments, family rule-setting;

2. Procedures:

The P.E.T. class consists of brief lectures, demonstrations, workbook exercises, role-playing, lots and lots of coaching, some homework and small group discussion.

3. Benefits:

Benefit for parents:

- Parent Effectiveness Training (P.E.T.) offers proven communication skills that really work. When they use these skills, parents are amazed with the dramatic improvement both in their families and in all their relationships. This program was created by award-winning psychologist and three-time Nobel Peace Prize Nominee, Dr. Thomas Gordon in 1962.

Benefits for children:

- ability to discuss their problems and concerns with parents, higher self-discipline, self-control and an inner sense of personal responsibility, fewer angry outbursts and more problem-solving.

4. Measuring and evaluation:

observation methods;

standardized tools (mentioned above)

using tools to measure competences constructed for the purposes of evaluation of this method (pre-test, post - test).

### ***EVIDENCE OF IMPACT ON WELL BEING IN SCHOOL***

There are strong evidences that programs focused on parental attitudes are efficient for family and children wellbeing (Glăveanu, 2012).

Parent training programs enhance perceived parental competence and can be an important preventive strategy to enhance parental and children feelings of satisfaction (Lofgren et. al., 2017). High parental satisfaction as measured by the PSOC scale has been shown to highly correlate with positive measures of child behavior and parental well-being (Rogers, Matthews, 2004).

Attachment between parent and child plays a crucial role in the healthy development of the child.

Accordingly, disturbances in parental bonding will be linked with the development of mental disorders later in life. Subjects who reported high care and low control (optimal bonding) reported less distress, better general well-being and better social support than did all other groups. These results are in line with Bowlby's theory of attachment. They also show that specific configuration of parental bonding is linked with distress and isolation in adolescents (Canetti et.al., 1997).

- Canetti, L., Bachar, E., Galili-Weisstub, E., De-Nour, A. K., & Shalev, A. Y. (1997). Parental bonding and mental health in adolescence. *Adolescence*, 32(126), 381.
- Glăveanu, S. M. (2012). Validating a Training Program for Parental Competence. *Training*, 2
- Löfgren, H. O., Petersen, S., Nilsson, K., Ghazinour, M., & Hagglof, B. (2017). Effects of Parent Training Programmes on Parents' Sense of Competence in a General Population Sample. *Global Journal of Health Science*, 9(7), 24.
- Rogers, H., & Matthews, J. (2004). The parenting sense of competence scale: Investigation of the factor structure, reliability, and validity for an Australian sample. *Australian Psychologist*, 39(1), 88-96.
- <http://www.rodzinka.wsg.bvd.pl/userfiles/files/Trening%20kompetencji%20rodzicielskich.pdf>
- <https://www.ore.edu.pl/programv-i-proiektv-98419/szkoa-dla-rodzicow-i-wvchowawcow/o-szkole-dla-rodzicow- i-wvchowawcow>
- <http://profamilia.pl/poradnia/szkola-dla-rodzicow/szkola-dla-rodzicow/>
- <http://www.gordontraining.com/parent-programs/parent-effectiveness-training-p-e-t/#>

## **FAMILY TIME MANAGEMENT AND COOPERATION SKILLS - FAMILY LEISURE TIME**

### ***SCOPE OF APPLICATION***

*Lower secondary school/ 12-16 years old / Poland*

### ***DESCRIPTION OF METHOD/ STRATEGY***

**Various forms of family interactional events**, conducted by schools or other institutions (psychological workshops, sport and art events, family competitions etc.)

#### 1. Aims/goals:

The awareness of the role and importance of family integration;

Improving cooperation skills of all family members (parents and siblings);

Creating new forms of family leisure;

Improving the ability time management Developing the skills of receiving and giving feedback;

Strengthening family bonds.

#### 2. Procedures:

A series of workshops/events during which family members develop new form of leisure time

spending. During the events are used active learning methods, sport competitions, self - support groups and others.

### 3. Benefits:

Increase the competences family leisure time spending in order to strengthen the quality of family life.

#### Measuring and evaluation:

- observation methods;
- using tools to measure competences constructed for the purposes of evaluation of this method (pre-test, post - test)
- standardized tools:

#### **Satisfaction with Family Life Scale**

The SWFL scale, modeled after the Satisfaction with Life Scale, was designed to assess an individual's global judgment of family satisfaction, which is theoretically predicted to depend on a comparison of family life circumstances with one's own standards and expectations. The scale consists of five items on a Likert-type scale. The SWFL scale provides a brief, psychometrically sound, and widely applicable option for measuring satisfaction with family life.

Zabriskie, R. B., & Ward, P. J. (2013). Satisfaction with family life scale. *Marriage & Family Review*, 49(5), 446-463.

### ***EVIDENCE OF IMPACT ON WELL BEING IN SCHOOL***

Families live in a very busy time. Adults and children alike face numerous demands in their overscheduled lives. Spending time together with family members is the basis for adolescents' development. Each time an experience is shared, the bond between all those involved grows stronger. For parents, spending quality time with the kids is important - otherwise they do not know their own children.

Families that have quality leisure time together are more likely to be satisfied than families that don't (Hodge et.al., 2015).

As research conducted by Melton & Zabriskie (2016) showed, that the best predictors of happiness in the context of family leisure were quality family leisure time spent in familiar activities inside the home.

Publication of Eurostat (Quality of life indicators, 2013) presents a detailed analysis of many different dimensions of quality of life, complementing the indicator traditionally used. Leisure, the time people spend outside their productive activities, has a major impact on their sense of well-being, happiness and life satisfaction. Social interactions, a related but conceptually different issue, can be considered

as «social capital» for both individuals and society, affecting people's quality of life in numerous ways. Apart from its basic function of meeting the natural human need for socializing more frequent and more rewarding social interaction is also associated with better health, improved chances of finding a job and even of living in a better neighbourhood (with less crime, for instance). More specifically, having someone to rely on in case of need is particularly important; it was chosen as a headline indicator for the United Nations World Happiness report.

- Brajsa-Zganec, A., Merkas, M., & Sverko, I. (2011). Quality of life and leisure activities: How do leisure activities contribute to subjective well-being? *Social Indicators Research*, 102(1), 81-91.
- Helliwell, J., Layard, R., and Sachs, J. (eds.). *World Happiness Report 2013*. Eurofound. Subjective well-being in Europe, 2010.
- Hodge, C., Bocarro, J. N., Henderson, K. A., Zabriskie, R., Parcel, T. L., & Kanter, M. A. (2015). Family leisure: an integrative review of research from select journals. *Journal of Leisure Research*, 47(5), 577-600.
- Melton, K. K., & Zabriskie, R. B. (2016). In the pursuit of happiness all family leisure is not equal. *World Leisure Journal*, 58(4), 311-326.

Quality of life indicators [http://ec.europa.eu/eurostat/statistics-explained/index.php/Quality of life indicators leisure and social interactions](http://ec.europa.eu/eurostat/statistics-explained/index.php/Quality_of_life_indicators_leisure_and_social_interactions)

#### ***SOURCE***

- <http://gdk.goleniow.pl/1497-mamo-tato-co-wy-na-to-zajecia-dla-rodzicow-z-dziecmi-w-wieku-przedszkolnym>
- <http://www.indygoart.pl/index.php/zajecia-dla-rodzicow-z-dziecmi>
- <http://oureverydaylife.com/family-leisure-activities-3926.html>

### **EDUCATIONAL (KEY) COMPETENCIES /COGNITIVE ABILITIES**

#### ***DESCRIPTION OF METHOD/ STRATEGY***

#### **Key competencies training**

1. Aims/goals:

To strengthen cognitive functions such as: memory, attention, perception, language and motor skills, decision making

2. Procedures:

Therapy conducted by psychologist/therapist; Group workshops; Pedagogical therapy; Counselling

3. Benefits:

Improvement of cognitive functioning; Reducing Stress; Better learning abilities; Higher school outcomes

4. Measuring and evaluation:

- using tools to measure competences, constructed for the purposes of evaluation of this method (pre-test, post-test)

- Measurement by school grades

- Using standardized tools:

- **CVLT. CALIFORNIA VERBAL LEARNING TEST**

Authors: Dean C, Delis, Joel H. Kramer, Edith Kaplan, Beth A. Ober

Polish adaptation, standardization and manual: Emilia Lojek, Joanna Stanczak (2010). Test measures ability to learn and remember verbal material. <http://www.en.practest.com.pl/node/29003>

- **D2. ATTENTION ASSESSMENT TEST Author: Rolf Brickenkamp**

Polish standardization: Elzbieta R. Dajek (2003). This is a nonverbal technique which yields several measures of attention: speed of perception, number of errors and general perceptiveness (an indicator of speed corrected for number of errors) and concentration.

<http://www.en.practest.com.pl/node/28908>

- **MFF. MATCHING FAMILIAR FIGURES**

Author: Jerome Kagan

Polish adaptation: Anna Matczak (1992). The MFF measures reflection-impulsivity, i.e., a dimension of cognitive style relating to individual control over one's cognitive functions.

<http://www.en.practest.com.pl/node/28901>

### **Problem solving/decision making workshops**

1. Aims/goals:

Using both cognitive and behavioral techniques and focusing on the child more than on the parents or the family unit, problem solving workshops help the child gain the ability to self-manage thoughts



and feelings and interact appropriately with others by developing new perspectives and solutions.

2. Procedures:

The therapist conducts individual sessions with the child, once a week for 45 minutes to an hour, typically for several months to a year. The cognitive portion of the treatment involves changing faulty or narrow views of daily situations, confronting irrational interpretations of others' actions, challenging unhelpful assumptions that typically underlie the individual's problem behaviors, and generating alternative solutions to problems.

3. Benefits:

Increase the competences of problem solving

4. Measuring and evaluation:

Observation methods (by teacher)

Self-report measures

Using evaluation tools constructed for the purposes of evaluation of this method (pre-test, post - test);

Standardized tools:

### **KNS. HOPE FOR SUCCESS QUESTIONNAIRE**

Authors: Mariola Laguna, Jerzy Trzebinski, Mariusz Zięba (2005)

KNS measures hope for success as expecting positive outcome of one's actions. It consists of two components: belief in having strong will, i. e. being aware of one's agency expressed in goal striving, perseverance, and belief in one's ability to find solutions based on one's knowledge and mental abilities expressed in situations requiring creative problem solving.

<http://www.en.practest.com.pl/node/28924>

### ***EVIDENCE OF IMPACT ON WELL BEING IN SCHOOL***

Key competencies are important for a successful life and a well-functioning society (Rychen, Salganik, 2003).

The European Commission works with EU countries to strengthen 'key competences' - knowledge, skills, and attitudes that will help learners find personal fulfilment and, later in life, find work and take part in society. These key competences include 'traditional' skills such as communication in one's mother tongue, foreign languages, digital skills, literacy, and basic skills in maths and science, as well as horizontal skills such as learning to learn, social and civic responsibility, initiative and entrepreneurship, cultural awareness, and creativity.

They can be strengthened by various approaches. For example, biofeedback is a mind-body technique in which individuals learn how to modify their physiology for the purpose of improving physical,

mental, emotional and spiritual health (Frank et al., 2010).

Positive problem solving correlates positively with adaptive personality variables (ground hope, optimism, self-efficacy, general self-respect, and also with extroversion and conscientiousness), negatively with anxiety, depression and neuroticism. (Laguna et al., 2005)

Study evaluated the effects of problem-solving skills training (PSST) and parent management training (PMT) on children antisocial behavior showed that PSST and PMT combined led to more marked changes in child and parent functioning and placed a greater proportion of youth within the range of non-clinic (normative) levels of functioning (Kazdin et al., 1992)

Laguna, M., Trzebinski, J., & Zięba, M. (2005). KNS—Kwestionariusz Nadziei na Sukces. Podręcznik. Pracownia Testów Psychologicznych PTP, Warszawa.

- Kazdin, A. E., Siegel, T. C., & Bass, D. (1992). Cognitive problem-solving skills training and parent management training in the treatment of antisocial behavior in children. *Journal of consulting and clinical psychology*, 60(5), 733.
- Matthews, W. J. (1999), Brief therapy: A problem solving model of change. *The Counselor*, 17(4), 29-32.
- Rychen D.S, Salganik L.H. (eds.) (2003), *Key Competencies for A Successful Life and a Well-Functioning Society*, Hogrefe & Huber Publishers.
- Frank, D. L., Khorshid, L., Kiffer, J. F., Moravec, C. S., & McKee, M. G. (2010). Biofeedback in medicine: who, when, why and how? *Mental health in family medicine*, 7(2), 85.

[http://ec.europa.eu/education/policy/school/competences\\_en](http://ec.europa.eu/education/policy/school/competences_en)

#### **SOURCE**

- [http://ec.europa.eu/education/policy/school/competences\\_en](http://ec.europa.eu/education/policy/school/competences_en)
- [http://ec.europa.eu/dgs/education\\_culture/repository/education/policy/school/doc/keyreview\\_en.pdf](http://ec.europa.eu/dgs/education_culture/repository/education/policy/school/doc/keyreview_en.pdf)
- <http://poradniateczowa.pl/trening-umiejetnosci-szkolnvch/>
- <http://pro-med.pl/42-eeg-biofeedback/>
- [http://www.youngminds.org.uk/training\\_services/training\\_and\\_consultancy/for\\_schools/wellbeing](http://www.youngminds.org.uk/training_services/training_and_consultancy/for_schools/wellbeing)
- <http://cinemapark.pl/files/File/Cinema%20Drive%20scenariusze/Modul%20I%20-%20Podeimowanie%20decyzii.pdf>

## **TEACHER SOCIAL-EMOTIONAL COMPETENCIES DESCRIPTION OF METHOD/ STRATEGY**

### **Teacher Effectiveness Training (T.E.T.)**

1. Aims/goals:

Teacher Effectiveness Training (T.E.T.) offers teachers the essential communication and conflict resolution skills they need to have high quality relationships with their students so there will be less conflict and more teaching-learning time.

2. Procedures:

T.E.T. is a 30-hour program designed to involve participants very actively in their own learning. It uses the following four-step instructional process in each session:

- 1) Structure: Instructor presentations, in-class reading, audio-visual aids.
- 2) Involvement: Role-plays, workbook exercises, one-on-one skill practice.
- 3) Process: Group discussions, one-on-one sharing and reflection to explore new learnings and insights.
- 4) Application: Individual and group activities to consolidate learning and make specific action plans. Involves workbook and text reading and out-of-class skill practice assignments.

