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Talking Mental Health Evaluation Report

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Contents

Talking Mental Health Project Overview

The overall aim of the project was to:

- Co-produce an accessible and engaging 6-minute animation for 9-11 year olds on how to talk about mental health.
- Produce a series of support materials for key stage 2 teachers (e.g. lesson plans) and 'leave behind' products for children and parents.

There are few resources to support young children to communicate with others if they are facing mental health issues. The animation draws on and shares the experiences of young people to help other children:

- understand that they are not alone;
- make informed decisions about whether to talk to someone and who to talk to; and
- to understand what to expect from others.

The animation is developed from a series of workshops in which a group of children and young people collaborated with a Creative Research Collective (CRC) of animators, film makers, sound artists, and mental health experts to bring ideas and experiences to life. Additional resources to encourage and support lively, open and realistic conversations about mental health in the classroom are available to teachers alongside the animation.

The evaluation of this project aims to understand under what circumstances, by what means, and in what ways can Talking Mental Health help children, parents and teachers talk about mental health. This report presents findings of the **Summative Evaluation** to test the completed animation and lesson plans in UK primary schools. An earlier **Formative Evaluation** undertaken during the development of the animation and lesson plans and which informed their development can be found in Appendix A.

Executive summary

Aims: The evaluation aimed to explore the impact of the Talking Mental Health animation and one-hour PSHE materials (hereafter referred to as the TMH intervention) on 9-11 year attitudes towards talking to parents, teachers and friends about their emotional wellbeing and how equipped children felt helping to manage a friend's emotional wellbeing

Methodology: The TMH intervention was piloted with 13 classes of Year 5 students at seven schools across South England. Impact was evaluated quantitatively by means of pre/post questionnaires which were completed by 166 students (55% male, 76% aged 10 yrs old and 41% White British) and qualitatively by open-ended answers on the follow up questionnaire and by interviews or focus groups with students (n=48), teachers (n=8) and parents (n=10. In addition observations of implementation across the 13 classes were noted.

Key Findings: In terms of quantitative results there was a significant increase following the TMH intervention in children endorsing that they would know what to say if a friend approached them with worries and that they would know where to go to get advice. However there was no change in relation to talking to friends or teachers in this situation all of which were very highly endorsed at time one. In terms of what to do if they were themselves distressed there was a statistically significant increased endorsement of talking to teachers or friends post TMH, but no change in talking to parents (which was already very highly endorsed). In answer to open ended questions about what they liked and didn't like many children (27%) commented on animation as the best thing about the lesson and in particular the fact that it was co-created by children e.g. "I think the best thing was that they used an animation made by kids" and "The small video made me want to speak out more, I liked it". However a minority (9%) noted that TMH opened up difficult feelings and experiences e.g. "saying who is closest to me because I could not think of anyone apart from my parents." In terms of the qualitative findings a key theme to emerge was the importance of children's voices in terms of impact of the animation. As one child commented: *"I liked it because it was made by year 6s, it wasn't like an adult that made it and they like knew all about it but the year 6s had a lesson like us about it… it's more like listening to yourself, you know what they've learnt and you can see how much they've learnt"* . In addition several children commented on the impact on their understanding of mental health issues, for example: *"I think this lesson has taught me so much… I literally had no idea what it was, I thought it was just somebody being ill and I didn't know at all that it could happen to everyone and I also learnt that if I have any worries I should talk to someone before they get bigger and bigger and they're up like the volcano".* Parents and teachers noted their wish for more resources to back up their learning and support for children

Limitations: this was a non-random sample of children and there was no control group. Demand characteristics may have made the children more likely to report change post TMH and to focus on positives in the interviews. The research was carried out in the South of England so may not be generalizable

Conclusions. Whilst these limitations need to be born it mind it would appear there was evidence of impact of TMH in terms of improved awareness in possibilities for help-seeking regarding their own and their friends mental health issues and some improved understanding of the meaning of mental health issues. The use of children as co-creators in the material was highlighted as increasing saliency for children as well as being appealing for adults. Whilst most children indicated enjoying TMH and welcomed the opportunity to explore these issues, for some it raised difficult feelings and memories and this needs to be born in mind in wider roll out. Teachers and parents also highlighted the need for more resource materials to support their understanding and support for children

Aims

The summative evaluation aimed to explore the effectiveness of the TMH intervention to answer the following research questions:

- To what extent did the lesson plans and animation help 9-11 year olds understand that they are not alone in facing difficult circumstances or mental health issues?
- Did the lesson plans and animation support decisions about whether or not to talk to someone and encourage careful thought about who to trust?
- Were the children able to demonstrate what to do if they don't want to talk to anyone?
- Did the lesson plans and animation provide information on what to expect from other people?
- Did the lesson plans and animation enable schools and families to more easily discuss emotional wellbeing?

Alongside this, the evaluation aimed to gather feedback on the animation and lesson plan to inform any necessary changes or additions.

Methodology

The Talking Mental Health animation and 1 hour PSHE lesson plan were piloted with 13 classes of Year 5 students at 7 schools in South England. Recruitment was conducted through existing networks such as the Anna Freud National Centre for Children and Families' Schools in Mind Network, through which school staff responded to an advert. Of the 21 schools that responded, schools were selected based on engagement, proximity and spread of demographics. An initial meeting was then held at each school with the key contact and Year 5 class teachers to introduce the lesson plans, animation and distribute the consent forms to all parents. Parents were then required to opt-in if they were happy for their children to take part in the study.

Data were collected through pre/post questionnaires conducted with students (see Appendix C for full questionnaire), researcher observations of the lessons taking place, focus groups with students, interviews with class teachers and focus groups with parents (see Appendix D for topic guides), see Table 1 for breakdown of data collected by school.

The evaluation took place on one day at each school with an hour and a half allocated per class to allow for quantitative data collection time additional to the one hour Talking Mental Health lesson. The lesson was delivered by the normal Year 5 class teachers, who were provided with the Talking Mental Health intervention at least two weeks before the lesson to allow for planning time. Child focus groups were then scheduled on the same day at a convenient time, with teacher interviews taking place after the end of the school day. Parent focus groups were arranged by the school key contact for a convenient evening.

The quantitative questionnaire aimed at assessing the change in attitudes towards talking to parents, teachers and friends about their emotional wellbeing and how equipped children felt helping to manage a friend's emotional wellbeing. The post-lesson questionnaire also included open-ended questions for lesson feedback. The qualitative interviews and focus groups aimed to gather further in-depth feedback and opinions on the intervention, as well as exploring any impact they may have had on students and teachers. The parents focus group also aimed to gather feedback on the animation specifically, how comfortable they were with the topic and what additional parents resources they would like.

Table 1 : Data Collected

| School	No. of classes	No. of completed surveys	No. of focus groups/children	Teacher interview	Parent focus group
1	2	18	FG1: 3 boys, 3 girls		
2	2	24	FG1: 3 girls, 1 boy FG2: 3 boys	1 teacher	5 parents (mums), also attended by 1 friend and 2 teaching support staff
3	1	18	FG1: 5 girls, 3 boys	1 teacher	
4	2	38	FG1: 2 boys, 4 girls FG2: 4 girls, 1 boy	2 teachers (interviewed together)	
5	2	16	FG1: 4 girls, 2 boys	1 teacher	2 dads 3 mums, 1 Yr 5 teacher
6	3	27	FG1: 4 girls		
7	2	31	FG1: 3 boys, 3 girls FG2: 5 girls, 1 boy		
Total	13	172	10 Focus Groups 19 boys 35 girls 48 children	4 interviews 5 teachers	2 focus groups 10 parents 1 friend 3 teachers

Limitations

Due to questionnaire data collection pre and post lesson, the lessons all tended to start later than expected and so rarely had a full hour remaining. This meant that the teachers struggled to fit all the activities in to the time remaining and felt rushed.

During the children's focus groups, many of the children mentioned the questionnaires as one of the best parts of the lesson and having taught them to be a good friend and consider talking to teachers and parents. This was not officially part of the lesson and therefore the interviewee attempted to steer conversations away from this topic. However, it is worth noting that a number of children did like having a pre/post measure to reflecting on their learning.

During both parents focus groups teachers were present. This affected the flow of conversation as the interviewer was occasionally prevented from following up on parents statements due to teachers wanting to respond especially in relation to current school policy and provision.

Demographics

Percentage Male to Female participants and age range.
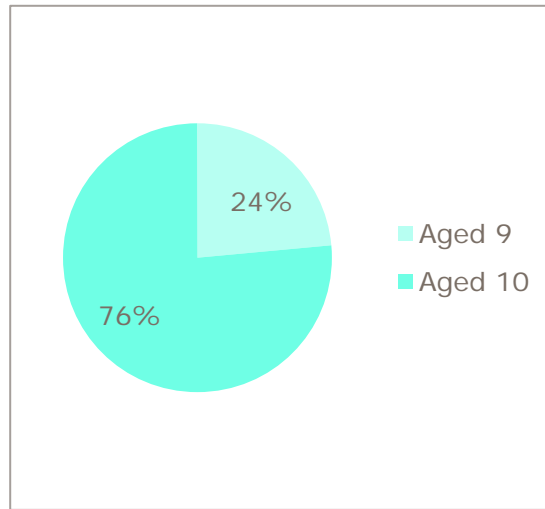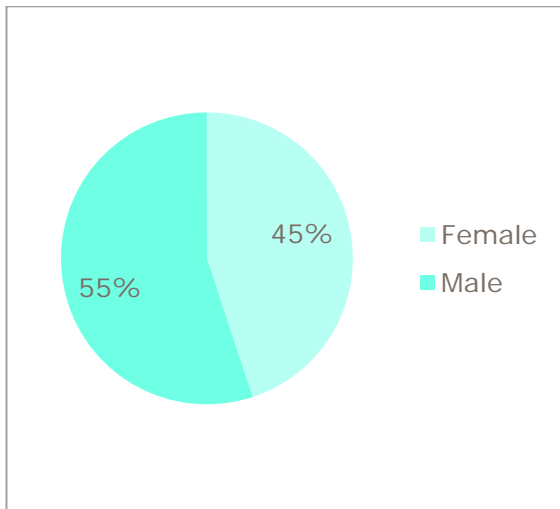
Ethnographic percentages for students who took part in the Talking Mental Health pilot lesson across all 7 schools.
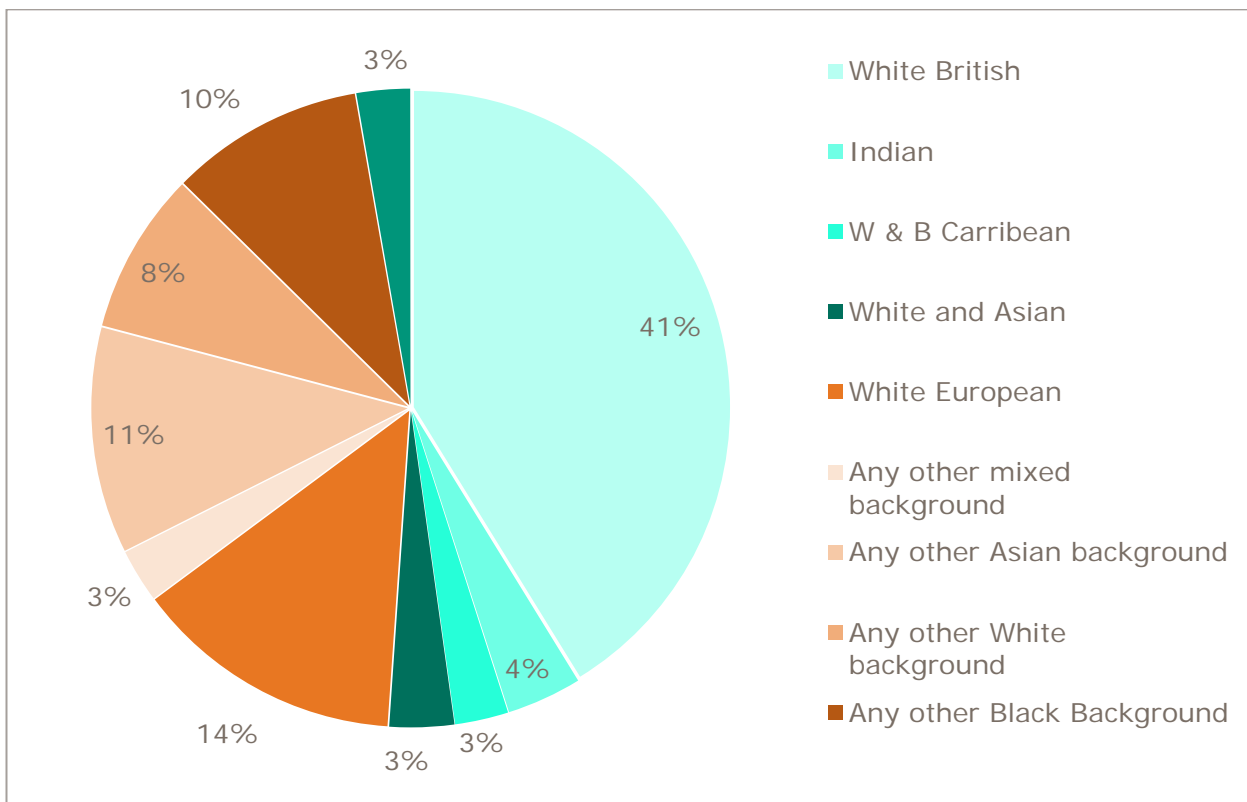
Findings