3. Benefits:

Benefits for teachers:

- less stress
  - more respect of students and consideration for teacher
  - Fewer classroom disruptions and conflicts
  - Fewer discipline problems
- Benefits for students:
- Increased academic achievement
  - Increased responsibility and self-control
  - More desire to cooperate and learn
  - Increased ability to work in group situations

4. Measuring and evaluation:

Observation methods (by teacher)

Self-report measures

Using evaluation tools constructed for the purposes of evaluation of this method (pre-test, post - test);

### ***EVIDENCE OF IMPACT ON WELL BEING IN SCHOOL***

Teacher attitudes toward children and teacher ability to listen empathically and confront appropriately were significantly increased as the result of this training model (TET) (Percy, 1990).

Teachers' social-emotional competence is crucial for promoting a positive learning environment to

the students (Hen & Goroshit, 2016).

Student perception of interpersonal teacher behavior predicted student wellbeing (Van Petegem et al., 2008).

- Percy, R. L. (1990). The effects of teacher effectiveness training on the attitudes and behaviors of classroom teachers. *Educational Research Quarterly*.
- Hen, M., & Goroshit, M. (2016). Social-emotional competencies among teachers: An examination of interrelationships. *Cogent Education*, 3(1), 1151996
- Van Petegem, K., Aelterman, A., Van Keer, H., & Rosseel, Y. (2008). The influence of student characteristics and interpersonal teacher behavior in the classroom on student's wellbeing. *Social Indicators Research*, 85(2), 279291.
- **SOURCE:** <http://www.gordontraining.com/school-programs/teacher-effectiveness-training-t-e-t/>

## **EMPATHY**

### **SCOPE OF APPLICATION**

Lower secondary / 12-16 years old / Poland

### ***DESCRIPTION OF METHOD/STRATEGY***

#### ***GROUP TRAININGS FOR STUDENTS (EMPATHYLESSONS)***

1. Aims/goals:

developing social skills needed to conduct empathic behaviors

2. Procedures:

Workshops/lessons during which students learn to recognize and express emotions; develop sensitivity to other people and their emotions; learn to accept others and understand their differences.

During the workshops are used active learning methods (including role play games)

3. Benefits:

Participants have the opportunity to confront their experience in the group, eg. find themselves in the situation of another person. As a result, acquire the ability to interpret life situations from different points of view, the ability to empathize in emotional states and situations of other people and realizes the need to improve the ability of empathic.

4. Measuring and evaluation:

observation (by the teacher);

using standardized tools to measure empathy (pre-test, post - test, follow-up test)

optional standardized methods:

- Empathy Quotient questionnaire (Baron-Cohen, 2004) - <https://psychology-tools.com/empathy-quotient/>
- Spot The Fake Smile - experiment by Paul Ekman - <http://www.bbc.co.uk/science/humanbody/mind/surveys/smiles/>
- Empathy Questionnaire (Enz i Zoll, 2005) measure for 8-14 years old children; Polish adaptation by Maciej Ciechomski  
Enz, S., Zoll, C. (2005). A questionnaire to asses affective and cognitive empathy in children. Journall of Child Psychology. Published online <http://www.opus4.kobv.de>

### **School volunteer program**

#### 1. Aims/goals:

Sensitivity to the different areas of human poverty, need, illness and other people's problems;  
Developing sensitivity to the needs and problems of other people,  
Trigger the desire to act in order to helping others people

#### 2. Procedures:

organizing school voluntary actions (e.g. supporting seniors living in a nursing home - shopping, keeping company; supporting peers staying long in the hospital - help with homework, keeping company etc.)

#### 3. Benefits:

Volunteering is a voluntary, free, conscious activity for the benefit of others, beyond family and relationships. It teaches an attitude of respect and tolerance towards others. Volunteering allows organize free time actively focused on generosity in showing unselfish good for other people. Participation in voluntary activities will introduce young people to participate in social life, develop empathy towards others. First of all, it carries a lot of educational values, shaping creativity, sensitivity and openness to the suffering of other people.

#### 4. Measuring and evaluation:

using tools to measure empathy constructed for the purposes of evaluation of this method (pre-test, post-test) Video Stimulus Training.

##### 1. Aims/goals: modeling of empathetic behaviors

##### 2. Procedures:

“In video stimulus training the trainer asks the participants to watch a videotape about others’ empathic behaviors, or their own, in mock situations, and to respond to the videotaped excerpts during the viewing or afterwards. The training session could also be followed by discussion and feedback” (Ming Lam, Kolomitro & Alamparambil, 2011)<sup>1</sup>

##### 3. Benefits:

Participants have the opportunity to meet other people empathic behaviors and safely discuss their point of view and attitudes towards watched situations and behaviors

4. Measuring and evaluation:

using tools to measure empathy constructed for the purposes of evaluation of this method (pre-test, post - test);

evaluation using interactive quiz (by: <https://kahoot.com/> or <https://quizlet.com/>)

### **Sharing experience with important people**

1. Aims/goals: modeling of empathetic behaviors

2. Procedures:

Meetings with important people (e.g. celebrities), which will talk about their voluntary activities

3. Benefits:

change the way of thinking, stimulation the desire to follow the behavior of known and loved people

4. Measuring and evaluation:

using tools to measure empathy constructed for the purposes of evaluation of this method (pre-test, post - test);

evaluation using interactive quiz (by: <https://kahoot.com/> or <https://quizlet.com/>)

### **Total teaching in terms of empathy**

1. Aims/goals:

Developing sensitivity to the needs and problems of other people

2. Procedures:

developing the capacity for empathic response not only by deliberately planned activities, but also using planned lessons as the occasion to reflect on the role of empathy, i.e. analysis of the art, literary works, films or performances taking the issue of empathy in social relationships

3. Benefits:

Changing the way of thinking, the opportunity to secure discussion about the consequences of a lack of empathy, etc.

4. Measuring and evaluation:

using tools to measure empathy constructed for the purposes of evaluation of this method (pre-test, post-test);

evaluation using interactive quiz (by: <https://kahoot.com/> or <https://quizlet.com/>).

## **Video Stimulus Training**

### 1. Aims/goals:

modeling of empathetic behaviors

afterwards. The training session could also be followed by discussion and feedback” (Ming Lam, Kolomitro & Alamparambil, 2011)<sup>1</sup>

### 3. Benefits:

Participants have the opportunity to meet other people empathetic behaviors and safely discuss their point of view and attitudes towards watched situations and behaviors

### 4. Measuring and evaluation:

using tools to measure empathy constructed for the purposes of evaluation of this method (pre-test, post -test); evaluation using interactive quiz (by: kahoot.com or quizlet.com)

## **Total teaching in terms of empathy**

### 1. Aims/goals:

Developing sensitivity to the needs and problems of other people

### 2. Procedures:

developing the capacity for empathic response not only by deliberately planned activities, but also using planned lessons as the occasion to reflect on the role of empathy, i.e. analysis of the art, literary works, films or performances taking the issue of empathy in social relationships

### 3. Benefits:

Changing the way of thinking, the opportunity to secure discussion about the consequences of a lack of empathy, etc.

## ***EVIDENCE OF IMPACT ON WELL BEING IN SCHOOL***

There are many reasons why students should learn empathy, thereby enhancing emotional intelligence. Below there is an attempt to explain how empathy affects the psychological well-being, although this effect is shown indirectly.

Empathy is a very important adaptive behavior. Thanks to it we are able to understand other people and to provide appropriate assistance. In today's world, empathy may be associated with other aspects - understanding the other person, we become a more attractive partner for them to talk. They feel heard, understood and needed. This may increase the chance of creating new friendships, or start a happy relationship. There are, after all, professions, which we cannot imagine without the ability of empathizing. Having this skill will, therefore, significantly contribute to the mental well-

being.

On the other hand, there are many studies showing a strong link between bullying (which significantly lower psychological well-being) with low levels of empathy (i.e. Jolliffie i Farrington, 2006; Raskauskas, Gregory, Harvey, Rishana i Evans, 2010, Schultze-Krumbholz i Scheithauer, 2009; Werden i MacKinnon, 2003).

3 Benefits of Empathy in Education (by Hollingsworth, 2003) are:

1. Empathy builds positive classroom culture.
2. Empathy strengthens community.
3. Empathy prepares your students to be leaders in their community

All of these benefits will also have a positive impact on mental well-being The importance of the cognitive aspect of empathy (perspective taking) for the improvement of psychological well-being has also been shown in the very recent study by Choi et al. (2016) -

[http://file.scirp.org/pdf/PSYCH\\_2016081915234644.pdf](http://file.scirp.org/pdf/PSYCH_2016081915234644.pdf)

## **COMMUNICATIONAL AND INTERPERSONAL SKILLS**

### **SCOPE OF APPLICATION**

*Lower secondary school / 12-16 years old / Poland*

### ***DESCRIPTION OF METHOD/STRATEGY***

A series of workshops developing communicational and interpersonal skills (active listening; assertive communication; understanding non-verbal communication; recognize communication barriers and obstacles; asking and answering; taking and giving feedback information, cooperation skills; conflict management, etc.)

- Learning to recognize communication barriers in order to avoid them;
  - Developing the skills of receiving and giving feedback;
1. Aims/ goals:
    - The awareness of the role and importance of self-presentation and interpersonal communication in the group;
    - Improving listening skills and build precise expression;
    - Learning assertive communication of emotions, attitudes and beliefs; realizing the benefits of assertive communication;
    - Improving the ability to present and defend arguments inside peer group.
    - Developing the conflict management skills;
    - Developing cooperation skills inside the group



## 2. Procedures:

A series of workshops/lessons during which students develop and increase communicational and interpersonal skills. During the workshops are used active learning methods (including: role play games/drama, brainstorm, discussion, self-evaluation, group and individual work, etc.)

## 3. Benefits:

Increase the competences in developed communication and interpersonal skills

## 4. Measuring and evaluation:

- Situational tests (simulations);
- Observation methods;
- Self-report measures (i.e. School Social Behavior Scales (SSBS), Merrell, 1993; SSBS2, Merrell, 2008); Social Skills Rating System (SSRS) Gresham & Elliott (1990, 2009) and Social Skills Improvement System (SSIS) (Elliott & Gresham, 2007).
- Performance tests based on different kinds of behavioral materials (i.e. after watching or listening the expressions of different people participants have to name the speakers feelings or - adjust the face drawing expressing emotions to the tone of voice).

## **EVIDENCE OF IMPACT ON WELL BEING IN SCHOOL**

Developing life skills (such as communicational and interpersonal skills) differs from other ways of learning about health. It does not focus solely on knowledge transfer, but the main emphasis is on developing attitudes and skills.

Communicational skills as a part of social and emotional skills are important for good mental health and wellbeing, learning, motivation to achieve and cooperate, and the development of values.

These skills affect the ability of young people to protect against various health threats and to build the skills needed for positive behavior and strengthen healthy relationships with other people.

Empirical studies show that the communicational and interpersonal skills correlate positively with the mental wellbeing, general life satisfaction, the quality of interpersonal relationships, but also the use of social support, effective strategies for coping with stress, as well as the wider adaptation and proper social functioning. Negative associations were found with various types of mental disorders, somatic symptoms, a sense of loneliness, criminal behavior and addictions (Austin, Saklofske i Egan, 2005; Cherniss, 2000; Extremera i Fernandez-Berrocal, 2005; Palmer, Donaldson i Stough, 2002; Schutte i in. 2002).

- (Austin E. J., Saklofske D. H., Egan V. (2005). Personality, well-being and health correlates of trait emotional intelligence. *Personality and Individual Differences*, 38, 547-558.
- Cherniss, C. (2002). Emotional intelligence and the good community. *American Journal of*

Community Psychology, 30, 1-11.

- Extremera, N., Fernandez-Berrocal, P. (2005). Perceived emotional intelligence and life satisfaction: predictive and incremental validity using Trait Meta-Mood Scale. *Personality and Individual Differences*, 39, 937-948.
- Palmer, B., Donaldson, C., Stough, C. (2002). Emotional intelligence and life satisfaction. *Personality and Individual Differences*, 33, 1091-1100.
- Schutte N. S., Malouff J. M., Simunek\_M\_\_McKenley J., Hollander S. (2002). Characteristic emotional intelligence and emotional well-being. *Cognition and Emotion*, 16, 769-785.

### **SOURCE**

- Understanding Skill-Based Health Education & Life Skills w Skills for Health (document 9). WHO. 2003;
- Collaborative for Academic, Social, and Emotional Learning (CASEL). (2003). *Safe and sound: An educational leader's guide to evidence-based social and emotional learning programs*. Chicago, IL: Retrieved from <http://casel.org/publications/safe-and-sound-an-educational-leaders-guide-to-evidence-based-sel-programs/>
- [http://www.schools-for-all.org/page/Health.+Personal+and+Social+Development+Education+\(HS\)](http://www.schools-for-all.org/page/Health.+Personal+and+Social+Development+Education+(HS))
- <http://www.kumon.co.uk/blog/the-importance-of-children-developing-good-communication-skills/>

## **COPING**

### **SCOPE OF APPLICATION**

*Lower secondary school/12-16 years old /Poland*

### **DESCRIPTION OF METHOD/STRATEGY**

#### **STRESS MANAGEMENT COACHING**

#### 1. Aims/goals:

- To recognize the sources of stress and/or difficult situations;
- To seek own resources helpful to coping with its;
- To reduce stressful situations;
- To adept calming practices and seek solutions;

#### 2. Procedures:

A series of coaching session (group or individual) conducted by experienced coach, during which participants / participant have opportunity to identify what is triggering their stress.

#### 3. Benefits:

Participants are able to use stress to train the new powers to defeat it and enrich their coping

experience.

#### 4. Measuring and evaluation:

using evaluation tools constructed for the purposes of evaluation of this method (pre-test, post - test); using standardized stress (i.e. the level of stress) measures (pre-test, post - test, follow-up test)

Optional standardized methods:

- *The Kessler Psychological Scale (K10) measuring stress, anxiety and depression (Kessler, 2002)*
- *General Health Questionnaire (GHQ-12) (Goldberg, 1978);*
- *Brief COPE identifying coping strategies (Carver, 1997);*
- *The Depression, Anxiety and Stress Scale (DASS-21) (Lovibond & Lovibond,*
- *Perceived Stress Scale - 10 item version (PSS-10) (Cohen, Kamarck & Mermelstein, 1983);*
- *Coddington Life Events Scale (CLES) measuring the experience of certain life stressors in the past year (Coddington, 1972)*
- *The Kessler Psychological Distress Scale (K10). Department of health Population Research and Outcome Studies. brief reports Numbe : 2002-14.*
- *Cohen, S., Kamarck, T., & Mermelstein, R. (1983). A global measure of perceived stress. Journal of Health and Social Behavior, 24, 385-396.*
- *Coddington, R. D. (1972). The significance of life events as etiologic factors in the diseases of children: I - A survey of professional workers. Journal of Psychosomatic Research, 16, 7-13.*
- *Goldberg, D. P et al. (1978). Manual of the General Health Questionnaire, Windsor, England, NFER Publishing.*
- *Carver, C. S. (1997). You want to measure coping but your protocol is too long: Consider the Brief COPE. International Journal of Behavioral Medicine, 4, 92-100.*
- *Lovibond, S. H & Lovibond, P. F. (1995). Manual for the Depression Anxiety Stress Scales. Sydney: Psychology Foundation of Australia.*

***Stress management workshops (a series of workshops developing the ability to cope with stress (including relaxation, breathing techniques, time management, positive thinking, etc.)***

#### 1. Aims/goals:

developing the ability to recognize symptoms of stress and how to deal with it; developing the skills to cope with the tension appearing in difficult situations,

2. Procedures:

A series of workshops/lessons during which students develop and increase the skills important to dealing with stress. During the workshops are used active learning methods (including: role play games/drama, brainstorm, discussion, self-evaluation, group and individual work, etc.)

3. Benefits:

Increase the competences in developed stress managing skills

4. Measuring and evaluation:

Observation methods (by teacher)

Self-report measures

using evaluation tools constructed for the purposes of evaluation of this method (pre-test, post- test);

using standardized stress (i.e. the level of stress) measures (pre-test, post - test, follow-up test)

Access to the school activities allowing relieve tension associated with stress (dance, sports, yoga classes, etc.)

1. Aims/goals:

relieve tension associated with the experienced stress in acceptable way

2. Procedures: to offer students as part of extracurricular activities such ones, which help young people to deal with the tension that results from stressful, difficult situations;

beyond voluntary participation, targeting students who have difficulty in coping with stress

3. Benefits:

being able to reduce stress through physical activity, meditation or other relaxation methods

4. Measuring and evaluation:

Observation methods (by teacher)

Self-report measures

using evaluation tools constructed for the purposes of evaluation of this method (pre-test, post-test);

## **EVIDENCE OF IMPACT ON WELL BEING IN SCHOOL**

It should be realized that stress is an integral part of our life. The complete lack of stress makes us ineffective, because we feel bad not only when we are tense, but also when we're bored or apathetic. The human body functions best with an optimal level of stress.

But: "Stress at school is the biggest contributor to Depression, self-harm and attempted suicide among young people, according to research published today."<sup>1</sup>

"Psychological well-being is defined as the notion of intrapersonal well-being and is focused on an internalized sense of self and the capacity to function in one's environment. Specific characterizations include autonomy, sense of purpose, resilience, sense of self, self-efficacy and optimism (Pollard &

Lee, 2003; Fraillon, 2004)<sup>2</sup> All these factors above are affected when an individual experiences stress.

- 1 <https://www.tes.com/news/tes-archive/tes-publication/school-stress-blame-student-depression-0>
- 2 <http://files.eric.ed.gov/fulltext/EJ1012304.pdf>

The replicat on study conducted with the participation of Polish students (Sklodkowska & Bokszanin, 2012)<sup>3</sup>, which analyzed the relationship between perfectionism, stress level and mental well-being, a high

level of stress significantly reduced the direct impact of perfectionism on participants well-being.

- 3 Slodkowska, J., Bokszczanin, A. (2012). Perfekcjonizm i stres a dobrostan psychiczny studentow uczelni wyzszych. Testowanie modelu mediacyjnego. Acta Universitatis Lodzensis Folia Psychologica, 16, str. 3-11.

The intensity of the stress o is treated in the literature on quality of life as a direct factor in differentiating mental well-being. Czapinski (2011)<sup>4</sup> demonstrated that strategies for coping with stress differentiate levels of psychological well-being, independently on the intensity of the stress. Peoples using an active strategy focused on task force are better indicators of well-being than those who using passive emotional strategies.

- 4 Czapinski J, Panek T. Diagnoza Spoeczna 2011. Warunki i Jakosc Zycia Polakow. Contemporary Economics. Warszawa: Rada Monitoringu Spoecznego; 2011.

#### *SOURCE*

- <https://www.takingcharge.csh.umn.edu/enhance-your-wellbeing/health/stress-masterv/use-wellbein>
- <http://www.heretohelp.bc.ca/wellness-module/wellness-module-2-stress-and-well-being>
- <http://www.ncgs.org/Pdfs/Resources/Girls,%20Stress,%20and%20Well-Being.pdf>
- [http://www.youngminds.org.uk/training services/training and consultancy/for schools/wellbeing](http://www.youngminds.org.uk/training%20services/training%20and%20consultancy/for%20schools/wellbeing)
- <http://www.iosriournals.org/iosr-irme/papers/Vol-4%20Issue-5/Version-1/E04513236.pdf>

## **SELF-ESTEEM**

### ***DESCRIPTION OF METHOD/ STRATEGY***

Coaching/counselling related to improving self-esteem

1. Aims/goals:
  - Developing self-esteem

- Strengthening self-esteem;
- Developing awareness of the owned resources;
- Coopersmith S (1967). The antecedent of self-esteem. In Freeman, San Francisco.
- Increase self-acceptance
- Developing skills for seeking support in the environment and use it

2. Procedures:

- A series of coaching session (group or individual) conducted by experienced coach, during which participants / participant have opportunity to identify their own strengths and weaknesses and improve self-esteem

3. Benefits:

- Students can name the positive features of their character;
- Students can name the qualities that distinguish them from others and contribute to their uniqueness
- A students are able to talk about their skills as a source of success
- Students can name those own qualities that are valued by others
- Students is able to talk about themselves, exposing their positive qualities

4. Measuring and evaluation:

- Observation methods (by teacher)
- Self-report measures
- using evaluation tools constructed for the purposes of evaluation of this method (pre-test, post - test);
- using standardized self-esteem measures (pre-test, post - test, follow-up test) - i.e. Coopersmith Self-Esteem Invento-ry (CSEI) (Coopersmith, 1967).

***Workshops developing self-esteem (i.e. support discovering the strengths of the participants)***

1. Aims/goals:

- Change of attitude towards himself
- Developing the skills of presenting participants' strengths

- Strengthen the participants' faith in their own abilities,
  - Learning self-acceptance
2. Procedures:
- A series of workshops/lessons during which students develop and increase the skills important to develop self-esteem.
  - During the workshops are used active learning methods (including: role play games/drama, brainstorm, discussion, self-evaluation, group and individual work, drawing technique, visualization, etc.)
3. Benefits:
- Increase the competencies necessary for the development of self-esteem;
  - Students awareness of their own strength and weaknesses
4. Measuring and evaluation:
- Observation of the participants (by teachers) during the performed exercises (i.e. whether with subsequent activities develop their ability to speak positively about yourself);
  - Evaluation of the program by the students in the last classes (unfinished sentence,
  - reflections on the course, assessing the level of satisfaction with participation the workshops on the diagram, i.e. from 0 to 5).

## **EVIDENCE OF IMPACT ON WELL BEING IN SCHOOL**

Self-esteem is defined as an evaluation of our worthiness as individuals, a judgment that we are good, valuable people.

According to William James (1890) self-esteem was is important aspect of our mental health, what show its connection with well-being.

Baumeister's review over 15,000 journal articles written about self-esteem has shown that the majority of articles pointed that self-esteem is positively associated with adaptive outcomes (Baumeister,1998; after: Neff, 2011). This also suggest its association with mental well-being.

- James, W. (1890). Principles of Psychology. Chicago: Encyclopedia Britannica.
- Baumeister, R. F., Campbell, J. D., Krueger, J. I., & Vohs, K. D. (2003). Does high self-esteem cause better performance, interpersonal success, happiness, or healthier lifestyles?

### ***SOURCE***

<http://www.therapistaid.com/therapy-worksheets/self-esteem/adolescents>

<https://www.pinterest.com/explore/self-esteem-activities/>

<http://empoweredme.ca/>

## **3.2. ISTITUTO SUPERIORE DI SANITA'**

### **THE MAIN FACTORS OF PSYCHOLOGICAL WELL-BEING AT SCHOOL**

#### **PSYCHOLOGICAL WELL-BEING**

The theorization of well-being has followed two distinct paradigms, one that focuses on ‘hedonic’ well-being (centered on the pursuit of happiness) and the other on ‘eudaimonic’ well-being (resulting from the development of human potential). Research on hedonic well-being has mainly focused on the assessment of Subjective Well-Being (SWB), which is understood as having an affective component (i.e. a balance between positive and negative affect) and a cognitive component (judgements concerning one’s life satisfaction) (Ryan & Deci, 2001).

The term ‘eudaimonia’ was first used by Ryff in her formula of positive psychological health, in which Psychological Well-Being (PWB) is explicitly concerned with the individual’s self-realization (Ryff & Singer, 2008). Ryff’s conception of PWB is based on six dimensions (i.e. self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth), which have been operationalized in Ryff’s Scales of Psychological Well-Being (SPWB; Ryff, 1989). The original SPWB included 20 items for each dimension, but three shorter forms have been developed and include scales with 14 items (Ryff, Lee, Essex, & Schmutte, 1994), nine items (van Dierendonck, 2005) and three items per dimension (Ryff & Keyes, 1995).

Of particular importance is whether PWB can be a protective factor against mental illness. Studies have found that lower levels of PWB are associated with residual psychiatric symptoms, which are highly prevalent and of prognostic value (Fava, Tomba, & Grandi 2007), especially in persons with recurrent depression and anxiety disorders (Fava et al. 2005). Furthermore, a recent longitudinal study has shown that low PWB predicts future depression (Wood & Joseph, 2010). In



clinical settings, a specific strategy (Well-being Therapy, WBT) for enhancing psychological well-being according to Ryff's (1989) model has been developed (Fava & Ruini, 2003) and tested in controlled trials, both alone (Fava, Rafanelli, Cazzaro, Conti, & Grandi, 1998) and in addition to cognitive-behavioural packages (Fava, Rafanelli, Grandi, Conti, & Belluardo, 1998; Fava, Ruini, Rafanelli, Finos, et al., 2004; Fava et al., 2005; Fava, Ruini, Rafanelli, & Grandi, 2002).

According to the eudaimonic perspective, well-being consists of fulfilling one's potential in a process of self-realization. This orientation appears to be particularly relevant in developmental setting because it underlines the realization of human potential and individual strengths (Ryan & Deci, 2001; Ryff, 1989). The Ryff's model of psychological well-being could be applied also with children and adolescents because possessing high levels in the six dimensions represent important steps to be achieved during an optimal developmental process. Ryff and Singer (Ryff & Singer, 1996) remark that the absence of psychological well-being could influence mental health. Therefore, the promotion of psychological well-being in the school setting may entail long-term benefits in terms of developmental processes and of prevention of distress.

***Skills associated with this factor:***

1. COMMUNICATION SKILLS (Active listening, expressing unpleasant feelings in a constructive way, expressing pleasant feelings and making requests in a polite way; being assertive).
2. STRESS MANAGEMENT (coping, resilience, emotional regulation).

## **POSITIVE PEER RELATIONSHIP**

Positive peer relationships become increasingly important in young people's overall development and well-being during early adolescence (Oberle, Schonert-Reichl, & Thomson, 2010; Rubin, Bukowski, & Parker, 2006). Decades of research seem to suggest that peer acceptance - the degree to which a child is socially accepted and liked by his or her peers - emerges as a core indicator for multiple domains of success and well-being - including social, emotional, and mental well-being, and academic success during the early adolescent years (Anderman & Freeman, 2004; Furlong et al., 2003; Haynes, Emmons, & Ben-Avie, 1997; Osterman, 2000; Whitlock, 2006).

To be healthy, children must form relationships not only with their parents, but also with siblings and with peers. Peer relationships change over time. In the toddler period, children's social skills are very limited; they spend most of their time playing side by side rather than with each other in a give-and-take fashion. As children grow, their abilities to form close relationships become highly dependent on their social skills. These include an ability to interpret and understand other children's nonverbal

cues, such as body language and pitch of voice. Children whose social skills develop optimally respond to what other children say, use eye contact, often mention the other child's name, and may use touch to get attention. If they want to do something that other children oppose, they can articulate the reasons why their plan is a good one.

Social skills improve with opportunities to mix with others (Bridgeman, 1981).

Studies on peer relationships during the middle school years indicate that early adolescents who have positive relationships with their peers also tend to be socially well-adjusted, and academically more successful than those who do not have positive relationships with their peers (e.g., Bierman, 2004; Furrer & Skinner, 2003; Veronneau & Vitaro, 2007; Wentzel, 1991; Wentzel & Caldwell, 1997).

Overall, research has indicated that the social aspect of academic success cannot be ignored. Particularly during early adolescence, when the social focus shifts away from the family and toward the peer group (Larson & Richards, 1991), being accepted and having friends at school emerges as an important aspect for positive growth in school. Peer acceptance and friendships in the school setting contribute to the formation of a positive school identity and therefore need to be considered part of the pathway to academic success (Cooper, Valentine, Nye, & Lindsay, 1999).

Recent findings demonstrate that prosocial children, compared with their less prosocial peers, have better peer relationships (Eisenberg et al., 2006), are less at risk for externalizing behaviors (e.g. Kokko & Pulkkinen, 2000), and perform better in school (Caprara, Barbaranelli, Pastorelli, Bandura, & Zimbardo, 2000; Wentzel, 1993).

Several studies have identified prosocial behavior as a protective factor against aggression (e.g. Kokko, Tremblay, Lacourse, Nagin, & Vitaro, 2006; Pulkkinen & Tremblay, 1992).

A recent Italian study (Caprara, Luengo Kanacri, Zuffiano, Gerbino, & Pastorelli, 2015) has examined prosocial behaviors as integral to intervention goals that seek to promote successful youth development. This study examines the effect of a school-based intervention program entirely designed to promote prosocial behaviors called Promoting Prosocial and Emotional Skills to Counteract Externalizing Problems in Adolescence (Italian acronym CEPIDEA). The CEPIDEA curriculum was incorporated into routine educational practices and included five major components that reflect the personal determinants of prosocial behavior during adolescence.

## **FAMILY ENVIRONMENT**

Parental support and parental involvement are equally important to a student's academic well-being.

One of the main roles that parents play to their child is an influence on how academics should be pursued and accomplished throughout a lifetime, so one of the main influences on adolescent's academic choices and well-being is the role that parents play. Academics are a very important factor of an adolescent's life. Parental involvement and parental support contribute to adolescent's academic well-being, namely academic self-esteem and self-efficacy.

Academic self-esteem is defined as how an individual feels his/her abilities are in an academic setting. For example, having low self-esteem in childhood and adolescence can predict depressive symptoms in adulthood (Steiger, Allemand, Robins, & Fend, 2014). It was found that raising academic self-esteem could have positive influence on academic performance (Rosenberg, Schooler, Schoenbach, & Rosemberg, 1995). High levels of self-esteem are related to increased skills, resources, and general happiness in a school setting, which in turns leads to academic success (Whitesell, Mitchell, & Spicer, 2009).