Pre-Post Questionnaire Results

Paired t-tests were conducted for each of the sections for Questions 1 and 2 on the pre-post questionnaire (see Appendix C for details of questions). Below are the results of whether there was a significant difference between answers given pre Talking Mental Health lesson compared to after the lesson (see Appendix E for the SPSS table results). The answers below demonstrate that if a "friend was feeling very down, scared or worried", students scored significantly higher post lesson for "I would know what to say to my friend" and "I would know where to get advice on what to do" but there was no significant change in answers given to "I would talk to my friend about how they feel", "I would talk to my teacher" and "I could be a good friend to them". For "I could be a good friend to them" there was almost no change in answers, this is likely due (demonstrated by Table 2 below) to almost all students answering "Agree" at both time points. For Question 2 "If I was feeling very down, scared of worried", there were significant changes in answers given for all expect "I would talk to my parent(s)/carer(s) about how I feel".

1. If **my friend** was feeling very down, scared or worried…

I would talk to my friend about how they feel	There is no significant difference between Pre/Post scores, t(164) = 0.852, p = .395, α = .05
I would know what to say to my friend	There is significant positive difference between Pre/Post scores, t(163) = 3.509, p = .001, α = .05
I would know where to get advice on what to do	There is significant positive difference between Pre/Post scores, t(164) = 4.959, p = .000, α = .05
I would talk to my teacher	There is no significant difference between Pre/Post scores, t(164) = -1.822, p = .070, α = .05
I could be a good friend to them	There is no significant difference between Pre/Post scores, t(164) = 0.000, p = 1.00, α = .05

2. If **I** was feeling very down, scared or worried…

|	
I would talk to my parent(s) / carer(s) about how I feel	There is no significant difference between Pre/Post scores, t(163) = 1.135, p = .258, α = .05
I would talk to my teacher about how I feel	There is significant positive difference between Pre/Post scores, t(164) = 3.250, p = .001, α = .05
I would talk to my friend about how I feel	There is significant positive difference between Pre/Post scores, t(164) = 4.126, p = .000, α = .05
I would know where to get advice on what to do	There is significant positive difference between Pre/Post scores, t(163) = 3.027, p = .003, α = .05

Table 2: Pre/Post survey result percentage comparisons (see Appendix C for survey questions)
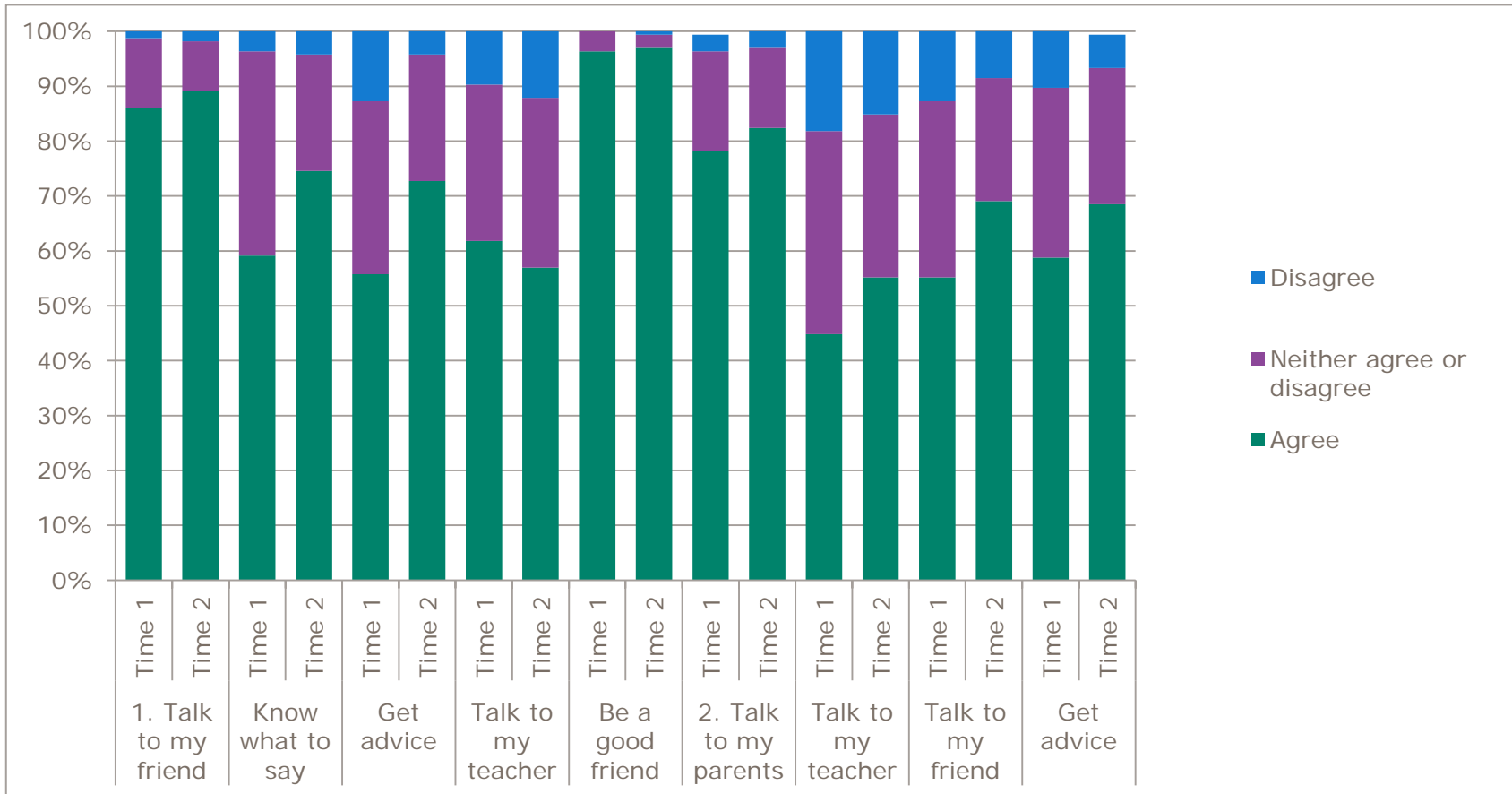
After the TMH lesson took place, the students were also asked to complete a feedback questionnaire. They were asked if the TMH lesson was "Easy to understand", "Useful", "Interesting", "Fun".
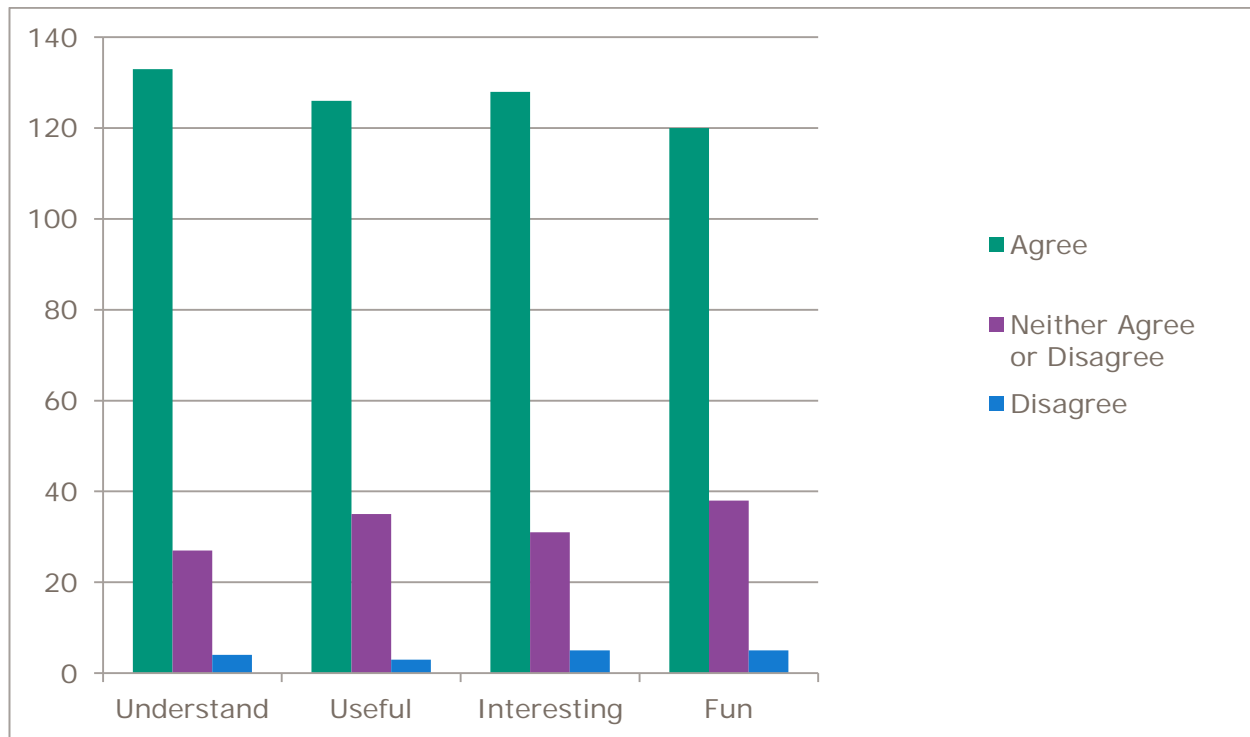
They were also asked how they found the length of the lesson.
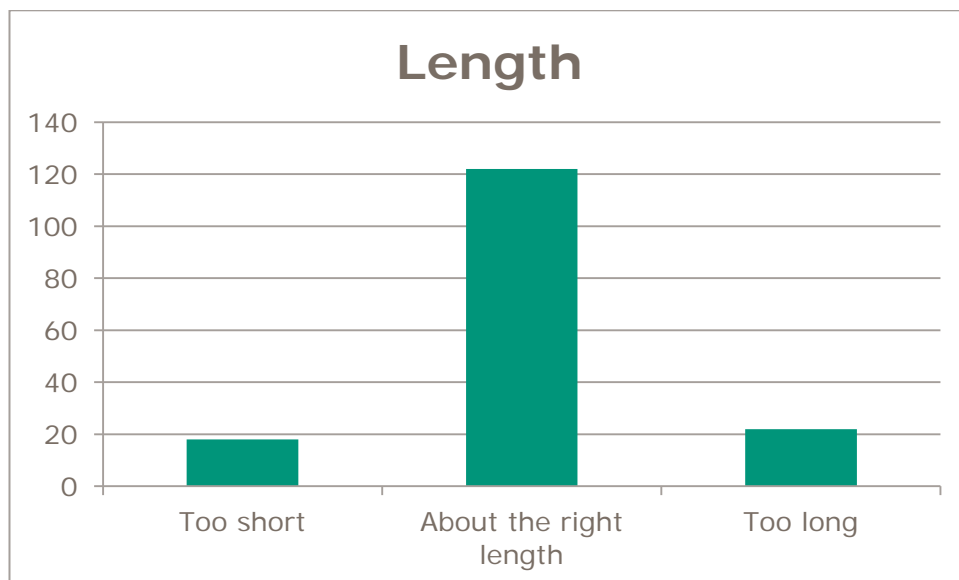
Finally, the students were asked three open-ended questions: "The best thing about my 'Talking Mental Health' Lesson was; "The worst thing about my 'Talking Mental Health' Lesson was"; "What else would you have liked the 'Talking Mental Health' Lesson to include?".