Another key component of adolescent development is academic self-efficacy. Academic self-efficacy is the strength and belief in an adolescent to achieve and reach goals on academic tasks, which is a valuable skill to attain during adolescence. Academic self-efficacy is a strong predictor of academic success and goal attainment, as well as respect for others and involvement in the classroom (Hoigaard, Kovac, Overby, & Haugen, 2015), which demonstrates that efficacy not only predicts achievement outcomes but also predicts prosocial outcomes.

The factors that determine adolescent's academic self-esteem and self-efficacy are positive interactions with peers (Cakar & Karatas, 2012) and teachers (Martin, Marsh, McInerney, Green, & Dowson, 2007) and the role of parents which is constant in their life (Upadyaya & Salmela-Aro, 2013). When parents are involved with their child's academics and activities at home, these children have higher levels of self-esteem and academic achievement. This is compared with children whose parents only invested funding in their child school (Ho, 2003). Also, children of parents that regularly attend events with the child and volunteer at the child school show increased levels of academic performance (Blair, 2014). Adolescents who have supportive parents tend to have high levels of academic self-esteem and self-efficacy. Parental support, defined as being emotionally present and consistently dependable for the child in times of need, is also important to an adolescent's well-being (Felson & Zielinski, 1989). In contrast low parental support results in low self-esteem and depressive symptoms among adolescents (van Roekel, Engels, Verhagen, Goossens, & Scholte, 2011). Also, parental support fosters motivation and persistence in academics, which in turn lead to improved academic performance (Mih, 2013). From these studies, it is shown that parental support fosters certain aspects of academic well-being, such as motivation, self-efficacy in academics and more emotional stability and the lack of it can have negative consequences on adolescents' well-being.

***Skills associated with this factor:***

1. COMMUNICATION SKILLS (Active listening, expressing unpleasant feelings in a constructive way, expressing pleasant feelings and making requests polite. Being assertive)
2. PROBLEM SOLVING (and decision making).

## **ACADEMIC ACHIEVEMENT**

Although there are a number of school-based curricula available that typically focus on teaching and practicing individual-centered social-emotional skills, research indicates that social-environmental factors also influence school success (Caprara, Barbaranelli, Pastorelli, Bandura, & Zimbardo, 2000; Malecki & Elliott, 2002; Welsh, Parke, Widaman, & O'Neil, 2001), as evidenced by longitudinal data showing that elementary school students' pro-social and empathic behaviours predict increases in standardized achievement test scores (e.g., Malecki & Elliott, 2002) and grades (Caprara et al., 2000; Welsh et al., 2001). In fact, evidence suggests that students' perception of their classroom and school social climate, including belongingness and cohesion, are predictive of scholastic engagement and achievement (Goodenow, 1993; Master & Walton, 2013; Ryan & Patrick, 2001; Walton, Cohen, Cwir, & Spencer, 2012). For instance, students who perceive that their peers are emotionally supportive are more likely to positively identify themselves with school (Wang & Eccles, 2012) and show positive school engagement (e.g., Nelson & DeBacker, 2008). Also, acceptance from peers is positively associated with academic achievement (e.g. Buhs & Ladd, 2001; Oberle & Schonert-Reichl, 2013). Particularly, studies on peer acceptance during the middle school years indicate that early adolescents who are popular, accepted, and have positive relationships with their peers also tend to be socially well-adjusted, and academically more successful than those who are rejected by their peers (e.g., Bierman, 2004; Furrer & Skinner, 2003; Veronneau & Vitaro, 2007; Wentzel, 1991; Wentzel & Caldwell, 1997). Explanations for the critical role of peer acceptance in academic achievement centered around the notion that belongs to a friendship group in school can increase motivation to engage in classroom and school activities, and be a valuable source of social support for students in the school context, particularly during early adolescence (Veronneau, Vitaro, Brendgen, Dishion, & Tremblay, 2010; Wentzel, 2003). In contrast, children who exhibit behaviours that reflect low levels of social skill, such as aggression and defiance, tend to dislike school, have difficulty forming positive peer relations, and are at greater risk for academic difficulties (e.g., Hinshaw, 1992; Ladd & Burgess, 2001). Together, these patterns of findings suggest that fostering positive social development in schools facilitates the mission of academic excellence. School-based

intervention consisting of structured activities designed to promote building pro-social skills such as empathy, communication, diversity appreciation, and friendship support may be a strategy for counteracting aggressive conduct, maintaining or improving positive peer relationships and enhancing academic achievement during adolescence.

***Skills associated with this factor:***

1. PROBLEM SOLVING (and decision making)
2. PROSOCIAL BEHAVIOR (e.g., empathy)
3. STRESS MANAGEMENT (coping, resilience, emotional regulation)

**SKILLS ASSOCIATED WITH THE IDENTIFIED FACTORS**

**PROBLEM SOLVING**

***SCOPE OF APPLICATION***

***High School/Children 14-18 years old/Italy***

This skill was used in the framework of an Italian programme designed for students of between 14 and 18 years of age (i.e., those in high school). The programme was named Definizione di obiettivi e soluzione di problemi (establishing goals and problems solving).

In 2009, the Mental Health Unit (MHU) of the Istituto Superiore di Sanità (National Institute of Health, Italy) obtained a grant from the Ministry of Health to develop this school-based programme in order to promote mental health at school in Italy, according to the fifth and sixth reports on youth (Buzzi, Cavalli, & de Lillo, 2002, 2007) carried out by the IARD Institute, a nonprofit organization in Milan involved in sociological research, an increasing number of young people suffer from apathy, sadness, and low self-esteem and seem to lack the capacity to define long-term goals and life choices. According to the PRISMA study (an Italian national project on children's mental health), which represents the only investigation conducted in Italy aimed at evaluating the prevalence of mental disorders among children aged 10-14 years, 8.2% (CI 4.2%-12.3%) of preadolescents were found to suffer from at least one externalizing or internalizing mental disorder. Poor mental health in childhood and adolescence is associated with health and social problems such as school failure, delinquency, and substance misuse, and this increases the risk of adverse outcomes in adulthood (Jenkins, Baingana, Ahmad, McDaid, & Atun, 2011). Interventions that promote positive mental health may provide young people with the necessary life skills, support, and resources to fulfil their potential and overcome adversity. The most important life skills include self-efficacy, problem-solving, empathy, and coping strategies (St Leger, Young, Blanchard, & Perry, 2010).

***DESCRIPTION OF METHOD/ STRATEGY***

In the programme, structured problem-solving techniques were used. These techniques originate from the psycho-educational approach adopted by Falloon in the psychosocial rehabilitation for caregiver-

based stress management of schizophrenic and affective disorders (Falloon, Body, & McGill, 1984). Students are trained to use structured problem-solving to address problems that cause them the most stressful situations in their life and to use their social network to obtain the support of the people who are most willing and able to assist them in resolving problems.

The problem-solving training consists of exercises to be conducted at school and at home in order to encourage students to use a structured method which includes six steps: 1) the problem is stated clearly; 2) all potential solutions are brainstormed and listed; 3) each possible solution is evaluated in terms of its main advantages and disadvantages; 4) the most practical solution is chosen; 5) implementation is carefully planned; 6) the outcome of the implementation efforts is reviewed and refined until the problem has been resolved.

The problem solving may be useful to better deal with the demands of everyday life and to cope effectively with practical problems or life stress.

The problem solving skill may contribute to improve self-efficacy and psychological well-being. Changes in self-efficacy and psychological well-being may be assessed with The Regulatory Emotional Self-Efficacy (RESE) scales (Caprara & Gerbino, 2001) and the Ryff's Scales of Psychological Well-Being (Ryff & Keyes, 1995).

### ***EVIDENCE OF IMPACT ON WELL-BEING AT SCHOOL***

Psychosocial stress management strategy such as structured problem solving could form the basis for a primary prevention program for psychological distress. Promoting students' active involvement in resolving problems and taking decisions may facilitate achievement of their personal goals. This competence could give students greater control over their lives and better personal and social functioning and psychological well-being. (Gigantesco et al., 2013; 2015).

**Source:** [http://www.iss.it/binary/mentale/cont/dispensa\\_scuola\\_15\\_1.pdf](http://www.iss.it/binary/mentale/cont/dispensa_scuola_15_1.pdf)

## **COPING WITH ANGER AND AGGRESSIVENESS**

### ***SCOPE OF APPLICATION***

#### ***High School/ Italy***

These skills were used in the framework of an Italian programme designed for students between 8

and 16 years of age. The programme named ‘Coping Power Program’ was introduced in Italy by the ‘IRCCS Fondazione ‘Stella Maris’.

The programme was adapted to school in Pisa (Tuscany Region of Italy) as a prevention programme to promote the development of new skills, improving social skills and diminishing aggressive behaviors. Aggressive behavior and behavior disorders at school are associated to a worsening of the child or adolescent in various areas: education (poor performance, attention deficits, academic failure), family (characterized by conflicts, verbal and physical aggression) and social (school leaving, entering in antisocial groups, marginalization). For this reason, they are considered disorders at high social cost (Loeber, Burke, Lahey, Winters, & Zera, 2000). The incidence of the problem varies between 6% and 16% for males and between 2% and 9% for females under 18 years (Loeber and Keenan, 1994).

### ***DESCRIPTION OF METHOD/ STRATEGY***

The Coping Power program is a multi-modal program for the control and anger management in school-age children, developed by Lochmman and collaborators (Lochmman & Wells, 2002a-b). It is based on cognitive- behavioral interventions and on the socio-cognitive model of Dodge (Crick & Dodge, 1994). The Program includes also parents.

The main Coping Power Program objectives include the reduction of externalizing and aggressive behavior problems, adaptation to school requirements and the creation of a support network in the territory. The ultimate goal is to work on self-reflection capacity, that is, on how to think in difficult situations.

The Coping Power Program is aimed at both children and their parents and focuses both on the family background processes on cognitive processes of children, trying to promote better problem solving strategies and better ways of relating to peers. The program uses cognitive-behavioral techniques. The program for children is structured in group sessions aimed at increasing: a) the ability to carry on short and long terms objectives; b) the organization and the capacity to study; c) awareness and management of anger; d) perspective taking; e) problem solving in conflictual situations; f) the ability to cope with peer pressures; g) social abilities and participation in positive social groups. Among the techniques used, the role playing and the ability to peer interaction are elements that favor the generalization of acquired skills.

The part of the program for parents is structured in group sessions aimed at increasing parental abilities relative to:

- a) to gratify and give positive attention;
- b) to set simple rules and to clearly express their expectations about children behavior;

- c) to promote the organization and the abilities to study;
- d) to use correct educational practice;
- e) parental stress management;
- f) to improve family communication and problem-solving in conflictual situations;
- g) to support the abilities of problem-solving acquired by children.

The benefits of this method are:

- Reduces aggressive behavior
- Improves behavioral functioning at school
- Improves children's social competence and social information processing
- Improves internal locus of control for successfully attaining goals
- Increases ability to resolve problems
- Improves and increases parental involvement
- Improves provision of consistent discipline

Among the many instruments used, we may mention the Youth Self Report (YSR) (Achenbach, T. M., 1991). The YSR is a 112-item self-report designed for children and adolescents (ages 11-17), that assesses behavioral competency and behavioral problems and parallels the Child Behavior Checklist (CBCL). Behaviors are rated on a 3-point scale: 0-Not true, 1-Somewhat or sometimes true and 2-Very true or often true, based on the preceding 6-months. The questionnaire provides scores for the following syndrome scales: anxious/depressed, withdrawn/depressed, somatic complaints, social problems, thought problems, rule-breaking behavior, and aggressive behavior. Domains Assessed: Aggression and Oppositionality, Anxiety, Attention Problems and Hyperactivity, Depression and Mood, Personality Traits, Psychotic and Atypical Behavior, Risk Taking and Impulsive Behavior, Social Interaction, Somatic Complaints, Substance Use.

### ***EVIDENCE OF IMPACT ON WELL-BEING AT SCHOOL***

The results of a first adaptation of the program in schools reported a decrease in hyperactive behavior in the classes that received the treatment and a greater number of pro-social behavior (Muratori, Bertacchi, Giuli, Lombardi, Bonetti et al., 2015). These programs would promote the development of new positive skills, increasing social skills and decreasing aggressive behavior (Mytton, DiGuseppi, Gough, Taylor, & Logan, 2006).

**Source:**

<http://www.stateofmind.it/2016/06/coping-power-program-disturbi-comportamento-dirompente/>



## **EMOTIONAL INTELLIGENCE**

### ***SCOPE OF APPLICATION***

Secondary school/ Children 8 -13 years old

This skill was used in the framework of an Italian programme designed for children between 8 and 13 years of age (i.e., those in middle school). The programme was developed by Mario Di Pietro and it is named ABC of emotions.

Mario Di Pietro, from the Veneto Region of Italy, has developed a school-based universal programme in order to promote emotional intelligence that refers to the perception, processing, regulation and utilization of emotions.

Adolescence is a period in which emotional intelligence is malleable and this is important given that this variable is strongly related to depression and related disorders (Jacobs, Reinecke, Gollan, & Kane, 2008; Bandura, Pastorelli, Barbaranelli, & Caprara, 1999). Individuals with high emotional intelligence believe that they are in touch with their emotions and can regulate them in a way that promotes well-being and life satisfaction.

### ***DESCRIPTION OF METHOD/ STRATEGY***

The programme originates from the Rational Emotive Behavior Therapy (REBT) that is a type cognitive therapy first used by Albert Ellis (1993) which focuses on resolving emotional and behavioral problems. The goal of the therapy is to change irrational beliefs to more rational ones. REBT encourages a person to identify his general and irrational beliefs (e.g. I must be perfect") and subsequently persuades the person to challenge these false beliefs through reality testing. REBT is based on the ABC model of psychological disturbance and therapy where "A" represents the activating stressful life event, that is, the external event to which the person is responding, "B" refers to irrational beliefs, and "C" refers to the emotional, behavioral, and cognitive consequences of these irrational beliefs — i.e., psychological disturbance and maladaptive behaviors. Specific objectives of the programs are increasing positive emotions, promoting self-acceptance, decreasing unpleasant feelings, controlling one's own impulses and anger, using negotiation and resolving conflicts.

The procedure consists in teaching the students to recognize emotions, and to modify negative key thoughts and feelings that precede, accompany, and follow unpleasant emotions. These include attributional styles, that is, how individuals explain to themselves the events of their life; for example, individuals with depression have a negative attributional style, in which they attribute the cause of

bad events to themselves (personalization), perceive these events as being permanent (persistence), and engage in negative generalization following unsuccessful experiences (generalization).