The best thing about my 'Talking Mental Health' Lesson was...

A couple of children put "nothing" while most children were able to articulate a specific element of the lesson they particularly enjoyed, and there was a wide variety of specific activities and sections of the lessons mentioned. There was a spread of answers mentioning al areas from the activity sheets, getting to draw, writing, talking and listening. The most frequently mentioned activity as "The best thing" was the Listening section role play, one child described it "when we got to act out and experience what it was like to not be heard". Alongside this, 16 children mentioned that the games were the best part, such as Fruit Salad.

Out of 166 completed surveys, 44 children mentioned the animation as the best thing about the lesson, with responses such as "I think the best thing was that they used an animation made by kids" and "The small video made me want to speak out more, I liked it". 19 children mentioned how it had taught them new things with examples given such as "Learning what to do and who to go to when I'm feeling worried". Whereas 11 students mentioned that getting to talk openly in class was the best thing with statements such as "expressing my feelings confidently" and "That we got to share anything and we didn't have to worry". Children also expressed a wide variety of other views including feeling able to relate to the animation as they liked "The way it was about people like me" and also that the lesson was a variation on their everyday teacher as "how we got to do activities because normally we just sit on the carpet".

The worst thing about my 'Talking Mental Health' Lesson was...

72 of the students answered this question with "nothing" or left it blank. Four of students mentioned the Fruit Salad game as the worst thing, where they had to "swap seats" and a couple of children did not like specific worksheets. Overall, one of the most common themes related to opening up difficult feelings (n=15), such as having to write or talk about personal experiences including their emotions and feelings. For some students this appeared to bring up difficult memories such as "When it reminded me about my worst dream" and they found it difficult "Saying how you would feel because the some of the questions were hard to answer". Other feedback ranged from worries and difficult feelings the lesson raised such as "saying who is closest to me because I could not think of anyone apart from my parents" to comments on the lesson structure such as "that we sat on the carpet long" and "small amount of time to do activities". Although not a common answer, a couple children found the lesson confusing or difficult to understand with comments such as "I did not get any of it".

What else would you have liked the 'Talking Mental Health' Lesson to include?

57 of the responses were left blank or answered with "nothing" and a couple of children emphasised this with comments such as "I found out everything I wanted to know". A few of the children wanted more of the content, such as "more videos and more games" or "more things to do and more discussing" and "more real life scenarios". One child commented, which was also raised in the child focus groups, that they would like to know "what happened to Jay in the end of the story". A few comments were also made which could be addressed by the structure of the lesson rather than the lesson plans, such as "more time to talk", "we could share more ideas", "more standing up". A couple of the students also felt that they had not learnt sufficiently "how to cope with mental health problems", or "how to deal with problems that can affect your life". Other responses covered additional information that could be included, such as "Just letting us know that we shouldn't be scared" and additional resources

that could be provided, such as "a word-search" or "any books you can get for the mental health lesson".

Summary of questionnaire results

The paired t-tests for questions 1 and 2 demonstrated significant difference between pre and post answers to whether students would know what to say to a friend and would know where to get advice on what to do if their friend was feeling down, scared or worried. There was also a significant difference in whether students would talk to their teacher about how they felt, talk to a friend about how they felt and would know where to get advice on what to do when they felt down, scared or worried. This demonstrated improved awareness in help-seeking regarding their own and their friends mental health issues, and improved confidence on where to get advice.

The additional questions demonstrated that, in relation to questions 1 and 2, the children expressed that they had learnt who to talk when asked what the best thing was about the lesson. There were still a few children who had not understood the lesson or felt they had learnt anything, but this was a small number of respondents and as no elaboration was afford it is difficult to speculate about what would have helped them to understand or what specifically they found confusing. Whilst some children noted TMH as a facilitator for allowing open conversation within the classroom setting others found the worst thing was expressing their feelings in class and talking or remembering personal experiences associated with mental health. This appears to be a fine balance and one that may need to be judged independently my teachers in each individual classroom setting and with each individual student, not forcing students to speak openly and allowing other means of communication.

In feedback about the TMH lesson, the response was on-the-whole positive. The results demonstrated that students scored the lesson as easy to understand, useful, interesting and fun, as well as 'about the right length'. The children appeared to find the lesson engaging by mentioning particularly activities and games as the best things about the lesson with the most overwhelming response being towards the animation as the best thing. However, they also mentioned wanting additional content and materials and issues with how the lesson was structured. However, additional content has been provided through a whole-curriculum resource pack and the lesson structure is again likely down to the judgement of the individual teacher for the needs of their class of students.

Qualitative Results

Across the 7 schools that took part in the evaluation, 10 focus groups were conducted with 48 children with 3-8 students at each, 5 teachers were interviewed, and 10 parents took part in 2 focus groups which were also attended by 1 friend and 3 members of school staff. Thematic analysis was conducted across all qualitative data with themes outlined in the table below.

Main Theme	Subtheme
Animation feedback	Useful Introduction
	Engaging
	Finger prints and artwork
	Children's voices
	Sections
	Jay kicking the chair
Lesson Feedback	Positive
	Activities
	Engagement
	Message and content
	Drawbacks
	Quantity
	Confusing
Lessons learnt	Dealing with problems
	Talk to someone
	Open-up conversations
	People's differences
	Help others
	Mental Health
	Comfortable with topic
Mitigating factors	
Changes and Suggestions	Finishing Jay's story
	Additional content
	Other year groups
	Delve deeper
	Support Systems
Suggestions for Parents Resources	

Animation Feedback

Useful Introduction

There were many positive comments made about the animation, especially that it gave an accessible introduction into the topic: "I really liked the animation, I thought that was a nice way in" (Teacher, School 3) and a useful way of structuring the lesson "having the clips is really useful, referring back to Jay and Jay's story, I think that's a really smart move, gives them something real to kind of pin onto" (Teacher, School 5).

Engaging

Many of the children were able to pick up on and describe specific elements and scenes within the animation that they related to or learnt from, and were much more descriptive than their teachers. Students from Schools 2, 3 and 4 described ways in which the animation was engaging, feeling this helped with their understanding and attention. They mentioned aspects such as the "humour and effort and interesting facts" (School 7, Child FG2) and described it as "really fun and inventive" (School 7, Child FG1) and "clever" (School 4, Child FG1). One child explained why they enjoyed the animation "because it was like helping you learn about mental health but in a fun way instead of just being taught by a boring teacher telling you how to do it" (School 7, Child FG1).

One parent reflected this by explaining that the simple message would appeal to children and keep them engaged: "It wasn't overly complex, I felt there was a simple message running right the way through" (Parents FG2).

Finger prints and artwork

Children from all schools mentioned that the finger prints and art work within the animation was one of their favourite parts. They attributed this to a number of reasons such as the inventive use of letters, the creativity and technique, and that they could see it was made by children of a similar age to themselves. Children picked up on the fact that the finger prints were all different just as people are and they connected this directly to the message within the lesson:

"my favourite part was the animation, and because of something I noticed. I noticed that all the people were finger prints and every finger print is different so it means that so every so that different people have different personalities so you might have to treat people differently because they might have because they might react to some things differently" (School 7, Child FG1).

"I liked it that they didn't just draw it like everyone's the same, they made it show that like everyone's different and they have different personalities" (School 2, Child FG1)

The most frequently mentioned aspect of the film by teachers was the style and choice of using finger prints. They felt this was a way of all children relating to and engaging with the animation without worrying what the children voicing the animation looked like.

"it was very relatable and of course, you were able to keep it, you know you took it away from seeing real children with the little animation using the finger prints I thought that, I really liked that. So it's quite, it's a serious subject but it's been it's put into a child friendly way" (Teacher, School 4)

The parents also picked up specifically on the artwork: "I liked the use of the finger prints... I thought it was a really clever little piece of art" (Parents FG2).

However, in FG1, Parents felt the animation was "jumpy" and "busy" and that it needed to be "slowed down a bit". A further suggestion was that the voices needed subtitles as they were hard to hear and difficult to follow.

Children's voices

Alongside the artwork, a few children specifically mentioned the use of children's voices as what appealed to them and children of their age. They felt this made it easier to understand compared to adult voices as they felt the ideas came directly from children:

"it also appealed to people sort of our age because it wasn't an adult sort of organised thing telling the children what think and stuff and the children did the voice overs" (School 4, Child FG1).

"I liked it because it was made by year 6s, it wasn't like an adult that made it and they like knew all about it but the year 6s had a lesson like us about it… it's more like listening to yourself, you know what they've learnt and you can see how much they've learnt" (School 7, Child FG2)

Both teachers and parents agreed that the use of children's voices was relatable and engaging for their students: "using the children's voices is very engaging"; "it's quite gender neutral isn't it really… I think most people could imagine themselves in that image" (Parents FG2).

There was only one minor criticism made by one teacher, which was that the adult voice "could be a bit more engaging" (Teacher 1, School 4). However, the teacher in the room also being interviewed noted that "that didn't stand out for me" (Teacher 2, School 4).

Sections

Many children mentioned the benefits of the animation being broken up into sections. They especially liked that each section of the animation led onto the next set of activities in the lesson to help them cement the information they learnt:

"I liked how the animations were leading onto the thing that we were going to do next… so you can have all the ideas in your head and use it in the next in the thing that you're going to do next" (School 7, Child FG1)

Teachers also mentioned the structure being well done, with the three sections corresponding to the follow-on activities and allowing the children to digest the information.

"it needs that clear split up because particularly that, if you've got schools with demographics like we've got, if you've given them too much information and then you're saying, right back to the beginning of the animation what was the beginning bit, if right we'll talk about that bit we've just watched then they can manage with that much easier I feel" (Teacher, School 2).

During FG1 the parents raised concerns of the animation being too long with too much information to take in, but when explained that it would be split into three parts they felt more comfortable about their children understanding the content: "it is actually quite a lot to take in in one lump, so I wouldn't recommend doing it" (P2).

One parent in FG2 also commented that "personally I was pleased for you to say that you were going to break it down with the kids because it was a lot of information to take on". Here the Teaching Assistant commented that "the children didn't complain that they didn't understand or they found the information difficult to process and when we talked about it" and attributed this to the animation being split into three sections with discussion after each one making the information easier to digest.

Jay's story

When discussing the animation, children from a couple of schools expressed concern about the moment in the animation when Jay kicks over a chair in the classroom. For a couple they did not like this moment as it made them jump, while others felt worried for what was going to happen next and one child did not like it as it made them think about it happening in real life.

"when Jay kicked the chair over it kind of scare me because it just told me that she was a nice person and it kind of made me jump and made my heart hurt" (School 2, FG1)

Children at school 3 also found Jay's story hard to understand at times, not being able to comprehend why she had no one to talk to and why she had to look after her mum while she was sick.

"the parts where the girl when her she couldn't really talk to anyone, I didn't really understand how she felt like that" (School 3, FG1)

Lesson Feedback

Positives

Activities

One of the main positives mentioned by children about the lesson was that it had a mix of activities that seemed to suit all children, there was always something they liked. They appreciated that it "wasn't just boring sitting on the carpet listening looking at the board, it was doing activities, getting involved" (School 7, Child FG2). Other children really liked that there were multiple sheets with the opportunity to draw. Many children picked up on specific activities and work sheets as their favourite parts of the lesson and they were often able to articulately explain why they did each activity and what it had taught them.

All teachers interviewed also made positive comments about the lesson plan resources, stating that they enjoyed teaching them, picking up on specific activities they particularly liked and claiming that they would definitely use them again. A couple of teachers mentioned the plan layout, one teacher noted that "the sheets were simple, easy to follow, fitted with the animation nicely" (Teacher, School 2), while another emphasised "Like everything was there, I really like the step-by-step guide" (Teacher, School 3).

One teacher explained that they would want to use activities separately with more discussion time in between.

"they were really nice and they'd definitely be ones that I'd dip in and out of and I'd maybe do one, one per lesson or something and then spend a lot of time just chatting and having a kind of circle time" (Teacher, School 3)

Engagement

Four of the teachers explained how they felt their class were engaged and attentive throughout the lesson as "they were all taking part in the tasks" (Teacher 1, School 4), "there was lots of different responses, reasoned responses so they'd clearly been thinking about it" (Teacher, School 2), "it sparked a curiosity for them" (Teacher 2, School 4).

Children at School 3 emphasised this by attributing their willingness to contribute and engage with the lesson as "it was a really nice calm lesson, it made us feel a bit more comfortable in saying it" (School 3, Child FG1).

Message and content

A couple of teachers expressed their gratitude for a mental health project being funded and how important a message this was to teach: "I think it's great that we're doing this because I think the government do need to do something, I think they're going to have an awful lot of mental health problems in the future because of the way our education is now so pressurised on children" (Teacher 1, School 4); "You've got it out there, it's being discussed" (Teacher, School 5).

Parents at both focus groups, when directly asked if they were concerned or worried about any of the messages and themes discussed in the animation said "no" with parents from both groups mentioning that it was a positive message: "no, not in a million years, I think it's all really positive" (Parents FG2, Dad1).

Overall the teachers found the topic pitched at a level they were comfortable explaining although they would have liked a guide with a more in-depth definition of mental health and mental illness as they often felt nervous correcting or explaining the terms children used in class. Although the lesson itself was straightforward and explained well, they felt unequipped to answer more complicated questions the children had.

"the level we went to was fine, I think maybe in your class you went deeper because you know we didn't get to a point where you know we were talking about actual mental illnesses, that wasn't even brought up in this class, we just talked about every day, our emotions and how you cope with them every day" (Teacher 1, School 4)

Drawbacks

Quantity

One of the main drawbacks mentioned by all teachers interviewed was that there were a few too many activities to fit into a single lesson. However, it is worth noting that most lessons did not have the full hour during the piloting due to pre questionnaires with the students running over the allotted time. A couple of teachers also noted that they had intentionally tried to fit in all activities for the piloting but in a normal lesson they would have cut a couple of activities to ensure more time was spent on getting the most out of those they used.

To help with this there were suggestions of emphasising which resources are the most important to include, "if it was made clear kind of which bits you felt were the priorities to get done, then that would be the best way" (Teacher, School 2), and which could be taken out if necessary: "think maybe there were too many resources to use so I guess you would offer them as a pack and people would pick and choose" (Teacher, School 3). Alternatively, one teacher suggested that some activities could be explained and then taken by students to complete at home.

"the activity who would you talk to that might be quite a nice one to take home to think about and that way they're taking it home and they're taking home then that attitude that frame of mind into their own personal space at home" (Teacher, School 5)

One teacher did concede that this is a general problem with teaching, which a another echoed by saying "if I'd repeat that lesson it'd be a lot slicker, like for all lessons it's always that way, you know new material" (Teacher, School 4).

Confusing

A number of the teachers struggled with fully explaining the term "mental health" and to help children distinguish this from mental health "problems" or "illness". They felt more direction was needed on the appropriate use of language and definitions.

"if you have depression or something you don't have mental health problems but that mental health is something that's on going and that it needs to be maintained in the same way that our health is and I don't think I really explained that carefully enough but I don't know if there's a better way of explaining that" (Teacher, School 3).

A few elements within the lesson confused the children or they felt were not explained fully. Two of the students at one school expressed concern about being told that they should tell an adult about a friend's problem in case their friend did not want them to tell:

"I didn't really understand when it said if your friend is upset you go and get someone to help because they might be like they don't really want to tell anyone" (School 7, Child FG1).

Other children felt the reasons for doing the activities were not fully explained, such as the Sentence Starters and the Listening activity. A couple of students also expressed that they still did not understand fully what the term 'Mental Health' meant and it was often unclear if students could give an accurate explanation. However, many children felt they had learnt the meaning of the term and explained that their perceptions had changed, see section on "Lessons learnt" for further explanation.

A couple of the teachers also found specific activities confusing to follow or to explain. One teacher felt they were unsure if they had used the "Last time I felt…" activity in the appropriate way the developers intended: *"whether we were using it correctly to record when you have that feeling or when you have that feeling what is it like to have that feeling, so there was a little bit of confusion of what that meant and how to use that resource"* (Teacher, School 4).

Teachers also mentioned the "Circle of support" activity as confusing feeling that it focused on trusted adults only and not allowing children to put their friends or pets as examples. One teacher also felt this clashed with the NSPCC advice that parents are not always "trusted adults" and therefore the activity needed further explanation for the students around who a "trusted adult" is. However, it feels that this is due to a misunderstanding by the teachers of the focus of the activity, which is to map out existing support around the children and does not mention "trusted adult" but rather "trusted people".

The parents in FG2 wanted to make sure there were activities to explain each section and that the message was reinforced. One parent also raised concerns about the lesson plans being accessible for all types of learning: *"is it all worksheet based or do you do like roll plays, that type of thing, I'm just thinking about dyslexic children that don't like writing so much"* (Mum2).

Lessons Learnt

Dealing with problems

A lot of the children expressed how the Talking Mental Health intervention activities taught them how to deal with problems. One child explained this as *"it's kinda like preparing you, it's like packing a bag of things you need if something happens"* (School 7, Child FG2). Many of the children felt the lesson was relatable, that they could think of times when it would help or when it would have helped in previous situations.

"lesson helped me like how to deal with problems because last time I'd usually just try ignore problems but it really helped me" (School 1, Child FG1)

They mentioned specific instances in which the lesson learnt would be useful, such as with secondary school as *"it can probably make us feel really strange and uncomfortable and it's good to know who to talk to… the small things for your mental health you can do"* (School 4, Child FG1).

"if we hadn't done that workshop we probably would have been a bit clueless like what do I do now, when you fall over or something you would tell someone but mental health problems is you can't really like you find it hard to tell people because you don't actually know what's happening" (School 4, Child FG1).

Talk to someone

Many of the children picked up on the coping strategies within the animation as having taught them that there are ways of dealing with small feelings. However, children from all 7 schools were expressive about how the lesson taught them to talk to someone about their problems and how this would help.

"talking was the best because if you don't talk about your, what happens lately, to your parents, your teacher or in the animation your swimming coach about stuff then it can just carry on getting worse" (School 1, Child FG1)

"I learnt that you can talk to anyone about anything, all about your emotions, you can talk to anyone that you trust and they'll like understand if they're a good listener" (School 5, Child FG1)

"I think I've learnt that if I'm angry not just to keep it inside but to tell someone because I normally keep it inside and then it gets worse all the time and then I start taking it out on everyone" (School 2, Child FG1)

Children at a couple of schools also talked about how the lesson taught them that there are many different people who you can talk to and who can help.

"that you don't just have to tell your parents… in our school we have lots of friends… so I would definitely tell my friends my best friend, and I liked how it wasn't just a best friend in school it was one out of school so that was quite interesting" (School 4, Child FG2)

Open-up conversations

Teachers felt the lesson was an opportunity for open discussion. One teacher felt that their class "benefitted hugely from that really open discussion" (Teacher, School 5), while another teacher found it led to "more people that are more ready to open up and say do you know what I feel like this because of this, whereas they wouldn't have done that before" (Teacher, School 2). Teachers also associated the lesson with reducing the stigma around mental health.

"it's another way of trying to reduce the stigma of mental health issues and address or equip our children with the language that they need to get through life and to be able to address any issues that they may face in the future using, you know positively, and using terminology that they've that's very normalised for them because they've been exposed from a very young age" (Teacher, School 5).

Many of the children discussed how the lesson allowed them to open up and talk about issues they would not normally feel comfortable discussing in the classroom environment. The liked that they were able to ask any questions but that there was not pressure to talk about personal issues if they did not want to.

"I like the way that it all made us well, a word for it, express ourselves" (School 1, Child FG1)

"I also liked that you could ask any question you wanted to throughout the lesson, that makes you feel like open and that you can say anything that you want to say" (School 5, Child FG1)

"we could talk to our friends but we didn't have to share anything like we didn't if we felt a little bit like well I don't really want people to think about it apart from myself then we didn't have to do anything we didn't want to" (School 7, Child FG1)

People's differences

One of the lessons learnt often mentioned was through the Fruit Salad in which children were taught that emotions are not always visible from the outside to observers. Beyond this, the lesson evidently highlighted differences between the children and their friends, through their reactions to problems and their coping strategies.

"I found out that you can't actually tell what they're feeling by their on the outside because they might be looking happy but they might be feeling sad and they want to make sure to make everyone else think that they're happy but their actually sad so you can't actually see what they're feeling" (School 7, Child FG2).

Help others

Several of the children talked about how the lesson taught them to help their friends to deal with their problems and how to be a good listener. Several children mentioned how they would now pay more attention to how others were feeling, "to be kind to each other" (School 6, Child FG1) and make more effort to help them.

"now I've noticed if you see someone continually getting more and more upset then you need to do something you can't just leave them and let get and let them be sad" (School 7, Child FG1)

"I know I that I didn't really understand about it but now I know if I see someone who is sad or angry I know what to do now so now I can help them… I would see how they feel and if it was bad I would tell someone if it was just like a small thing I wouldn't I'd just try and make them better and like be a good friend" (School 4, Child FG2)

They also talked about several ways in which they could be a good listener and the importance of paying attention when someone is talking to them. They attributed this to the paired listening activity as many children expressed how upset they themselves felt when they were ignored or interrupted when telling their classmates about issues and experiences.

"the talking and the listening bit was the most important because if someone's talking to you and you're just looking around not caring about the person their emotions and their moods might change" (School 1, Child FG1)

"if you were talking to me and I was just turning around it would feel a bit like I wasn't listening and so I learnt that I need to listen and not just say cool because it could be something sad that happened" (School 3, Child FG1)

One child even seemed to express incredulously that they learnt they could have a role to play in helping someone feel better and talk through their problems:

"One thing I learnt today is that you can be the listener to someone else, you don't always have to tell, you can be the person who helps someone else not just like an adult… we can do just as much as them trying to help our friends when they're down or worried" (School 5, Child FG1)

Mental Health

Many of the children were able to demonstrate a better understanding of mental health, feeling the lesson had taught them a lot and more than they were expecting. They explained that the perceptions had changed from mental health being a serious problem that few people have to something that everyone has and needs to take care of.

"I think teaching children about mental health at this age is a good idea 'cause then they're more aware of it and they're not too young but they kind of don't really know about it yet, before we had this when someone mentioned mental health everyone kind of was like talking about it in a bad way and they just thought it was like problems with your mental health and I think teachers talking about it at our age that's why I think it's a good idea" (School 4, Child FG1)

School 5 were especially eloquent about the changes in their learning, "a lot of people can get it because I only thought it was like just like a small number" and how it is caused, "by stress and worries" (School 5, Child FG1).

"I found it quite like erm something that you could get really into or like inspired by 'cause I didn't know much about mental health before, I kinda thought maybe it's something to do with someone that has maybe a problem or is disabled but it's completely different to that... you don't just have but something you can build... which is something that can happen to everyone" (School 5, Child FG1)

"I think this lesson has taught me so much... I literally had no idea what it was, I thought it was just somebody being ill and I didn't know at all that it could happen to everyone and I also learnt that if I have any worries I should talk to someone before they get bigger and bigger and they're up like the volcano" (School 5, Child FG1)

Two teachers also made several comments about the need for the lessons plans to teach children about mental health due to feeling that there are additional pressures on primary school aged children.

"I do worry very much about children's mental health now, I worry what education what we are doing as a society to young children and I do worry about long term effects of that" (Teacher 1, School 4)

"just from taking on this class and seeing how much need they have, and that was something that, when I think about it, that I never experience that in primary school, the kind of feelings that they had or that they have or maybe my friends did but no one ever spoke about it" (Teacher, School 3)

This was reflected in the parents interviews as they discussed the appropriateness of KS2 children as a target audience for this message. One Dad spoke about the necessity of this being taught at this age: "because the next few years this is you know a very difficult time of life isn't it and it does result in self-harm and the bigger, I assume that's the end point isn't, the bigger picture, if they can't get rid of it they self-harm and other forms of release" (Parents FG2, Dad1).

During FG2, all parents agreed that the message was important and timely, appealing to both boys and girls who find it hard to open up and talk about their feelings: "it would appeal to boys because I think girls are much better at talking about things, sharing their feelings and you know, having a son he's not very good at sharing his feelings so I think that was quite good really" (Parents FG2, Mum1).