The major assumption of the ABC model suggests that rational beliefs lead to functional consequences, while irrational beliefs lead to dysfunctional consequences. Mario Di Pietro reported that students that participate to the program are less litigious, exhibit less destructive conduct, have better physical health, are less impulsive, more concentrated and have better school results (Di Pietro, 1992, 1998; Di Pietro & Dacomo, 2007). Moreover, self-efficacy has a negative relationship with irrational beliefs, and it seems that self-efficacy improved during the substitution process of irrational beliefs to rational beliefs through logical arguments.

To evaluate the skill, it can be used the IDEA INVENTORY (Kassinove, Crisci & Tiegerman, 1992) an instrument for assessing irrational beliefs and other measures aimed at evaluating self-efficacy.

### ***EVIDENCE OF IMPACT ON WELL-BEING AT SCHOOL***

The aim of REBT is to replace irrational beliefs which are rigid, inconsistent with reality and illogical with a new set of rational beliefs which are flexible and non - extreme. REBT helps people to learn to challenge their own irrational thinking and develop the habit of thinking in beneficial and rational ways. This shift enables people to behave more effectively and, ultimately, experience healthy emotions (Ellis, 1993). There is evidence supporting the use of REBT for reducing negative emotions such as anxiety, stress, depression, and irrationality as well as improving self-efficacy and stress-coping strategies (Calear & Christensen, 2010). The REBT's cognitive strategy, which helps one to quickly accept oneself and solve problems, has been reported to be helpful among nursing students with low scores in decreasing anxiety and in preparing for the National Council Licensure Examination for registered nurses (Poorman, Mastorovich, Liberto, & Gerwick, 2010).

**Source:** [http://www.aidaiassociazione.com/documents/Intervento\\_a\\_scuola\\_trattamento\\_cognitivo-comportamentale\\_e\\_gestione\\_delle\\_emozioni.pdf](http://www.aidaiassociazione.com/documents/Intervento_a_scuola_trattamento_cognitivo-comportamentale_e_gestione_delle_emozioni.pdf)

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### 3.3. EUROPA TRAINING

The main definitions of psychological well-being at school

Wellbeing is generally understood as the quality of people's lives. It is a dynamic state that is enhanced when people can fulfil their personal and social goals. It is understood both in relation to objective measures, such as household income, educational resources and health status; and subjective indicators such as happiness, perceptions of quality of life and life satisfaction. (Statham, 2010) However, in assessing the well-being of scholar and pre scholar subjects, literature has found some important differences in how adults and children define wellbeing and the aspects of wellbeing that children prioritise compared to adults.

- Wellbeing is seen as a positive aspect of health however it is not always clearly defined and the term can be perceived as a “catch-all category” (Cameron et al 2006).
- The World Health Organisation (WHO) defines health promotion as “the process of enabling people to exert control over, and to improve their health” (WHO, 1986).
- A positive state of mind and body, feeling safe and able to cope with a sense of connection with people, communities and the wider environment. (H.M. Government, 2010)

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- 17.

### **THE MAIN FACTORS OF PSYCHOLOGICAL WELLBEING AT SCHOOL**

There is some emerging consensus that childhood wellbeing is multi-dimensional (Statham, 2010), should include dimensions of physical, emotional and social wellbeing; should focus on the immediate lives of children but also consider their future lives; and should incorporate some subjective as well as objective measures. Before his starting of office, the former Prime Minister David Cameron made a commitment to broadening our understanding and measurement of the nation's quality of life, or wellbeing: <<It's time we admitted that there's more to life than money and it's time we focused not just on GDP but on GWB - general wellbeing. Wellbeing can't be measured by money or traded in markets. It's about the beauty of our surroundings, the quality of our culture and, above all, the strength of our relationships. Improving our

society's sense of wellbeing is, I believe, the central political challenge of our time.>> (The Children Society,2014).

Following these important statements, assessing well-being of children and adolescents has to be composed of both endogenous and exogenous elements, which literature has divided into the followings:

- 1) Personal well-being;
- 2) Relational well-being;
- 3) Well-being at school;
- 4) Subjective well-being.

### **Personal well-being:**

In the publication *Better Outcomes, Brighter Futures* published by the Government of Ireland in 2014, the well-being of children and young people is set out that children must be «active and healthy, with positive physical and mental wellbeing»>> (DCYA, 2014).

Starting from this important contribution, therefore, for personal well-being we want to intend the self-empowerment of an individual that has to be achieved going through several different 'lenses', namely: need, rights, poverty, quality of life and social exclusion (Axford, 2009).

Again, sociologist Erik Allardt divides general well-being into three general needs which refer to both exogenous and endogenous elements constituting the general well-being of an individual: Having, Loving and Being (Allardt, 1986). It is according to such distinction, then, that we have decided to consider as "Personal Well-being" as the condition in which such needs are met through the provision of goods likewise healthy lifestyle, proper housing, access to social services. In sum, many different ways in which childhood wellbeing has been conceptualized, and the variety of methods that have been used to attempt to measure it. For example, the domain of children's health may be understood as physical health, including aspects such as fitness levels, diet, nutrition and risky behavior; and it may or may not include psychological and/or emotional health (in many cases this is a separate domain).

Of course schools cannot provide all of the needs commonly required to achieve a full-fledged personal wellbeing (especially those involving assessing the needs of children and families within specific communities, or those focused on eradicating child poverty tout court), however, what schools can do, in order to meet an important part of such needs, is to promote in their policies a more positive focus on improving the quality of life of children, through a range of initiatives such as having safe places to play and introducing social and emotional learning in school (Statham 2010). Also, schools can become a pivotal center within the whole community and, so, foster the wellbeing of the whole environment in which children are involved, not only the academic one. Through the

integration of teams and personnel involved in Special Educational Needs and Disabilities (SEND), inclusion, Personal Social Health and Economic education (PSHE), schools can strengthen the ties with the civil society organizations even further, generating a positive welfare to support the children in every aspect of their personal growth.

***Skills associated with this factor:***

- Problem solving
- Self-esteem (intended as the capability to believe yourself as capable to achieve a certain goal)
- Team Work

**Relational well-being:**

Even though the Importance of relationships has been always assessed within the broader definition of general wellbeing, the study of relational well-being as a per se factor has been brought forward only recently especially by the work of sociologist Sarah White. In her work *Relational Wellbeing* (2015), White states that Relational Well-being (RWB) can be regarded as a link between personal wellbeing and subjective well-being, since «relationships form a central focus, as both the means through which goods and needs are distributed and as intrinsic to the constitution and the experience of wellbeing (White 2015). Indeed, whereas the mainstream literature looked for a holistic approach, considering individuals as object of study (Nussbaum, 2000), RWB holds that the very own notions of well-being cannot be detached from the space-time construction in which social relations are defined (Atkinson 2012). This means that are the individuals themselves who define, through reciprocal acknowledgment, what needs are required to achieve well-being and through which goods: paraphrasing Klasen (1998), it might happen that, even though one achieved what we have defined here as Personal Wellbeing, this might not be the only condition to meet to avoid social exclusion. Transferring such features to the relations among peers in schools, what comes out is that the ability to establish and maintain supportive relationships is crucial to enjoying, achieving and maintaining a healthy lifestyle. What research found out, is that early adolescence constitute an extremely delicate period of change; such change is dominated by the transition to a growing psychological independence from the parents (and adults in general) and corresponding dependence on peer relationships to establish and maintain positive perceptions of the self (Steinberg, 1990; Youniss & Smollar, 1985). Studies demonstrate that in the early adolescence, peer to peer relations increase by up to 30% (Rubin, Bukowski, & Parker, 1998); therefore, being accepted among the peers is becoming a central feature of the wellbeing of pre-adolescence and adolescent individuals. Through making stable relationships amongst their peers, students gain support and guidance which helps them to cope in times of change and pressure.

Skills associated with this factor:

- Intimacy
- Empathy
- Conflict Resolution

### **Well-being at school:**

The school, alongside families, is the lead agency for providing training and socialization of the individual, one of the pins to be leveraged to promote the integral well-being (physical, psychological, relational) of our children.

The school, in fact, is not and cannot be a mere place where only the mere transmission of knowledge happens; rather, the school is a place of life in which individuals experience multiple meetings among peers and they learn about the civil society and how to relate to adults. In addition, getting educated is an important participatory process for children and equal access for all to this process allows participation in, and respect by society. In fact, many of the early calls for mass education in the 18th and 19th centuries viewed the inclusionary nature of the education process, and the fostering of citizenship through education as more important than the skills one may acquire through education. (Rotschild 1998; Klasen 1999)

The fact is that all the school have high expectations, both from the human, personal development, both from a learning perspective and preparation for future careers. Schools play a vital role in the promotion of positive mental health in children. It is in school that pre-adolescents and adolescents are challenged to express their full potential and it is the first stage in which they acquire lifelong skills. Schools can also provide a safe and supportive environment for building life skills and resilience and a strong sense of connectedness to school. With “wellbeing at school”, then, we want to refer to a condition which is complementary to the personal wellbeing and the relational wellbeing, in the sense that in schools, the dimension of Having and Loving related to the above-mentioned factors, find their structure and expression also through academic achievement. Academic achievement, in fact, must not be shown to the pupils as a goal to be reached despite everything, yet it must be defined as a mean to contribute proactively to the growth of the individual and the community where it dwells. As an example to this, the last report from the OSCE shows that, if used properly, academic achievements and commitment in schools can be useful to break social inequalities (often cause of social exclusion) and to better integrate students with different perceptions of personal wellbeing (OSCE 2017). In this sense, according to the analysis of the Public Health England and the Anna Freud Centre for Children and Families, «schools and colleges might influence

student mental wellbeing through:

- providing a supportive culture, ethos and environment that can serve as a buffer to difficult circumstances
- teaching and learning that help students to build important life skills, through PSHE strategies such as learning to learn, habits of mind and the growth mindset
- supporting the development of skills and character traits such as self-management, compassion and team work (e.g. as part of PSHE and character education)
- partnerships with parents/careers and the wider community

**Skills associated with this factor:**

- Resilience
- Understanding
- Cooperation

**Subjective wellbeing:**

In the mainstream studies regarding psychological wellbeing of adolescent and pre-adolescent individuals, subjective wellbeing is sometimes identified as a separate domain, but in other cases is included within other objectives domains, such as health and wealth, or not considered at all. (Good Childhood Report 2016). For the purposes of this assessment, subjective well-being is «...based on the idea that how each person thinks and feels about his or her life is important» (Diener et al. 2000). Young individuals try to place themselves in the world in a peculiar way against the childhood and the adulthood. Such behavior is driven by the question “who am I?” Adolescents, each one in his/her own time and means, get to a point in which the research for an identity becomes the center of their attitude towards themselves (eudaimonic perception) and towards the environment (hedonistic perception). Indeed, if we have seen that general wellbeing is heavily influenced by pleasure and whether or not basic human needs are fulfilled, that is the presence of “having” and “loving”, well-being is also subject to the perceptual aspect of well-being, i.e. how individuals perceive the external environment and how they feel they are perceived by that. Therefore, Subjective well-being is about children’s own assessments of how their lives are going. Subjective well-being consists of two key elements:

- Life satisfaction - which relates to the evaluations that children make about their lives at a cognitive level, and comprises judgements about life as a whole as well as judgements about different aspects of life (e.g. happiness with family relationships).

- The experience of positive and negative emotions at a particular point in time. A related concept is psychological well-being, which is concerned with children's sense of meaning purpose and engagement.

The quality of life of an individual and a society is dependent on the amount of happiness and pleasure the experience, as well as their relationship to human health. Whether or not other cultures are subject to internal culture appraisal is based on that culture's type. "Collectivistic cultures are more likely to use norms and the social appraisals of others in evaluating their subjective well-being, whereas those [individualistic] societies are more likely to heavily weight the internal [frame of reference] arising from one's own happiness" (Deiner et al. 2000).

When subjective wellbeing is associated with school and educational activity, we have to see it as the sum and the complement of the different factors above mentioned: the possession of all the material needs.

***Skills associated with this factor:***

- Emotional Intelligence
- Self-consciousness
- Psychological Assessment

**SKILLS ASSOCIATED WITH FACTORS**  
**Psychological Assessment and Participation**

Public Health England and the Anna Freud National Centre for Children and Families created a toolkit to help school and college staff; families and other relevant stakeholder to better assess and measure mental wellbeing among the student population.

In this toolkit, experts want to raise awareness on the variety of validated instruments that can be used to monitor the mental wellbeing of students. Given the high levels of subjectivity, it is also in the intentions of the creators of such toolkit to guide school staff in using in an inclusive fashion all the indicators:

- extent of student participation
- rates of bullying
- behavior and attendance

These indicators have been included in three key purposes:

- Snapshot (to provide a general overview)

- Identification (identify students who might need preemptive intervention)
- Evaluation (assess the efficacy of the targeted intervention or as well the early support)

### ***DESCRIPTION OF METHOD/ STRATEGY***

The survey was conducted among 20 educational institutes, ranging from Primary to College, and in taking the survey, important factors have been considered and the active and effective participation of the students has been secured:

- 1) sometimes, emotional experience can induce a student not to answer honestly, if the answer is not worded properly;
- 2) if students are sitting next to each other in a classroom, the survey may take the likes of an exams for the students and they may worry that others will see their answers and this will affect how honestly they complete the measure;
- 3) guidance and support for the students so that they can understand the question thoroughly and they can answer with no pressure;
- 4) in order to complete the survey in the most honest way, student must be fully aware of the various aspect of the topic, so that can feel more involved and can answer with a clearer mind.

### **EVIDENCE OF IMPACT ON WELL BEING IN SCHOOL**

After the survey have been taken, the final guide was redacted with the help and the supervision of the students, who gave some very useful insights. Indeed, the creation of a toolkit on how to measure and assess wellbeing can have important secondary benefits for students and can:

- send an important message that wellbeing is being taken seriously;
- open up conversations about wellbeing;
- give students the language to talk about wellbeing;
- enable students to have a broader understanding of what wellbeing is.

**SOURCE:** <http://www.annafreud.org/media/4612/mwb-toolki-final-draft-4.pdf>

### **PROACTIVITY, RESILIENCE AND COMMUNICATION**

Social interaction between students is sometimes a test even more important than the science test. In schools, children constantly grade each other and they gain a social status according to their capability to relate and socialize with their peers effectively. Failing social interaction within a group of peers,

can be a lifelong problem that in the long term can cause social exclusion and provoke mental distress. Is therefore extremely important that lifelong skills such as the ones listed above are being taught in schools.