There was a further discussion around how different the message was for the parent's generation and they felt it was something they had to learn on their own and perhaps struggled with as children: "whereas in my day it would have been oh you girl, calling you names... which would have put you back in your shell" (Parents FG2, Dad2); "I think even as girls, in our generation it was difficult to talk and open up, I don't think you were encouraged to" (Parents FG2, Teacher).

<u>Mitigating factors</u>

All teachers mentioned additional resources already available in their schools or campaigns their class had recently took part in. Most teachers felt this meant there students already had a good grasp on, at least, certain areas of the topic. One teacher suggested that this was their reasoning for not going into depth on all activities: "I think things like the circle of friends, because they've done it before already, I didn't want to go into too much detail" (Teacher, School 3). The circle of support was the main activity that teachers felt the students had learnt about previously through ChildLine and NSPCC campaigns, and so were used to identifying trusted adults. There were a few comments made about how they felt the lesson hadn't taught the children anything that they did not already know due to these previous campaigns and class discussions.

Similarly, parents in both focus groups spoke of this lesson being in line with messages from ChildLine and NSPCC. FG2 parents then discussed the idea of needing a recognised and trusted brand that children can grow up with and associate this message with: "do you have some sort of logo or branding that the children would recognise?... so that is something the children would recognise as they kind of grow up with that they would know what it is and we would know what it is as well" (FG2, Mum2); "they all know about ChildLine" (Parents FG2, Teacher) "they do now yeah" (FG2, Dad1) "[it's] that kind of level of awareness that they need" (Parents FG2, Mum1).

<u>Suggested changes in relation to the materials themselves</u>

Finishing Jay's story

Children from a couple of schools mentioned how they felt Jay's story was not complete. They would have liked to know how she had finally dealt with her problem and what had caused her issues in the first place.

"during the Jay bit it wasn't that specific because it didn't tell us why she was that upset and worried... without that she might not be that angry for no reason" (School 4, Child FG2)

"I really liked the animation but at the end I thought you could add what happened to Jay" (School 5, Child FG1)

Additional content

Many of the children wanted the lesson to include even more information, with further explanation of some activities but also additional topics and case studies. A couple of children also wanted someone with more personal experience or knowledge about mental health to have taught the lesson.

"it would be interested to hear from someone who does have it, how they manage, how they cope [G1: yeah] and if they have any tips for anyone who feels depressed or feels insecure sometimes" (School 7, Child FG2)

"maybe they could add another topic of how the person that is listening is going to tell the adult instead" (School 5, Child FG1)

It was also mentioned that they would like take home resources to continue learning but also as a reward, such a sticker. In one focus group the children did remind each other that the teacher had said they could take their worksheets home if they liked.

"I think it would be really good to have something to take home with us even if it was just like a sticker or something or maybe a worksheet to do or something we've made, make at home or made in the day... just to help us remember" (School 4, Child FG1)

All teachers wanted more of the resources for a variety of reasons. One teacher wanted there to be a male character lead in the animation or a scenario as "often it's girls that we associate as having mental health issues and not boys" (Teacher, School 5), other teachers wanted the resources to focus on specific pressures affecting children of KS2 age such as "peer pressure but as I say, I think I think a lot of children now within education are you know pressured and having thinking about SATs" (Teacher, School 4).

There were a few ways mentioned that the teachers would have liked additional information through the resources, such as clearer options of what to include and what could be dropped, definitions explained for teacher use, and perhaps specific teacher training to increase confident in teaching the lesson.

"I think generally it would be quite good for us all to have some training, 'cause I know, I mean generally we we know general safeguarding, we obviously have detailed safeguarding training but actually children and the sort of emotional welfare we don't have an awful lot specific training. And we are counselling but we're doing that on our own [P2: yeah] from our own [P2: our own yeah] experience" (Teacher 1, School 4)

Most teachers also felt that the resources would benefit from being a series of lessons to include the additional topics and scenarios and delve deeper into the subject with the current plan as an introductory lesson.

"I think probably an opportunity to involve that lesson as an introduction or as part of an overall topic, I mean talking about getting along and the type of mental health and relationships and social stuff is something we do quite a lot so it fitted with our curriculum, but if it's not something that's a priority for a school then it would be a bit strange I guess just to come in with one lesson talking about it, there'd probably need to be a series if it was going to be a thing" (Teacher, School 2)

Other year groups

Some children thought the lesson and animation would work well for other year groups, that the animation would appeal to younger children and the topic would appeal to older children.

"I also thought that the animation was quite cute and I thought if you showed it to different ages I'm sure you'd get different responses. I think because of the storyline in it it could be for older kids it could work for older children but the animation could work for younger kids as well" (School 7, Child FG1)

"I don't really get why years 5 and 6 are doing it and not any other… because it doesn't just happen to older people, it can happen to everybody" (School 2, Child FG1)

This was also discussed in the parents Focus Groups. The teacher present in FG2 felt her secondary school aged children would greatly benefit having missed out on such messages being taught in primary school and one of the Mums felt it should be taught even younger: "I would even suggest year 4 year 3 especially like with girls eating disorders I teach at a girls school and you know just looking at them eating at lunch it's shocking, they're not eating yeah, so mental health issues are getting younger and younger, just from my personal experience" (Parents FG2, Mum 1).

Delve deeper

All the teachers mentioned that they felt the resources could have delved deeper into the topic of mental health, with more complex scenarios of what might affect a child's mental health and how this might manifest itself in their behaviour or moods.

"I think they were really interested in talking about mental health and I think, obviously we are talking about mental health but I think they were like oh but now we're just talking about who we should talk to, you know, rather than, I think they would be really interested to get into it a little bit deeper, which I know is very hard in a primary school setting but maybe that idea of like reading scenarios to think is that a small problem is that a big problem" (Teacher, School 3)

"I think they some of the children thought you would have to start throwing chairs around to show you were really unhappy, when actually of course we have the complete opposite when someone with become really introverted and not want to speak or even come to school or open the curtains because they feel really depressed, but then there are so many aspects you could add" (Teacher, School 5)

A couple of the teachers felt they could have done this through lengthier conversations to encourage deeper thought and understanding: *"Perhaps I was thinking, if this had been my lesson I'd've knocked off one of the bits and thought, let's run with this bit while they're engaged with it"* (Teacher, School 2).

One teacher also felt that it could have been pitched at a high level for the older children, feeling some of the activities were too simplistic.

"maybe could have been a bit more advanced for the older ones... more activities about maybe like the idea of deciding what the difference is, you know the small everyday problems and a bigger one, maybe scenarios that they would read through and decide is that a small problem or is that a bigger problem" (Teacher, School 3).

Parents at FG1 also suggested that the animation appeared to be only an opening to a wider conversation. One parent suggested that it needed to explore what else children could do if they did not feel comfortable talking to someone, such as writing it down and explore coping strategies further: *"I know the idea is to get them to talk to somebody so that a problem shared is a problem halved and all, however that was the single message of the film, there wasn't any 'I'm not happy talking to somebody, what else can I do'"* (Parents FG1, P2).

Support Systems

Parents at FG2 wanted to ensure the school had sufficient support systems in place to encourage conversation and respond appropriately when children wanted to talk: *"I'd be interested to know once they seen the clip and had their discussion, kind of what would be the next stage because I'm sure there would be children who would feel oh that's good I feel a bit more confident I feel I want to talk to somebody how would you kind of follow that up"* (FG2, Mum1); *"a lot of it is about how it is reinforced with the school about how successful it will be and there is backup for kids who do turn round actually I have got..."* (Parents FG2, Mum2)

Suggestions for Parents Resources

Parents at both focus groups felt they would like a heads up about the themes of the lesson before it took place to enable them to encourage conversations with their children and to allow for a shared language when discussing mental health and emotional difficulties.

"I like the terminology of little feelings and big feelings and it gives you a shared language to talk about it but if you only ever showed it to the children it wouldn't become a shared language" (Parent FG1, P2).

The parents at FG2 agreed that a one page resource sent home following the lesson would be a sufficient compromise, given constraints of informing all parents prior to a lesson taking place. A parent at FG1 explained that she did not have internet and so an email before the lesson would not be sufficient.

Parents felt that without being informed that it had taken place they would be unable to continue supporting their children as they are unlikely to volunteer the information themselves.

"I would need to know that he's done this so that I can ask him about it, because if I don't ask him about it, he wouldn't give the information over" (Parents FG1, P4)

"I want to know and you have to pull it out of him like blood out of a stone, so anything like that I think on a topic that is so important would be extremely useful, even if it's just a poster that comes home and they can say, look what we've got here Dad... something you might gleam some information from" (Parents FG2, Dad1).

However, others explained that children are often educating the parents about topics such as this.

"for a lot of the parents it will be the first time that it's talked about you know, it isn't a common topic so it will be the kids coming home and educating the parents, which they love doing" (Parents FG2, Dad2)

As well as encouraging an initial conversation they also wanted techniques of how to recognise and respond when a child starts to open up: "my child is not very forthcoming with emotions or information in general about their day, so I'd quite like from this to have ideas of ways to encourage communication, not necessarily just with me, but to discuss her feelings with other people as well, so rather than saying 'you have these big feelings, talk to people', actually have ways of encouraging that" (Parents FG1, P2); "you talk about going to see somebody and going to talk to them so you know 'what next' could be this is what you do if somebody comes to talk to you... a strategy in place for the possible person" (Parents FG1, P3); "when they said 'I want to speak to someone but they're too busy' and if erm parents sometimes with busy lives sometimes have to be like actually I do need to stop a minute" (Parents FG2, Mum)

Summary of qualitative results

Lessons learnt

Throughout the focus groups, the children were able to express many lessons learnt from the one-hour lesson and animation viewing. The children overall felt the lesson was useful in preparing them to deal with problems, picking up on specific instances in which this would be useful such as during the transition to secondary school. A few children picked up on specific coping strategies they learnt about to deal with small feelings but children from all schools emphaisesd that the lesson taught them to talk to someone and that there are many different people to talk to. Alongside, this evaluation demonstrated an increased awareness of mental health amongst the children, with a more nuanced understanding of the term and an appreciation for being taught these lessons at their age. The parents reflected this feeling that it was a timely and suitable lesson to be taught. However, there were a proportion of children who still found the definition of mental health confusing and teachers struggled with knowing if they were defining mental health in an age appropriate way.

Additionally, children learnt what to expect from others but also how to improve their own communication and listening skills to help others. Through discussion and games, the children gained insight into their peers lives and feelings demonstrating differences and similarities. To facilitate this, the lesson definitely created an environment for open discussion for children to

share their experiences and ask questions without judgement. However, from the quantitative results, it is evident many children still found talking about personal experiences challenging.

Feedback

Overall, the feedback about the lesson plans and animation was positive with the creativity and collaborative nature of the animation most frequently mentioned by children, teachers and parents. The separate sections of the animation was highlighted by children who liked that each section was followed by corresponding activities, and by parents who felt more comfortable with the level of information the children were expected to retain when broken down into the sections.

The spread of opinions on the activities were weighted positively with no specific activities overwhelmingly the best or worst. More importantly, children and teachers appreciated the mix of activities, allowing for different types of learners and engagement levels.

A couple of drawbacks were discussed as the teachers felt the lesson plan was too tightly packed with activities to accommodate in a single hour lesson but this would be mitigated in future lessons by not having to plan in evaluation time, choosing the most essential activities for the lesson, and spreading the activities across different lessons. The largest drawback was that several of the activities were confusing for teachers to explain and for children to understand the lesson they were meant to draw from them.

Changes and Suggestions

Amongst the suggestions from children's, teacher and parent an unexpected area was to have a rounding-off of Jay's story, to include the causes of her problems and how they were finally dealt with. More expected suggestions included additional content to be added, such as case studies of personal experiences and mores specific teacher training, and that the resources should be spread to both younger and older year groups. Additionally, teachers and parents felt the resources could have delved deeper, with more complicated and varied examples, which perhaps mirrors some children's discussion of additional content in the form of real-life situations and personal experiences. Finally, parents mentioned that they would want the schools to have sufficient support systems in place to respond appropriately to children who open-up and want to share issues.

Views were also gathered from parents on what resources they would like to have received in partnership with the lesson their children received as, at this time, no parent resources had been developed. Parents agreed they would like to be informed that the lesson was taking place to encourage conversation with their children and to be prepared with a shared language and response techniques if they wanted to talk.

Classroom observations

Setting up the classroom

The majority of teachers opted to keep their children in the classroom but one school (two classes) decided to set up on the hall for more space and to allow activity areas to be set up before time. In the hall all children and the teacher sat on chairs in a large circle with a project screen to one side, coned areas were set up for paired activities. For those who remained in the classroom, either all tables were removed for students to sit in a circle on the floor or a space was cleared at the front of the classroom for sitting carpet space. Most of the teachers, or their colleagues, developed a PowerPoint or interactive white board presentation with the main learning points and activity instructions.

Ground rules

About half of the teachers set ground rules, or PSHE lesson rules, with their class before starting. This included explaining that the lesson will focus on a difficult topic, not focusing on personal experiences, and ensuring to respect each other and answers to questions given.

Introduction

At the start children were introduced to the idea and definition of mental health, with teachers explaining that everyone has mental health as we all have physical health. Each teacher spent a varying amount of time on this, with some asking for a lot of ideas from the class before an explanation was given and others spending a long time on clarifying the definition to ensure thorough understanding.

Optional ice breaker activity: fruit salad game

This was played differently across classes. In some classes students remained sitting on the floor while in others teachers got the students to sit on chairs. One teacher, who started in the classroom, took the children out into the hall with the students standing in a circle. In the majority of classes, the teacher did not remove a chair or place from the circle. Although this removed the nervous element of trying not to be the one left standing, it still appeared to work with the teacher then picking on a different child each time, or after a few rounds, to stand in the middle. They were still able to ask if the child felt nervous about being picked to stand in the middle and having to think of a question to ask. The children from these classes still talked about this game in the focus groups as teaching them that people have different feelings than they show externally and that it taught them new things about their peers. A couple of teachers skipped the fruit salad game entirely and went straight to the animation leading onto another discussion. For these classes it felt like the children had a lot of information to take in at once and had to concentrate during discussions for a much longer period.

Animation Part 1: 'Mental Health'

All classes had a discussion about the first part of the animation, some teachers asked their class to first discuss what they noticed in pairs and then feedback. The classes focused on the small and big feelings, Jay's story, and the different coping strategies. Some teachers then spent time on asking for examples of small everyday feelings, while others skipped this due to time constraints, to answer queries or follow a line of class discussion such as about coping strategies.

Activity 1: Thinking about our feelings

Teachers and children picked up on the design of the "Last time I felt..." worksheet, appreciating that it included a fingerprint character. Each teacher explained this worksheet slightly differently sometimes asking their class to describe an incident when they felt an emotion, sometimes what they did as a result of feeling that emotion e.g. "smiled at someone" and others asked children to describe coping strategies. A couple of the teachers expressed concern as to whether they were completing the worksheet correctly and for the right purpose. A few children needed additional help with this activity to try and recognise what an emotion was. All the children liked that they had the choice to write or draw for this activity.

Animation Part 2: 'Talking'

Most teachers were taken by surprise at how short this section of the animation was, with a couple forgetting to pause it in time. Teachers followed this section with a discussion on what happened to Jay, what Jay could have done and then examples of who to talk to when they have a problem. In one class the teacher asked for a show of hands if the students have someone to talk to, this felt slightly awkward as not many hands were raised. In a few classes some children struggled to think of people they themselves would talk to.

Activity 2: Talking

For the Circle of Support only one teacher did the group activity with a student playing Jay in the middle and others standing around representing people Jay could talk to, this was done in the hall with plenty of space. Other teachers went straight to the written exercise. A couple of teachers appeared to misinterpret the exercise by focusing on "trusted adult" while one explained to put one example in each circle only. At some schools, perhaps more time was needed for children to explore the many different people they can go to for support as, in most cases, the focus was on documenting specific people to talk to rather than demonstrating that there are many people to talk to if one person is unavailable or unable to help.

The classes all appeared less engaged with the "Sentence Starters Activity Sheet" however, during the focus groups, children said that they liked this activity and it gave them tools to start conversations. The engagement level was perhaps due to children not fully understanding why they were asked to do this task, where it was explicitly asked the teachers were able to explain more fully. One teacher commented that there were too many straggly bits of paper and in some classrooms the children did rip them apart throughout the rest of the lesson causing a mess to clean up. However, another teacher noted that this was a particularly useful activity as previously students had just been told to talk about their feelings, the teacher had not realised that they might need ways to start that conversation.

Animation Part 3: 'Listening'

The children really enjoyed the music at the end of this section, with one class clapping along. A couple of classes ran out of time with this section, one teacher skipped this section of the animation entirely, preferring to continue the classroom discussion taking place, and another teacher missed the feedback discussion element after each section of the animation.

Activity 3: Listening

Each teacher set up the Listening Line activity slightly differently. Some opted to arrange their class in two long lines, space permitting, and then gave each student a piece of paper with a different task on or held up a sheet to give each line of students a task, repeating the task by either swapping sheets or hold up new sheets. Other teacher selected a few pairs to stand at the front and act out their discussions to the whole class. This second option appeared to work less effectively as often students would get nervous, unable to speak in front of their class or feel comfortable acting out a response, and that not every child got a turn or it took much more of the lesson time. However, in the focus group students from all classes mentioned this activity as particularly fun or for teaching them how to be a good listener, even when watching their peers.

Summary and end of the lesson

Due to time constraints some teachers were unable to spend the time reflecting and recapping lessons learnt. However, others asked their class about what happened to Jay and what they will be taking from the lesson. The children were able to articulate Jay's story, with main points mentioned such as to "speak up when you're worried", "who to speak to" and to think about "the way we listen".

Conclusion

As a result of the feedback and evaluation, the project team made changes and additions to the resources before they were publically launched. These have been outlined below.

For teachers:

- In response to the quantity of resources, the lesson plan has been adapted to be delivered in three half hour sessions over three week, three days or over a 90 minute lesson as decided by the teacher. The project team have given options so that the teachers can choose which resources and activities to use depending on the timing, content and ability of their class ensuring the lesson plan is adaptable.
- As teachers struggled with explaining the term 'Mental Health' an additional information sheet has been produced to be included in the teachers pack.
- The confusion over the purpose of activities and how to explain them has been addressed with further detailed explanation within the lesson plan with a clearer structure to the worksheets.
- To address the teacher's request for additional training and contextual information, the resources signpost to MindEd for online training.

For children:

- As the children were confused over why they were completing certain activities, clearer aims have been included with the lesson plans for the teachers to relay.
- Where children were confused about the term "Mental Health", as above, the teachers have been given additional information to be able to more clearly and fully explain the meaning.

For Parents:

- For those parents who felt they needed to see the animation and know about the project for a shared language, the animation will be made available on YouTube and information will be circulated on how to access this.
- To provide additional techniques and tools to facilitating conversations with their children, the project team developed an additional parent and carer leaflet entitled 'tips for talking' which will be available as a free download.
- To address the parent concern of accessibility of the animation for all learning difficulties and abilities, the plans and activities have been made adaptable to need by integrating cross-curricular activities.
- To ensure the animation is accessible for those with hearing impairment, a subtitled version has been created.

Appendices

Appendix A - Formative Evaluation

Aims

The aim of the formative evaluation was firstly to feed into the development of the animation and accompanying lesson resources. It also aimed to demonstrate what activities students responded well to, which ideas were emerging and to help the iterative process of development by raising suggestions made by teacher and student feedback. Secondly, the evaluation aimed to determine the effectiveness of the workshops in producing an animation for the outlined outcomes by documenting the processes; noting the level of participation, response and engagement from the students; the feedback on the animation; and positive outcomes or changes in perception identified.

Methodology

Data were collected for the formative evaluation during the two stages of development of and feedback on the Talking Mental Health animation. Stage one involved a two day workshop run with year 6 students in one school in Newark and one school in London. The workshops aimed to gather views and ideas from students about how to explain mental health and around talking about their feelings and emotions. The workshops also allowed children's voices to be recorded for the animation and artwork produced for the animation. The second stage was a feedback session, revisiting the same students at both schools. The rough cut of the animation was shown with their initial reactions and feedback gathered.

Methods of data collection

Stage 1: observational notes on workshop activities and response, collection of student artwork

Stage 2: observational notes on initial reactions to the animation, post animation screening focus groups with 15 students, interviews with 2 teachers, and interview with 1 CRC member.

Findings

Workshop Structure

The role of the CRC was to design workshop activities to explore themes of mental health and talking alongside creating activities to facilitate the production of audio and visual imagery by the children in response to the themes. On the day the CRC felt their role was to "think about the rhythm of the two days and how we can construct it so we generate a trusting atmosphere... making it fun as well" (CRC member). The CRC put a lot of time and effort into planning the days contributing to the smooth running of the workshops at both schools. However, they also attributed this to the engagement of the children and commitment of the classroom teachers: "we're usually successful because we plan it so carefully but I was really pleased that they engaged... I thought the teachers responded well, I think again it's very clear that the engagement of the teacher really helps the class" (CRC member). The preparation before the workshops showed when timings changed or overran as activities could be easily moved around, even if the focus shifted due to a direction or theme emerging in the classroom that the team wanted to explore for the animation: "It means that even if you have to change something at the last minute, you've got these little systems in place where you can bring something else in" (CRC member).

Researcher observations summary

- Children at both schools seemed open to talking about their opinions and feelings. However, this was more obvious at School 1, every child got involved and every child gave an answer at least once. At School 2, more students appeared to get bored more easily due to some drawing activities allowing them to finish quickly, however there were enough options provided by the CRC for them to create something different when they had finished.
- During the workshop, some children appeared confused at times about why they were taking part and how the activities would lead to the creation of an animation about the topic of mental health. Therefore, in a future workshop, the researchers suggest that a detailed explanation of the reasons behind the project as a whole and where each activity will lead should be given to the students. The researchers felt the children would have been able to grasp the concepts and then explain them in their own way.
- Throughout workshop one of the classroom teachers participated in every activity alongside the team and the Teaching Assistants. This worked well in levelling the playing field between teacher and students appearing to change the dynamic of the normal classroom environment to help students relax. However, at the second school the teachers were more reluctant to get involved and were often at the side of the room completing their work. This made the atmosphere slightly less comfortable and relaxed. However, not having the teacher directly involved may have allowed for more open answers. At the first school all students focused on their teacher as being a key person to talk to and air problems with, this was less so at the second school where answer were more diverse.
- Additional effort on the part of the workshop facilitators was needed to help students think about what would happen if they did not get the desired and expected response from the person they went to talk to about their problems. This was a key challenge and fairly difficult for the children to grasp but, the researchers felt, it was important to include.

- At the end of both workshops, the teachers expressed the opinion that they too had increased their knowledge in the theme areas and knew their students better. Therefore, the researchers suggest that future workshops, and the resulting lesson materials, recommend for teachers to encourage their students to be open and explore ideas, not dismissing any answers as wrong no matter how unusual they seem.

Recommended procedure for school workshops

Based on the observations and initial feedback, recommendations were made on how to facilitate a more effective and streamlined workshop:

- Consent forms collected by RA prior to the workshop
- Thorough thought given and procedure drafted on what will be done with students who parents opt out to audio and video recording (either kept entirely separate or excluded from workshop – no audio or video to be taken at all)
- Ensure teacher has full understanding, is aware and can manage any activities/clubs that students need to attend and leave early/arrive late to ensure they are able to still fully participate
- Introduction
    - detailed explanation of what the aims of the day are, what the finished product will be, why they are filming and what the film and audio will be used for
    - allow RA time to explain the consent form and focus groups, and time for questions from children
- Activities
    - Where possible explain to students about what the aim of the activity is
    - Explain what can be used for animation, clearer instructions to avoid art not being able to be used
    - Encourage deeper understanding and conversation about feelings and emotions
    - Link creative activities back to the aims of the workshop

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Qualitative Feedback

Qualitative data was collected during the rough cut animation screening visit to the two primary schools involved in creating the animation. Methods of data collection included observational notes on initial reactions to the animation, focus groups with 15 students, interviews with 2 teachers, and interview with 1 CRC member. Key themes that emerged are outlined the in the table below and expanded upon in the following section.