According to the findings of the Communication Trust (2013), in England, as many as 50% of children in areas of disadvantage start school (age 6) with language deficiencies.

In the 10% of the cases, such deficiencies might become long-term conditions that would impair both the academic and the social development of the individual. To overcome this problem, the Southwark Pupil Development Centre patronized in 2009 the creation of the Speech Bubbles Programme, which support schools tackling a current estimate of 50% of children entering school with communication needs, through the teaching of dramatic arts.

### ***DESCRIPTION OF METHOD/ STRATEGY***

Schools that take part in the programme usually involve small groups of six-seven years old students and a teaching assistant.

In these small group session of around 45 minutes, in a predictable e secure structure that is portrayed in the table 1 of the second link provided in this table.

The evaluation of the final results was made by comparing 12 randomly chosen children with the parameters of the Leuven Well-Being scale adapted for children three to seven years old and the results showed overall behavioral improvements in all the skills here mentioned.

The sessions are proved being useful to the teaching assistants as well.

In training sessions, they expressed consistently and unanimously positive responses to SB, many discovering new understandings of children's learning.

### ***EVIDENCE OF IMPACT ON WELL BEING IN SCHOOL***

A recent evaluation revealed that 87% of children participating in Speech Bubbles showed an Improvement in learning, speaking and listening and 88% showed behavioral improvements.

#### ***SOURCE:***

- <http://www.londonbubble.org.uk/page/about-speech-bubbles/>
- <https://www.canterbury.ac.uk/health-and-wellbeing/sidney-de-haan-research-centre/documents/speech-bubbles.pdf>

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### **3.4. VILNIAUS KOLEGIJA / UNIVERSITY OF APPLIED SCIENCES WELL BEING AT SCHOOL. THE BEST PRACTICES TEMPLATE: DESK-BASED**

#### **RESEARCH Optimal psychological functioning**

Six broad facets associated with optimal psychological functioning:

- 1) self-acceptance;
- 2) positive relations;
- 3) autonomy;
- 4) environmental mastery;
- 5) purpose in life
- 6) a sense of personal growth. Self-acceptance:

Someone with high self-acceptance is pleased with who they are and accepting of multiple aspects of themselves, both good and bad.

In contrast, individuals with low self-acceptance are often self-critical, confused about their identity, and wish they were different in many respects.

#### ***Positive relations:***

An individual with positive relationships feels connected, respected, and well-loved. They can share aspects of themselves, experience intimacy, and usually feel secure in their relations.

In contrast, individuals with poor relationships often feel unappreciated, disrespected, unloved, disconnected, hostile, rejected, or misunderstood. They tend to feel insecure and sometimes alone or distant from others.

*Autonomy:*

Individuals with high levels of autonomy are independent, self-reliant, can think for themselves, do not have a strong need to conform, and don't worry too much about what others think about them.

In contrast, individuals low in autonomy feel dependent on others, are constantly worried about the opinions of others, are always looking to others for guidance, and feel strong pressures to conform to others' desires.

*Environmental mastery:*

Individuals high in environmental mastery feel they have the resources and capacities to cope, adjust and adapt to problems, and are not overwhelmed by stress.

Those with a low level of environmental mastery may feel powerless to change aspects of their environment with which they are unsatisfied, feel they lack the resources to cope, and are frequently stressed or overwhelmed.

*Purpose in life:*

Individual with a high sense of purpose sees their life has having meaning, they work to make a difference in the world, and often feel connected to ideas or social movements larger than themselves. Such individuals have a sense that they know what their life is about.

Individuals low in this quality often question if there is a larger purpose, do not feel their life makes sense, and attribute no higher meaning or value to life other than the fulfillment of a series of tasks.

*A sense of personal growth*

Individuals with high levels of personal growth see themselves as changing in a positive direction, moving toward their potential, becoming more mature, increasing their self-knowledge, and learning new skills.

Individuals low in personal growth feel no sense of change or development, often feel bored and uninterested in life, and lack a sense of improvement over time.

### **Factors of psychological well-being at school**

Bagdonas, Sarakauskiene (2011) in the research of psychological well-being in the target group of the older schoolchildren in Lithuania determine the following factors of psychological well-being: autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, self-acceptance.

- Safety

- Zero-tolerance of violence in schools
- ❖ Holistic education, including:
  - social development.
  - emotional development.
  - resilience.
  - healthy relationships.

Developing of intercultural competence both, among teachers and students

**Intercultural competence includes:**

- Valuing learner diversity
- Cultural sensitivity, cultural awareness
- Cultural knowledge
- Cultural critical consciousness
- Self-reflection
- Awareness of social inequalities
- Cultural relativism
- Avoiding falling into the culturist trap of reducing children to less than they are
- Treating every child as equally important and valued individuals
- Being empathic to the diverse needs of learners
- Seeing parents as equals
- Modeling respect in social relationships.

**Valuing learner diversity**

Diversity refers to any mixture of items characterized by differences and similarities. In the sociopolitical and economic realms cultural diversity can be found in the context of ethnicity, culture, gender mainstreaming, plurality of languages and religions, age, social class, sexual orientation, professional function, educational background, mental and physical capabilities, health, etc.

**Cultural sensitivity, cultural awareness Cultural knowledge**

In order to be able to recognize cultural variables within a group of children, teachers need to develop cultural sensitivity and cultural awareness. A teacher needs to know the basic features that characterize a particular culture of her/his students.

**Cultural critical consciousness**

Involves self-reflection, the ability of standing back from themselves and critically reflect on their own cultural values, norms, beliefs and attitudes. It also involves thoroughly analyzing and carefully monitoring both personal beliefs and instructional behaviors about the value of cultural

diversity, and the best ways to teach culturally different students for maximum positive effects. To engage in these continuous critiques and efforts to make teaching more relevant to diverse students, teachers need to have a thorough understanding of their own cultures and the cultures of different sociocultural groups, as well as how this affects teaching and learning behaviors. Thus, a teacher admits that the pedagogical problems shouldn't be studied and approached in isolation from sociocultural environment of a child and cultural self-reflection.

### **Cultural critical consciousness**

Shortage of self-reflection and cultural critical consciousness lead to neglectfulness, lack of understanding, categorization and labelling of children that consequently can have a negative impact upon their development and learning opportunities, also create other intentional and unintentional attitudinal barriers.

### **Awareness of social inequalities**

On the society level diversity turns into inequality.

Treating children with different from their own social, cultural, ethnic background unfairly, teachers and educational system in general can unwillingly serve as the means of social exclusion, legitimizing social inequalities by converting them into inequalities at school.

### **Cultural relativism**

Inclusive teacher respects cultural differences and is aware of millstones of ethnocentric attitudes. Within the value attitude of ethnocentrism, individuals judge other groups in relation to their own particular culture, which is perceived as a standard especially with concern to values, social norms, beliefs, behavior, customs, and religion. The opposite value attitude is called cultural relativism which is based on the idea that all norms, beliefs, and values are dependent on their cultural context, and should be treated as such. Thus, an inclusive teacher can be described as a person who deeply believes that being different means being "normal", who respects, values and understands diversity as a resource that enhances learning opportunities and adds value to schools and other educational institutions, local communities and society.

**Avoiding falling into the culturist trap of reducing children to less than they are** Essentialist notion of culture leads to the usual mistake that everyone in a certain culture is the same. It explains the behavior of people in terms of their culture, allowing "culture" to become greater than the people themselves. This is the way of othering and reducing children from minority groups to a prescribed image based mostly on stereotypes. Overestimating cultural differences and encouraging the belief that cultural categorizations are permanent and "natural" rather than being social and changeable, essentialism puts a child from any minority group in a deficit position labelling her or him as less capable than other students.

### **Being empathic to the diverse needs of learners**

Since children's emotions affect the way and how much they develop and learn, an inclusive teacher is supposed to be able to connect to, and understand their students in order to best serve children's needs. In other words, a teacher must be emphatic and focused on nurturing learning rather than judging performance.

### **Being empathic to the diverse needs of learners**

Empathic interactions promote more nurturing classroom environments and the development of strong, positive children-teacher relationships. Empathy resists labels, overcomes stereotypes and breaks through the social construction of the Other.

## **3.5. EUROPEAN QUALITY CENTER**

The main definitions of psychological well-being at school

### ***Definition 1:***

Psychological well-being - in general life satisfaction /happiness/. It covers various aspects of life - work, family, friends, hobbies, etc. It could be said that it is a kind of complex state of positive psychological functioning of an individual.

### ***Definition 2:***

Mental health is a state of well-being, balance and comfort in which a person is the most efficient and satisfied with himself and what he does. He is able to cope with the normal stressors of life; communicate without tension with others, actively develops and improves.

Mental health allows for normal development and expression of human potentials for independent, meaningful and satisfying life, to build a harmonious relationship with their needs, feelings and desires and with the community in which the person lives in mutually enriching and supportive manner, in the absence of lasting sense of suffering, humiliation and isolation and complete professional appearance.

### ***Definition 3:***

A culture of mental well-being in school - achieving a sense of unconditional acceptance and respect for the dignity of each member of the school community. The promotion of mental health develops attitudes and practices of altruism and solidarity (eg volunteering) towards people in an unfavorable social, health or other attitude.

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### ***THE MAIN FACTORS OF PSYCHOLOGICAL WELLBEING AT SCHOOL***

#### ***PREAMBLE***

Psychological wellbeing is recognized as a universal indicator for the presence of subjective readiness to perceive a certain social space as important to the individual. Two main categories are directly linked with this phenomenon - 'social capital and 'positive psychological functioning'. Social capital is the totality of social relations and practices aimed at developing the individual and the social potentials. (Putnam, 2009). When the individual perceives him-/ herself as a part of supporting social space, he/ she is content with the world and thus increases his/ her psychological wellbeing.

Social capital is viewed as a network of social relations as well, which are based on mutual support faith in the other person, social inclusion, commitment on part of local institutions, commitment on part of citizens, good ecological conditions, fighting discrimination and poverty, actively promoting health. According to Putnam (2009) social capital can be viewed as 'collective asset' or 'common

good' for the community.

The relation between individual capital and social capital is also important. It is assumed that the well- functioning social capital increases the individual's coping skills.

Positive psychological functioning includes: positive emotionality, contentment with life and meaning of life (Grant et al., 2013). Some sources define the so-called positive psychological capital (Bin et al., 2014). What is meant by it is: the ability to achieve goals (coping-efficacy), orientation towards future success (optimism), active position with regard to the changing environment (hope) and sustainability of aspiration (resilience). It is evident that positive psychological functioning is a factor in the individual's social realization. When the aforementioned personal qualities are present, the person is capable of coping with daily challenges and overcoming the disappointment of failure. In this sense the term 'positive psychological functioning' has to be understood as a totality of personal qualities of cognitive, emotional and conative nature which increase the individual's social and psychological efficiency.

## **MAIN FACTORS OF PSYCHOLOGICAL WELLBEING AT SCHOOL**

Based on the aforementioned the following main factors affecting the psychological wellbeing of adolescents were identified:

- **Factor 1:** Social context
- **Factor 2:** Interaction
- **Factor 3:** Personality
- **Factor 4:** Subjectivity

### ***SOCIAL CONTEXT***

The 'social context factor represents the objective social givens which the individual cannot change, since they are beyond his/ her control. At the same time the perimeter of activity that the individual can realize depends to a large extent on the quality of those parameters. When those social parameters are unfavorable, the individual could very difficultly achieve self-efficacy.

*Skills associated with this factor:*

- ✓ **Social adaptation skills** - adjustment to living in accordance with interpersonal, social and cultural norms.
- ✓ **Decision making / troubleshooting skills** - collecting information; assessing the future impacts of current actions (for themselves and others); finding alternative solutions to problems; analyzing the impact of values and attitudes (towards oneself and others) on motivation.

- ✓ **Critical thinking skills** - analyzing the influence of peers and the media; analyzing attitudes, values, social norms, beliefs and factors that influence them; identifying relevant information and sources of information.

### ***INTERACTION***

The 'interaction' factor represents a space in which the individual has room for activity, which can, however, be beneficial for him/ her only if he/she has social partners in collaboration. Due to this reason interaction is both free, allowing personal expansion, and limited by the interests of others with whom the individual is connected.

*Skills associated with this factor:*

- ✓ **Communication skills** - verbal / nonverbal communication; active listening; expressing feelings; submission and receipt of feedback (without accusations).
- ✓ **Negotiation and refusal skills** - dealing with conflicts and confident behaviour, ability to refuse S Empathy skills - hearing, understanding the others and their needs, as well as expressing this understanding
- ✓ **Collaboration and teamwork skills** - respecting the different styles and contributions of others; Assessing your own abilities and contributions to the group.
- ✓ **Advocacy skills** - speaking up for, and defending the rights of him or herself, or of another person; communicating clearly and with confidence; being assertive, but respectful and polite.

### ***PERSONALITY***

The '*personality*' factor includes personal qualities which the individual can develop independently and thus increase his/her capacity. Here the ability to manage one's conduct, using those qualities, is of particular importance.

*Skills associated with this factor:*

- ✓ **Life skills** -feeling about self, intimacy, family, friends, community, job, leisure, and spirituality; being able to recognize and describe one's feelings, giving and receiving feedback, recognizing assumptions, setting realistic and attainable goals, and employing problem-solving strategies.

- ✓ **Ethics and social responsibility skills** - developing reflective awareness of ethical dimensions, and responsibilities to others, at school and everyday life; recognizing and addressing ethical dilemmas, social responsibility and sustainability issues, applying ethical and their own/organizational values to situations and choices



✓ **Self-awareness and reflection skills** - being critically self-aware, self-reflective and self-manage in order to fully maximize potential; develop personal resilience; learn how to deal with setbacks and failures and learn and develop from these; establish personal vision and goals; seek and value open feedback to help self-awareness S Independent learning and development skills - thinking independently, exercising personal judgment and taking initiatives S Skills associated to self-esteem - encompassing beliefs about oneself, (for example, "I am competent", "I am worthy"), as well as emotional states, such as triumph, despair, pride, and shame.

*Remark:* Children's self-esteem as a result of social interaction is strongly influenced by the judgments of others, what they think about their personality and how they perceive it. In a situation of lack of objective information about one's personality, children build their self-esteem by comparing with others. They come to conclusions about themselves by watching successes or failures of their efforts. There is a relationship between self-esteem in adolescents, on the one hand, and crime, low school success and depression, on the other. Those with low self-esteem often have an unsatisfactory social experience that leads to a sense of doubt about the qualities of one's own personality. In an attempt to reduce this feeling they begin to engage in criminal groups that intensify their self-assessment.

### ***SUBJECTIVITY***

The '**subjectivity**' factor actually represents the so called subjective wellbeing. It includes the subjective experiencing of connectedness to the world and internal harmony. In more expressed registers joy or even happiness can be experienced.