Main Theme	Subtheme
Workshop Feedback	Outcomes
	Positive Comments
	Concerns
Animation Screening	Initial Reaction
	Positive Feedback
Overall Outcomes	Learning
	Change in perception
Recommendations	For children
	For teachers
	For the resources

Workshop Feedback
Outcomes

The workshop generated a huge amount of artwork and audio to choose from for the animation (see Appendix B for examples of children's artwork). The CRC member felt "the material that we gathered from the young people was of great a higher quality than I'd hoped".

The teachers, children and CRC member also felt the workshops were a great way to open up discussions and start conversations about mental health in the classroom. One child explained that "I wasn't really sure about it… but like as soon as we kind of got into it… we knew we could be straight up open with it" (School 2, Focus Group 1). One teacher also noted that those children who were usually quiet opened up within the setting of the lesson.

"There were some children in there who I noticed were quite um who are generally seen as quite reserved but through the whole exercises, through the warm up games, the communication games, they were really able to open up and talk and express themselves in different ways whether it was through art, whether it was through the small focus group talks or the whole group discussions" (Interview, Teacher 1).

While the other teacher felt the workshops had been a good way to begin further conversations as "it's made it easier to sort of start the conversations because it's now very easy to say 'oh do you remember when Tom and all the others came in and spoke to us and we talked about this or we talked about that" (Interview, Teacher 2).

Alongside this, the children seemed to learn and gain experience from the workshops in expressing themselves, new terminology and awareness of both their own feelings and the feelings of others.

"when it like finished I looked out for the people when they looked a bit sad so I'd go and help them, I think it was to do with the workshop that it like blew a new person into me, I was even kinder than I was" (School 2, Focus Group 1)

The workshops also appeared to teach the classroom teachers about having open conversations with their students and giving them time and attention.

"If a child wants to talk, you know time needs to be made, you know and I think that has brought it's kind of brought it up to my attention, more so, and I have a very very busy day but I think just making the time for a child is just so crucial" (Interview, Teacher 1)

"I think as a teacher it would make talking about it much easier... if you've not got your own children, you're not used to having those conversations with children until you have to do it in your teaching career, so it's a nice smooth way in and makes everyone feel comfortable as well so no it's been really good" (Interview, Teacher 2)

Positive Comments

Throughout the two workshops the children all appeared thoroughly engaged, able to readily answer questions, give thoughtful answers and produce detailed work. From the observational notes, it was clear that the children were able to express themselves based on the instructions for activities, such as maturely discussing the potential feelings of a case study child given, listing numerous emotions, and pictorial representing their feelings (see Appendix B for examples of children's artwork).

The children and teachers appreciated the wide variety of activities that allowed the children to express themselves in different ways. One teacher attributed the initial game to creating a comfortable and open atmosphere.

"I think the fact that when they first came in, it all started with games, and like child friendly things instantly and there was no, right we're going to sit down and talk about your feelings and there was no ownership to it, it was just like we'll see what you come up with, yeah playing the games initially settled everyone down" (Interview, Teacher2)

Mainly the children found the lesson really fun but they always explained this in terms of what it had taught them, that a serious topic was taught in a fun and interesting way.

"it was really fun, and a good experience and it's like a funner way to learn about mental health, like what could happen...it's just more fun way and like the games that we did and shows other people's personalities and things like that" (School 2, Focus Group 1).

"the mental health workshop...um it was fun and...but it helped you learn more, so, um...developing team work skills and stuff like that, um and, just it was a nice way to spend time with your friends but also learn at the same time" (School 1, Focus Group 1)

What appeared to make this work so well is that the planning of the workshop allowed it to be pitched at the correct level for the age group as well as providing a mix of engaging activities while the CRC were able to create an atmosphere in the classroom that allowed for open and honest discussions. One child explained that the workshops helped them understand mental health in a way that wasn't scary but "is appropriate for their age and can explain to them in a way that they will understand in detail but won't make them feel like um they're gonna something bad's going to happen to them" (London, Focus Group 1).

Concerns

A couple of the children did feel concerned about opening up in front of their peers feeling that they would "take it a different way" to intended (School 2, Focus Group 1). Children in one focus group also felt they did not understand the purpose of a couple of activities.

"we had to make a sound with the instruments to go with like a feeling...I didn't quite understand why we had to do that" (School 2, Focus Group 1)

"the bit where the person had to ignore it, kind of like a little bit more to understand what they was like, meant to get from it" (School 2, Focus Group 1)

Animation Screening

Initial Reaction

The children all loved seeing their creations come to life in the animation, although there were a couple of disappointed students who could not spot their work on screening.

"we haven't just done fingerprints and then keep them as memories, we've made it into a short film so I think that's made it better" (Newark, Focus Group 2)

The CRC member voiced reservations about showing rough cut versions of the animation as they expect comments about the unfinished quality but also that not all the children's artwork could go in and they do not want children to feel disappointed. But they did feel the "response was good" and that the students "understood what we were making together which was really rewarding to see" (Interview, CRC Member).

"It's always tricky that, the rough cuts really hard to show and I'm always slightly prepared because they're looking at it as you know they've contributed all their artwork and their voices and so they're they're looking for that, so however you set it up it's not always easy for them to see it" (Interview, CRC Member)

In the initial post viewing discussions, children picked up on aspects of the animation such as the different fingers prints representing how every emotion is different, that the words went with the pictures and pointing out their own artwork in the animation. A couple of children also felt Jay's story stood out and they could already articulate the whole story about her outburst in class to her friend helping her speak to an adult. One child stated "I liked to hear the other schools ideas, how they were different" (School 2, rough cut viewing feedback).

Positive Feedback

The CRC are proud of what they have produced, feeling the whole process and involvement of children has contributed to creating a suitable, engaging and innovative animation on the theme of Mental Health.

"yeah I'm really pleased, really pleased. I think it's original, it's sort of a creative take so I think, I hope teachers will respond to that. I think it looks really different to anything else that's around on the theme of mental health and I think it's really suitable for primary school age" (Interview, CRC Member)

It was really well received by the students and their teachers, with one child describing seeing their artwork come to life as "magical" (School 2, Focus Group 2). The children especially liked seeing their ideas being incorporated in the animation while the teachers felt using the children's voices was powerful. One teacher also felt that using the children's own words meant the animation was pitched at their level with them involved every step of the way. Other feedback reflected this, as children and teachers felt that a serious topic was presented in a fun way with activities, through art and partner interaction that was much more engaging than other similar lessons.

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<u>Overall Outcomes</u>

Learning

Overall the children outlined many new things learnt throughout the workshops and animation rough cut viewing. Most frequently mentioned was that they should be more open to talking not only to those closest to them but to other trusted people around them.

"I was amazed how many of them have said today that actually it doesn't need to be the closest person that you go and talk to, because they're so used to coming and talking to teachers and parents but then if they don't want to go and talk to them, knowing who they can go to, it's just reinforcing that actually it could be somebody else that they go to" (Interview, Teacher 2)

Many of the children were also able to explain their new understanding of mental health and that people deal with their worries and stresses differently. Although not always entirely accurate about mental health, still seeing it connected with negative feelings only, they were able to acknowledge that it could affect anyone and it needs to be taken care of.

"I thought this would be like about mental health sickness but I realised that not every mental health sickness is um, including the like it's, it's not when people are not right in the head, it's about feelings building and building up until you just can't take it anymore and I think it's not a really nice thing like (child's name) said to to not tell anyone about your feelings" (School 1, Focus Group 2)

"if they're going to school and they're um they're feeling something that's bothering them or makes them feel anxious or…or like, or if they're…if they're being bullied, it will make them feel anxious and they won't be, err… their selves. I think that's mental health, and I think lots of people can…um, help mental health if they um just put a little time and effort um to help people that are suffering from it" (School 1, Focus Group 2)

Many of the children spoke about how the workshop and animation taught them to help their friends and people they see who might be suffering. As they explained, if "someone comes to you, you have to listen" as it "could be big so don't ignore it" and that "you should listen as next time you might need to talk" (School 2, rough cut viewing feedback).

Change in perception

Alongside what the workshops and animation taught the children, they explained ways in which it changed their perception of mental health and emotions. Any association with mental health previously appeared to be the idea of illness, that it was a severe thing only affecting a small portion of people.

"but this has like changed my perspective, it's not always that severe and sometimes can just be little things that can affect um you in a big way" (School 1, Focus Group 1)

<u>Recommendations</u>

For children

One child had advice for other students taking part in a Talking Mental Health lesson: "[I] would say just have fun with it because…it does teach you a lot but you do have fun so you just sort of just let it…just go with it 'cos you'll have a lot of fun" (School 2, Focus Group 2)

For Teachers

Some of the children suggested that the teachers should talk to the children in smaller groups to allow them to be more open so that it is a private and confidential conversation. The children also suggested the teachers should stop the animation to ensure children did not laugh but had time to "discuss more about it and ask them for their thoughts and opinions" (School 1, Focus Group 1).

"If you take children into um... smaller groups then they can um...really discuss it more...as far as they want to go, without people saying 'Oh no, you're wrong' stuff like that...so that they give them a chance to actually say what they want to say" (School 1, Focus Group 1)

The teachers also had recommendations for their counter parts at other schools, such as suggesting they use the resources across the whole curriculum as well as "to be open-minded about it, accept it and actually give it time" (Interview, Teacher 1). They also thought that teaching in a fun way was really important for a topic like Mental Health and that there can be worth in recording the children's answers to think back on.

"just ideas to get people talking and to get people moving, because when you've been teaching a long time you kind of ditch the games and you forget about them and when someone else comes in does them you think ah yeah actually there's a lot of worth in those and as you say just having them on paper" (Interview, Teacher 2)

For the resources

From the discussions with teachers, they suggested that the resources needed to include a clear definition of mental health for teachers to stick to and additional support guiding teachers through potential disclosures from students. They also felt the lesson should give plenty of opportunity for the children to discuss the issues after each topic raised within the animation. One teacher also suggested that a separate teachers training event would be useful for them to air out concerns and clarify any queries about the topic.

"where they're able to ask questions or if they have any concerns about maybe showing the video, teaching it, what happens and what they as teachers could do, so if anyone does disclose anything or there is talk, that they feel empowered enough to be able to know that these are the routes that we go you know depending on what's being said" (Interview, Teacher 1).

The teacher also felt that there is a need to involve parents to ensure they are not taken by surprise by conversations their children want at home and to educate them on how to continue open discussions.

"if there was something that we could then say to the parents because lots of the time it'll be parents who come in and say 'my child said this and I don't what to do about it', so if there was some way that you could link it to them understanding how to talk to someone or how to listen to someone that would be a different slant but something that probably isn't covered that we haven't got any resources for at the minute" (Interview, Teacher 2)

For the Animation

The CRC Member commented that while the Talking Mental Health project tried to make the animation simple enough for teachers to be able to teach in an hour, they worried that this potentially over simplified a very complex topic.

"it's a huge problem isn't it, how to simplify it without making someone who's got a long term mental health problem look back and say this video doesn't represent me. But I don't think you can represent everybody. I think you can take, as we've done, make a sort of an

animation that acts as a spring board for discussion in a supported environment where people are able to talk about the nuance of mental health" (Interview, CRC Member)

A couple of children also commented that the animation would have been made better with the addition of their own artwork and one child was disappointed as they "expected it to be all fancy and things" with "fancy effects" (School 2, Focus Group 2).

As reflected in the Phase II qualitative outcomes, one teacher felt that the older children would like to know what happened to Jay as a result of the help she received, to have a full story.

"and then suddenly you get the end point of she went and spoke to the coach and then everything was fine eventually and maybe for the older ones where it goes after that" (Interview, Teacher 2)

Conclusion

The two development workshops in both schools were extremely successful, generating a lot of interesting and useful artwork and audio. The children at both schools were engaged and open to talking about their opinions and feelings. The creative team had planned the sessions well, allowing for changes in scheduling effectively. The rough cut viewing at the two schools was a great way of collecting additional animation artwork needed for the adapted story and for collecting feedback to continue the collaborative process of creating the animation and lesson plans. The feedback was incorporated into the final output.

Additionally to the expected creative and feedback outputs, the students and teachers also expressed several ways in which they had learnt from the workshops. The children felt more open to talking and had found new ways to cope with their emotions and moods. It had also taught them more about the term mental health and how they view the mental health difficulties of others.