*Skills associated with this factor:*

- ✓ **Sense management skills** - coping with anger, loss, violence and trauma
- ✓ **Stress management skills** - managing time; positive thinking; relaxation techniques
- ✓ **Self-identity skills** - recognizing own potential and qualities
- ✓ **Self-acceptance skills** - being self-reliant and independent of what others think, releases our own strength, confidence and resilience, judgement and capacity to handle situations calmly and assertively

*Remark:* Accepting of yourself means having positive perception of yourself, of your own past life, the sense of continual growth, the belief that your own life has purpose and meaning, experiencing quality relationships with others, the ability to manage your own life and the surrounding world effectively, and the feeling of self-determination.

### ***TYPE OF SKILLS OF LEARNERS***

All skills associated with the four factors: Factor 1: Social context; Factor 2: Interaction; Factor 3: Personality; Factor 4: Subjectivity.

### ***SCOPE OF APPLICATION***

ACADEMY OF CIVIL SOCIETY: Project for a consortium of citizens, organizations and academic structures to study and tackle problems to improve public relations.

### ***DESCRIPTION OF METHOD/STRATEGY***

The Academy for Civil Society invited schools, psychologists, pedagogical counselors, teachers, students, parents, doctors, health and social workers, representatives of the Regional Inspectorates of the Ministry of Education and Science, HEIs, NGOs, all organizations dealing with children and young learners, representatives of the media, priests, citizens and others, to participate at a conference presenting good practices for improving relationships, mental health and wellbeing at school by reducing bullying and harassment, and nominations, thus contributing to improving people's relationships, mental health education and civil society. (30 April 2010).

### ***EVIDENCE OF IMPACT ON WELL BEING IN SCHOOL***

Contests organized:

#### ***Good Practices for the Prevention of Mental Health in Education***

Preventive Good Practices in Mental Health Education:

- Improve tolerance between pupils, parents and teachers towards mentally ill (peers, classmates, colleagues, parents, etc.) and reducing social stigma on mental illness and thus significantly improving its course and treatment.
- Know the risk factors and help prevent certain psychological problems of this age (e.g. abuse of psychoactive substances, emotional, sexual and physical harassment by children, adolescents and adults, depression and suicide attempts, learning difficulties, hyperactive behavior, behavioral disorders, etc.)

#### ***Good Practices for the Promotion of Mental Health in Education***

Mental health promotion activities result in a culture of relationships that does not tolerate the manifestations of schism, isolation, exclusion, harassment. They create such a new culture of relationships that tolerates creativity, joy, happiness, mental well-being for all, i.e., mental health.

The promotion of mental health does not necessarily lead to a lower incidence of mental suffering, because many of them are caused by factors that people have no control over. However, the promotion of mental health can lead to a much better quality of life for anyone suffering from mental discomfort as well as to a much more tolerant cohabitation in general.

In school, the promotion of mental health can occur through:

- Systematic build-up of new knowledge and skills of teachers to cope with the imbalance of students
- Systematic implementation of new, more flexible and intelligent approaches to conflict resolution by directors
- Systematic rather than sporadic engagement with the peer-to-peer psychological well-being of others and the community by students
- More knowledge about mental development and how to influence parents and others responsible for the child's life

Nomination Competition:

1. Personal contribution to improving people-to-people relations in education and civil society
  - People were awarded with specific contribution to improving the state of human relations, psychological climate and other factors for improving the mental health of students, classes, school, city, region, society, etc.
2. Presentation of international experience and contribution to improving the relationship between people and mental health in education and civil society
3. Youth Competition "Good Heart" - motivated nominations for students with assisted for human's comfort, family, group or assisted to improve relations between people in a school and outside it.

**Source:** [akademia.dir.bg](http://akademia.dir.bg)

All skills associated with the four factors: Factor 1: Social context; Factor 2: Interaction; Factor 3: Personality; Factor 4: Subjectivity.

Society of Psychologies in Bulgaria with the support of the Regional Inspectorate of Education - Varna

## **SCOPE OF APPLICATION**

Society of Psychologies in Bulgaria with the support of the Regional Inspectorate of Education - Varna organized SIXTH SPRING NATIONAL CONFERENCE "Mental Health and Welfare of the

Teacher and their Students" (20-23 March 2015).

### ***DESCRIPTION OF METHOD/ STRATEGY***

Society of Psychologies in Bulgaria with the support of the Regional Inspectorate of Education - Varna organized SIXTH SPRING NATIONAL CONFERENCE "Mental Health and Welfare of the Teacher and their Students" (20-23 March 2015).

### ***EVIDENCE OF IMPACT ON WELL BEING IN SCHOOL***

THE SIXTH SPRING NATIONAL CONFERENCE aimed to collect and present up-to-date research and good practices related to the mental health problem of teachers and students in the following aspects:

- the state of mental health and well-being of teachers and pupils at different levels of education and children from kindergartens;
- factors that affect the mental health and well-being of the target groups;
- Prevention of risk factors and consequences of their impact on the mental health of teachers and pupils /as well as children from kindergartens/ content - in terms of self-assessment and public and administrative assessment of personal qualities and competencies, behavior, relationships between the participants in the educational process and with the social system, disorders and diseases, nutrition and physical activity, etc./.
- Prospects for improving the mental health and well-being of teachers and pupils /as well as children from kindergartens/.

Participants: educators, psychologists, representatives of state and municipal administrative institutions responsible for education and labor, trade unions of Bulgarian teachers, higher schools, non-governmental organizations, resource centers, children's complexes, the media and all interested in the problem are invited to participate.

During the conference, reports and messages, posters and exhibitions with photos, videos, etc. were presented as a priority was given to presentations of good practices and own research works on the theme.

Source: <http://vtotseva.blogspot.bg/2015/03/blog-post 20.html>

All skills associated with the four factors: Factor 1: Social context; Factor 2: Interaction; Factor 3: Personality; Factor 4: Subjectivity.

### ***SCOPE OF APPLICATION***

Secondary School/Children from 5<sup>th</sup> classes /Bulgaria

### ***DESCRIPTION OF METHOD/ STRATEGY***

Training on "Mental Health and Personal Development. Interpersonal Relationships".

### ***EVIDENCE OF IMPACT ON WELL BEING IN SCHOOL***

On 4th of June 2015 students' group training was held on the problems of personal development in the courtyard of the II Secondary School "Prof. Nikola Marinov" - Targovishte, with students from the 5<sup>th</sup> classes. The main focus was on interpersonal relationships and communication. Interactive role games such as Fruit Salad, Impulse transmission, Blinders and Guides, etc. were used. At the end of each game the students were told what their purpose was and they shared their concerns and emotions.

The event passed into an extremely positive atmosphere. After completion, students expressed satisfaction, which is the most important indicator of educational attainment. The training was led by the Pedagogical Counselor Stoyan Kalaidjiyski.

**Source:** [http://2sou-tg.ucoz.com/news/trening\\_obuchenie\\_v\\_chas\\_na\\_klasa\\_s\\_tema\\_psikhichesko\\_zdrave\\_i\\_lichnostno\\_razvitie\\_mezhdulichnostni\\_vzaimootnoshenija/2015-06-05-1433](http://2sou-tg.ucoz.com/news/trening_obuchenie_v_chas_na_klasa_s_tema_psikhichesko_zdrave_i_lichnostno_razvitie_mezhdulichnostni_vzaimootnoshenija/2015-06-05-1433)

#### 4. THE MAIN DEFINED FACTORS, SKILLS FOR PSYCHOLOGICAL WELL-BEING AT SCHOOL (indicated in the table)

No.	Factor associated with psychological well being	Skills / Associated with the factor	Educational method / strategy applied for the skills / attitudes	Educational method / strategy applied for the skills / attitudes
	<b>FAMILY RELATIONSHIPS</b>	Parental competencies	<ul style="list-style-type: none"> <li>• Parental competencies training (“School for parents”): Parent training program (PET);</li> <li>• Family time management and cooperation skills - family leisure time.</li> </ul>	<ul style="list-style-type: none"> <li>• Scale of Parental Attitudes - version for adolescents (SPR), author: M. Plopa, (2005).</li> <li>• Parenting Sense of Competence Scale</li> <li>• Observation methods.</li> </ul>
	<b>SCHOOL FACTORS</b>	Key competences; Teacher social-emotional competencies	<ul style="list-style-type: none"> <li>• Key competencies training</li> <li>• Problem solving/decision making workshops Teacher Effectiveness Training (T.E.T.)</li> </ul>	<ul style="list-style-type: none"> <li>• CVLT. CALIFORNIA VERBAL LEARNING TEST</li> <li>• D2. ATTENTION ASSESSMENT TEST</li> <li>• MFF. MATCHING FAMILIAR FIGURES</li> <li>• Observation methods (by teacher)</li> <li>• Self-report measures</li> <li>• KNS. HOPE FOR SUCCESS QUESTIONNAIRE</li> <li>• Authors: Mariola Laguna, Jerzy Trzebinski, Mariusz Zięba (2005).</li> <li>• Observation methods (by teacher);</li> <li>• Self-report measures</li> </ul>
	<b>PEER RELATIONSHIPS</b>	EMPATHY	<ul style="list-style-type: none"> <li>• Group trainings for students (empathy lessons);</li> <li>• School volunteer program Sharing</li> </ul>	<ul style="list-style-type: none"> <li>• Evaluation using interactive quiz (by: kahoot.com or quizlet.com);</li> <li>• Pre-test, post-test;</li> <li>• Observation;</li> <li>• Empathy Quotient questionnaire (Baron-Cohen, 2004);</li> <li>• Spot The Fake Smile - experiment by Paul Ekman</li> </ul>

			<p>experience with important people</p> <ul style="list-style-type: none"> <li>• Video Stimulus Training.</li> <li>• Total teaching in terms of empathy;</li> <li>• <i>School volunteer program</i></li> </ul>	<p><a href="http://www.bbc.co.uk/science/humanbody/mind/surveys/smiles/">http://www.bbc.co.uk/science/humanbody/mind/surveys/smiles/</a></p> <ul style="list-style-type: none"> <li>• Empathy Questionnaire (Enz i Zoll, 2005).</li> </ul>
	<p><b>PERSONAL/INDIVIDUAL RESOURCES</b></p>	<p>COMMUNICATIONAL AND PERSONAL/INDIVIDUAL INTERPERSONAL SKILLS; RESOURCES COPING</p>	<ul style="list-style-type: none"> <li>• A series of workshops developing communicational and interpersonal skills;</li> <li>• STRESS MANAGEMENT COACHING;</li> <li>• Stress management workshops (a series of workshops developing the ability to cope with stress (including relaxation, breathing techniques, time management, positive thinking, etc.);</li> <li>• Access to the school activities allowing relieve tension associated with stress (dance, sports, yoga classes, etc.)</li> </ul>	<ul style="list-style-type: none"> <li>• Situational tests (simulations);</li> <li>• Observation methods;</li> <li>• Self-report measures (i.e. School Social Behavior Scales (SSBS), Merrell, 1993; SSBS2, Merrell, 2008); Social Skills Rating System (SSRS) Gresham &amp; Elliott (1990, 2009) and Social Skills Improvement System (SSIS) (Elliott &amp; Gresham, 2007).</li> <li>• Performance tests based on different kinds of behavioral materials. The Kessler Psychological Scale (K10) measuring stress, anxiety and depression (Kessler, 2002)</li> <li>- General Health Questionnaire (GHQ-12) (Goldberg, 1978);</li> <li>- Brief COPE identifying coping strategies (Carver, 1997);</li> <li>- The Depression, Anxiety and Stress Scale (DASS-21) (Lovibond &amp; Lovibond,</li> <li>- Perceived Stress Scale - 10 item version (PSS-10) (Cohen, Kamarck &amp; Mermelstein, 1983);</li> <li>- Coddington Life Events Scale (CLES) measuring the experience of certain life stressors in the past year (Coddington, 1972)</li> </ul>
	<p><b>PEER RELATIONSHIP FAMILY</b></p>	<p>•</p>	<ul style="list-style-type: none"> <li>• The Coping Power program is a multi-modal program for the control and anger</li> </ul>	

	<b>FAMILY ENVIRONMENT</b>		management in school-age children, developed by Lochman and collaborators (Lochman & Wells, 2002a-b)	<ul style="list-style-type: none"> <li>• IDEA INVENTORY (Kassinove, Crisci &amp; Tiegerman, 1992);</li> <li>• Youth Self Report (YSR) (Achenbach, T. M., 1991). The YSR is a 112-item self-report designed for children and adolescents (ages 11-17), that assesses behavioral competency and behavioral problems and parallels the Child Behavior Checklist (CBCL).</li> </ul>
	<b>PSYCHOLOGICAL WELL-BEING</b>		<ul style="list-style-type: none"> <li>• Rational Emotive Behavior Therapy (REBT)</li> </ul>	
	<b>ACADEMIC ACHIEVEMENT</b>	<ul style="list-style-type: none"> <li>• COPING WITH ANGER AND AGGRESSIVENESS;</li> <li>• EMOTIONAL INTELLIGENCE</li> <li>• PROBLEM SOLVING</li> </ul>	<ul style="list-style-type: none"> <li>• School-based universal programme in order to promote emotional intelligence that refers to the perception, processing, regulation and utilization of emotions.</li> <li>• Problem-solving techniques.</li> </ul>	<ul style="list-style-type: none"> <li>• The Regulatory Emotional Self-Efficacy (RESE) scales (Caprara &amp; Gerbino, 2001) and the Ryff's Scales of Psychological Well-Being (Ryff &amp; Keyes, 1995).</li> </ul>
	<b>Personal well-being</b>	<ul style="list-style-type: none"> <li>• Problem solving -Self-esteem (intended as the capability to believe yourself as capable to achieve a certain goal)</li> <li>• Team Work.</li> </ul>	Psychological Assessment and Participation	<i>Not indicated</i>
	<b>Relational well-being</b>	<ul style="list-style-type: none"> <li>-Intimacy;</li> <li>-Empathy;</li> <li>-Conflict Resolution.</li> </ul>		<i>Not indicated</i>



	<b>Well-being at school</b>	-Resilience -Understanding -Cooperation	PROACTIVITY, RESILIENCE AND COMMUNICATION.	<i>Not indicated</i>
	<b>Subjective wellbeing</b>	-Emotional Intelligence -Self consciousness -Psychological Assessment		<i>Not indicated</i>
	<b>Autonomy</b>			<i>Interviews</i>
	<b>Environmental mastery</b>			
	<b>Personal growth</b>			<i>Project</i>
	<b>Positive relations with others</b>	Intercultural competence	Cultural diversity modules;	<i>Theoretical test</i>
	<b>Purpose in life</b>	Empathic interactions;	Intercultural education	<i>Discussions</i>
	<b>Self-acceptance</b>			<i>Cultural diversity journal</i>
	<b>Social context</b>	Social adaptation skills Decision making / troubleshooting skills Critical thinking skills		<i>Not indicated</i>
	<b>Interaction</b>	Communication skills Negotiation and refusal skills Empathy skills Collaboration and teamwork skills	The Academy for Civil Society	<i>Not indicated</i>
		Advocacy skills	Good Practices for the Prevention of Mental Health in Education	

	<b>Personality</b>	<p>Communication skills  Negotiation and refusal skills  Empathy skills  Collaboration and teamwork skills  Advocacy skills  Life skills  Ethics and social responsibility  Self-awareness and reflection skills  Independent learning and development skills  Skills associated to self-esteem</p>	<p>Good Practices for the Promotion of Mental Health in Education</p> <p>Training on "Mental Health and Personal Development. Interpersonal Relationships"</p>	<i>Not indicated</i>
	<b>Subjectivity</b>	<p>Communication skills  Negotiation and refusal skills  Empathy skills  Collaboration and teamwork skills  Advocacy skills  Life skills  Ethics and social responsibility  Self-awareness and reflection skills -  Independent learning and development skills</p>		<i>Not indicated</i>

		Skills associated to self-esteem Sense management skills Stress management skills Self-identity skills Self-acceptance skills		
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## **5. APPLICATIONS ON PSYCHOLOGICAL WELLBEING MANUAL AND INTERACTIVE RESOURCES**

Contributions from all the project partners gave very good insights on psychological wellbeing conceptions, skills, to be trained in relation to psychological wellbeing and the ways of measuring and evaluation of wellbeing at school level.

The following the most important factors of psychological wellbeing have been defined: Family relationships; Schools factors; Peer relationships; Personal / Individual resources; Personal well-being; Personal well-being; Relational well-being; Well-being at school; Subjective wellbeing; Autonomy; Environmental mastery; Personal growth; Positive relations with others; Purpose in life; Self-acceptance; Social context; Interaction; Personality; Subjectivity.

The following the most important skills have been defined: Parental competencies; Key competences; Teacher social-emotional competencies; Empathy; Communicational and interpersonal skills; Coping (with anger and aggressiveness); Self-esteem; Problem solving, Team work; Intimacy; Intimacy; Resilience; Emotional Intelligence; Social adaptation skills; Social adaptation skills; Negotiation and refusal skills; Empathy skills; Collaboration and teamwork skills; Advocacy skills; Self-awareness and reflection skills; Independent learning and development skills; Life skills; Stress management

skills; Self-identity skills -Self-acceptance skills.

Regarding production to be created in the project (well-being manual, interactive resources) the following aspects of wellbeing education in the school will be developed: monitoring of psychological wellbeing, education for wellbeing and evaluation of wellbeing.

Monitoring of wellbeing	Education for wellbeing	Evaluation of psychological wellbeing
<p>Monitoring of wellbeing in school education settings could be implemented in the following the most important aspects:</p> <ul style="list-style-type: none"> <li>• Self-esteem monitoring;</li> <li>• Emotional intelligence monitoring;</li> <li>• Empathy monitoring;</li> <li>• Stress management;</li> <li>• Coping with stress;</li> <li>• Parental competencies;</li> <li>• Communicational and interpersonal skills.</li> </ul>	<p>Education for psychological well-being could be implemented according the following strategies instructions:</p> <ul style="list-style-type: none"> <li>• Parental instructions;</li> <li>• Instructions on emotional intelligence;</li> <li>• Instructions on stress management;</li> <li>• Instructions on empathy and coping;</li> <li>• Instructions on self-esteem;</li> <li>• Instructions on communicational and interpersonal skills.</li> </ul>	<p>Evaluation for psychological wellbeing could be implemented in the following aspects:</p> <ul style="list-style-type: none"> <li>• Evaluation of self-esteem level;</li> <li>• Evaluation of Emotional intelligence;</li> <li>• Evaluation of stress management;</li> <li>• Evaluation of level coping;</li> <li>• Evaluation of parental competences;</li> <li>• Evolution of communicational and interpersonal competences</li> </ul>
<i>Application in Manual for psychological wellbeing</i>		
<p>Manual for psychological wellbeing should involve the following the most important aspects of research object: Parental instructions; Instructions on emotional intelligence; Instructions on stress management; Instructions on empathy and coping; Instructions on self-esteem; Instructions on communicational and interpersonal skills.</p>		
<i>Application in in the Interactive toolbox</i>		
<p>Monitoring of wellbeing in school education settings could be implemented in the following the most important aspects:</p> <ul style="list-style-type: none"> <li>• Self-esteem monitoring;</li> <li>• Emotional intelligence monitoring;</li> </ul>	<p>Education for psychological well-being could be implemented according the following strategies / instructions:</p> <ul style="list-style-type: none"> <li>• Parental instructions;</li> <li>• Instructions on emotional intelligence;</li> </ul>	<p>Evaluation for psychological wellbeing could be implemented in the following aspects:</p> <ul style="list-style-type: none"> <li>• Evaluation of selfesteem level;</li> <li>• Evaluation of Emotional intelligence;</li> </ul>

<ul style="list-style-type: none"><li>• Empathy monitoring;</li><li>• Stress management;</li><li>• Coping with stress;</li><li>• Parental competencies;</li><li>• Communicational and interpersonal skills.</li></ul>	<ul style="list-style-type: none"><li>• Instructions on stress management;</li><li>• Instructions on empathy and coping;</li><li>• Instructions on self-esteem;</li><li>• Instructions on communicational and interpersonal skills.</li></ul>	<ul style="list-style-type: none"><li>• Evaluation of stress management;</li><li>• Evaluation of level coping;</li><li>• Evaluation of parental competences;</li><li>• evaluation of communicational and interpersonal competences</li></ul>
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## **6. RECOMMENDATIONS ON COMPOSITION OF CONTENT FOR THE MANUAL AND INTERACTIVE TOOLBOX**

- Monitoring of psychological well-being helps to screen and summarize psychological well-being in terms of Self-esteem monitoring; Emotional intelligence monitoring; Empathy monitoring; Stress management; Coping with stress; Parental competencies; Communicational and interpersonal skills, what can help to apply certain methods and strategies to trim particular missing skills associated with psychological wellbeing. Monitoring should help indicate the different aspects and level of psychological wellbeing. Monitoring should answer the following questions: what aspects of monitoring worth to implement in particular school context of psychological wellbeing? What research strategy to apply? (Qualitative / quantitative research strategy); what research tools / platforms should be used for the particular purpose? How to visualize data? What is the best and proper way to share the data? What measures of data protection should be applied in the case?
- Instruction on psychological wellbeing helps learners to acknowledge major knowledge and issues in particular aspects of psychological wellbeing. Instruction in the Manual of psychological wellbeing should include the following aspects: name of instruction module, aims and objectives of education, topics indicated, competencies indicated, learning and education methods indicated; learning resources should be indicated and recommendations for learning provided. Instruments for measurement and evaluation should be annexed.
- Interactive toolbox could involve any of educational components in terms of monitoring, instruction and measuring and evaluation. Interactive tools box would need to acquire quantified data from the questionnaires / surveys, that should be able to calculate, measure and evaluate different aspect of psychological wellbeing. Different standard questionnaire, inventories could be applied in this case.
- Particular content parts for the manual and toolbox should be collected by particular partners who have expertise on topics. Technical partner should prepare specification for delivering of data needed to programme into interactive toolbox for monitoring, education, measuring and evaluation of psychological wellbeing.

## **7. IMPLICATION OF THE RESEARCH ON PSYCHOLOGICAL WELL-BEING MANUAL**

Project's partner from UK "UK Training" delivered the following framework template for implementation of IO3 - Manual for psychological wellbeing at school:

### 1 \_\_\_\_\_ - Setting the learning environment

Instructions for learning spaces, approaches, methods and communication. The up-to-date insights on

the topic of mental wellbeing in the school's settings. (ref. app. p. 29)

## 2 - Methodology for wellbeing

Methodologies to manage wellbeing in classroom. The information for this section can be taken from IO2 - country reports on best practices for wellbeing management.

## 3 - Strategies for supportive participation / involvement of Parents

Good parenting is at the heart of children's wellbeing and development, and parents' and carers' wellbeing is key to their ability to raise their children.

When mothers' and fathers' own wellbeing is under threat then their capacity to parent successfully diminishes. Their enjoyment of the experience of raising children is hampered. Ultimately, children suffer. If the connection between parent and child is good enough then practical and psychological benefits should accrue to both individuals and the wider community. Even when families live in poor housing with inadequate income and experience unemployment and multiple deprivations, finding ways to enhance adult wellbeing can have positive repercussions on the whole family, giving all its members a better chance of constructing a different kind of future.

Collected suggestions on this section content was as following:

- ✓ a description of available strategies that support active involvement of Parents in children wellbeing in schools;
- ✓ the information about the parenting programmes and strategies design services that boost parents', carers' and children's wellbeing
- ✓ the links between children wellbeing and parenting; empowering parents;
- ✓ a short description of 2 or 3 strategies for involving parents in wellbeing in school;
- ✓ a short description of some supporting programmes offered to Parents

## 4 - Methodology for using ICT in wellbeing in the classroom

The aim of this section is development of competences of teachers / educators in managing mental wellbeing in school's settings by using different ICT methodologies.

Educators will be provided with innovative and efficient ICT resources based on already identified practices shaped on communication strategies and tools able to attract and reach young students. Also, adaptation of the digital ICT resources and practical use of the pedagogical multimedia materials will increase educators' digital skills and knowledge.

This section should also focus on how to implement the Wee-School-Tech pedagogical tool programme - IO4:

- ✓ general information for practical guide how to use tool IO4; a short technical guide to using the tool;

- ✓ reference to YouTube video how to use the tool;

## 5 - Self-evaluation guide for teachers / educators

Promoting, supporting and safeguarding the wellbeing of children is a responsibility for all staff working in a schools.

The self-evaluation guide for teachers on wellbeing in schools aim to:

- Gives staff a clear understanding of wellbeing;
- Demonstrates the links between wellbeing and the teaching and learning process;
- Helps identify actions to improve culture, systems and practice in their establishment/schools;
- Highlights and recognizes good practice;
- Supports the development of improvement objectives based on wellbeing and provides evidence of improvement as part of an overall improvement plan.

The self-evaluation guide for teachers on wellbeing in schools is a great opportunity to reflect on the wellbeing indicators, shared understanding of wellbeing, and wellbeing promoting across all aspects of school life. This self-evaluation guide structure can be presented and recorded on hard copy "Wellbeing Wheel" or using digital version.

The self-evaluation information gathered by individual (teacher/educator) can be used to reflect, consider and record the impact of wellbeing in their own school work. This also helps teachers to identify priorities, share good practices and areas of further improvements in their own school community.

## 6 - Case studies

This section will contain few case studies (practices, supporting programmes, testimonials, recommendations, etc.) for wellbeing management programme, strategies for schools that has been successfully introduced and used in school communities.

## 7 - References

In this section will be dedicated to any reference links, etc. information where teachers / educators can find assistance/help in wellbeing management in schools.



## 8. DESIGNING THE CONTENT OF IO3 – MANUAL FOR PSYCHOLOGICAL WELL-BEING AT SCHOOL

<b>SETTING THE LEARNING ENVIRONMENT</b>		
Questions should be answered	1. How learning spaces should be organized in terms of learning furniture, colors, lighting, designing of classroom environments; organization of formal/ non-formal learning spaces. 2. Recommendations for school administration and teachers how to arrange and design learning spaces for realization of different didactical strategies in classrooms.	Detail description of learning spaces that promoted good learning dispositions and psychological satisfaction in the process of education.
<b>METHODOLOGY FOR WELLBEING</b>		
Questions should be answered	1. What skills / attitudes to select for description in the manual? 2. What aspects of education should be included into description? 3. How educational process should be organized at school settings?	Three aspects of education should be described in the manual in terms of monitoring, intervention and evaluation. The following skills should be considered in the manual: Self-esteem monitoring; Emotional intelligence monitoring; Empathy monitoring; Stress management; Coping with stress; Parental competencies; Communicational and interpersonal skills. Methodical information delivered in terms of short description of skills / attitudes, methods for realizations; monitoring / measuring instruments.
<b>STRATEGIES FOR SUPPORTIVE PARTICIPATION / INVOLVEMENT OF PARENTS</b>		
Different aspects should be reflected	Collected suggestions on this section content was as following: ✓ a description of available strategies that support active involvement of Parents in children wellbeing in schools; ✓ the information about the parenting programmes and strategies design services that boost parents', careers' and children's wellbeing; S the links between children wellbeing and parenting; empowering parents; ✓ a short description of 2 or 3 strategies for involving parents in wellbeing in school; A short description of some supporting programmes offered to Parents.	
<b>METHODOLOGY FOR USING ICT IN WELLBEING IN THE CLASSROOM</b>		
Questions should be answered	1. What video to include on wellbeing at school? 2. How those video should be used in the process of formal non- formal education for psychological wellbeing at school?	Number of YouTube links provided with instructions on how to promote psychological wellbeing at school settings; instructions provided how video should be used in the process of formal / non-formal education.
<b>SELF-EVALUATION GUIDE FOR TEACHERS / EDUCATORS</b>		
Questions should be answered	1. What instruments to use for self-evaluation of competences? 2. What competences to evaluate? Are there any competences standards for teachers concerning psychological wellbeing? 3. How evaluation results should be used to foster improvement of teachers competences related to psychological wellbeing at school.	Competency standards for psychological wellbeing delivered and measuring and evaluation instruments delivered and explained. Procedures for self-evaluation explained.
<b>CASE STUDIES</b>		
Questions should be	1. What cases (what skills should be	At least one case should be created for the skill / attitude analyzed in the manual (in the

answered	reflected) to include into the manual? 2. How cases should be analyzed? What educational methods / strategies to apply?	sector No. 2). General methodical information should be provided what questions should be raised and what collaborative strategy to apply in order to analyze and solve the case
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## ACKNOWLEDGEMENTS

This document has been produced in the framework of the project Well School Tech, funded by the European programme Erasmus+, Key Action 2, Strategic Partnerships in the field of school education.

The collection of best practices represents the first project intellectual output (IO2) led by the University of Applied Sciences/Vilniaus kolegija, Lithuania, with the contribution of all project partners:

Istituto Superiore di Sanita (IT)

Promimpresa srl (IT)

European Center for Quality (BG)

University of Lodz (PL)



**To follow the project progress and to have further information please visit**

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Co-funded by the  
Erasmus+ Programme  
of the European Union

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