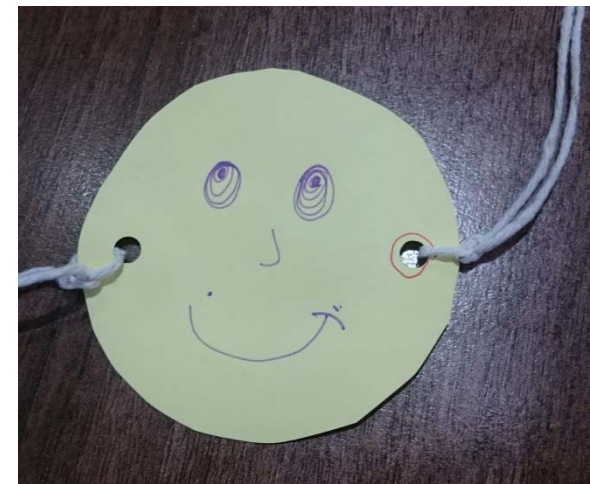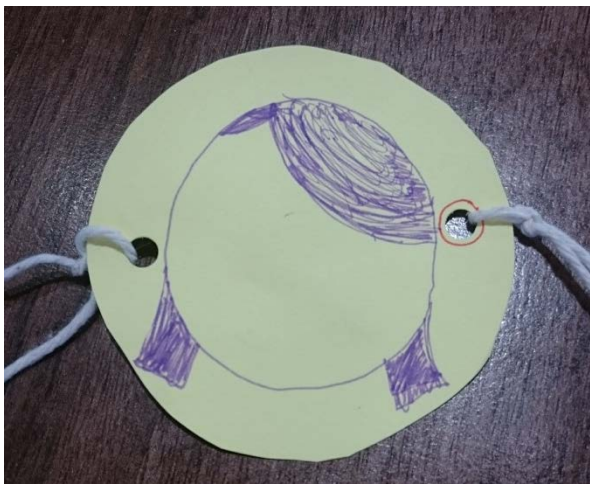# Appendix B - Formative Evaluation artwork examples

Finger print representation of feelings
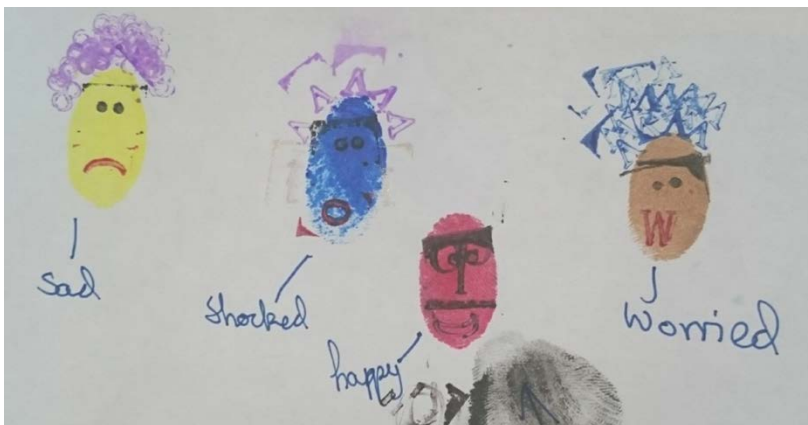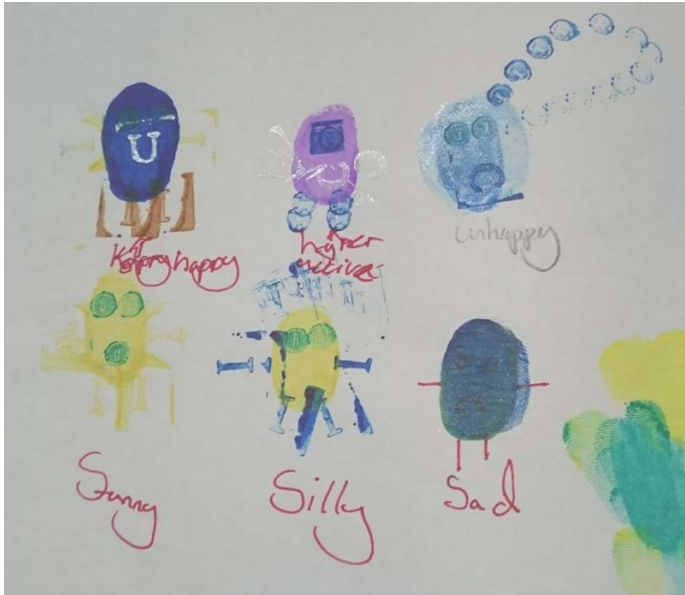
Zoetrope artwork
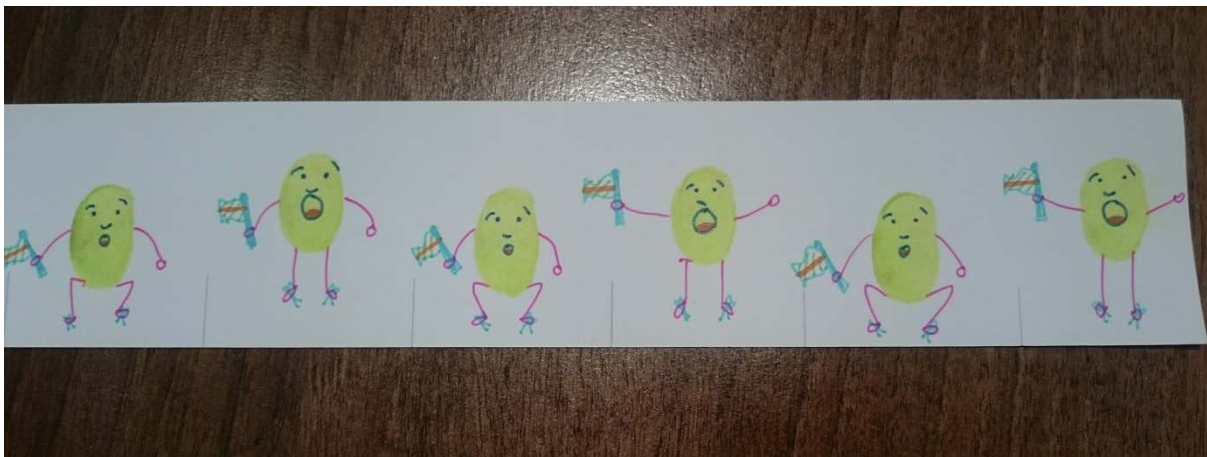
Thaumatropes

Appendix C – Summative Evaluation Questionnaire

Talking Mental Health Confidence Scale

3. If **my friend** was feeling very down, scared or worried…

	1	2	3

	Agree	Neither Agree or Disagree	Disagree
I would talk to my friend about how they feel	○	○	○
I would know what to say to my friend	○	○	○
I would know where to get advice on what to do	○	○	○
I would talk to my teacher	○	○	○
I could be a good friend to them	○	○	○

4. If **I** was feeling very down, scared or worried…

	1	2	3

	Agree	Neither Agree or Disagree	Disagree
I would talk to my parent(s) / carer(s) about how I feel	○	○	○
I would talk to my teacher about how I feel	○	○	○

I would talk to my friend about how I feel	○	○	○
I would know where to get advice on what to do	○	○	○

Talking Mental Health Lesson Feedback

5. How much do you agree with the statements below?

My 'Talking Mental Health' Lesson was…

1	2	3

	Agree	Neither Agree or Disagree	Disagree
Easy to understand	○	○	○
Useful	○	○	○
Interesting	○	○	○
Fun	○	○	○

My 'Talking Mental Health' Lesson was…

1	2	3
Too Short	**About the right length**	**Too Long**

6. The best thing about the 'Talking Mental Health' Lesson was…

_____

_____

7. The worst thing about the 'Talking Mental Health' Lesson was…

_____

_____

8. What else would you have liked the 'Talking Mental Health' Lesson to include?

_____

_____

Appendix D – Summative Evaluation Interview Topic Guide

TOPIC GUIDE

Evaluation of Talking Mental Health

Phase 2- Parent Focus Groups

- What Talking Mental Health resources has your child used?
    - Where did you/they use them?
    - Who did you/they use them with?

- What do you think of the Talking Mental Health animation?
    - What do you like about it?
    - What do you not like about it?
    - What would you change?

- What do you think of the other Talking Mental Health materials?
    - What do you like about them?
    - What do you not like about them?
    - What would you change?

- Have animation/ other materials had an impact on your child?
    - Has Talking Mental Health has any impact on your child's mental health knowledge?
    - How easy/ difficult does your child find it to talk about mental health?
        - Has Talking Mental Health had an impact on that?

- Have the animation/ other materials had an impact on you?
    - Has Talking Mental Health has any impact on your mental health knowledge?
    - How you feel about talking about mental health with your child?

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TOPIC GUIDE

Evaluation of Talking Mental Health

Phase 2- Teacher Focus Groups

- Which Talking Mental Health resources have you supported your students to use?
  - Where did you/they use them?

- What do you think of the Talking Mental Health animation?
  - What do you like about it?
  - What do you not like about it?
  - What would you change?

- What do you think of the other Talking Mental Health materials?
  - What do you like about them?
  - What do you not like about them?
  - What would you change?

- Have the animation/ materials had an impact on your students?
  - Has Talking Mental Health had any impact on your student's mental health knowledge?
  - How easy/ difficult do your students find it to talk about mental health?
    - Has Talking Mental Health had an impact on this?

- Have the animation/ other materials had an impact on you?
  - Has Talking Mental Health has any impact on your mental health knowledge?
  - How you feel about talking about mental health with your students?

TOPIC GUIDE

Evaluation of Talking Mental Health

Phase 2- Young Person Focus Groups

- What Talking Mental Health resources have you used?
    - Where did you use them?
    - Who did you use them with?

- What do you think of the Talking Mental Health Animation?
    - What do you like about it?
    - What do you not like about it?
    - What would you change?

- What do you think of the other Talking Mental Health materials?
    - What do you like about them?
    - What do you not like about them?
    - What would you change?

- Have the animation/ materials had an impact on you?
    - Has Talking Mental Health had any impact on your mental health knowledge?
    - How easy/ difficult do you find it to talk about mental health?
        - Has Talking Mental Health had an impact on this?

Appendix E – SPSS table of results

Pre/Post-Survey comparison, paired t-tests
Null hypothesis: the paired population means are equal, α = 0.5

Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	@1Talktomyfriend	1.15	165	.392	.031
	@1T2Talktomyfriend	1.13	165	.385	.030
Pair 2	Knowwhattosay	1.45	164	.568	.044
	T2Knowwhattosay	1.30	164	.545	.043
Pair 3	Getadvice	1.57	165	.709	.055
	T2Getadvice	1.32	165	.550	.043
Pair 4	Talktomyteacher	1.48	165	.668	.052
	T2Talktomyteacher	1.55	165	.702	.055
Pair 5	Beagoodfriend	1.04	165	.188	.015
	T2Beagoodfriend	1.04	165	.218	.017
Pair 6	@2Talktomyparents	1.24	164	.497	.039
	@2T2Talktomyparents	1.21	164	.476	.037
Pair 7	Talktomyteacher2	1.73	165	.750	.058
	T2Talktomyteacher2	1.59	165	.740	.058
Pair 8	Talktomyfriend	1.58	165	.708	.055
	T2Talktomyfriend	1.39	165	.641	.050
Pair 9	Getadvice3	1.51	164	.678	.053
	T2Getadvice3	1.37	164	.597	.047

Paired Samples Correlations

		N	Correlation	Sig.
Pair 1	@1Talktomyfriend & @1T2Talktomyfriend	165	.558	.000
Pair 2	Knowwhattosay & T2Knowwhattosay	164	.540	.000
Pair 3	Getadvice & T2Getadvice	165	.475	.000
Pair 4	Talktomyteacher & T2Talktomyteacher	165	.721	.000
Pair 5	Beagoodfriend & T2Beagoodfriend	165	.564	.000
Pair 6	@2Talktomyparents & @2T2Talktomyparents	164	.641	.000
Pair 7	Talktomyteacher2 & T2Talktomyteacher2	165	.727	.000
Pair 8	Talktomyfriend & T2Talktomyfriend	165	.652	.000
Pair 9	Getadvice3 & T2Getadvice3	164	.535	.000

Paired Samples Test

		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	@1Talktomyfriend - @1T2Talktomyfriend	.024	.365	.028	-.032	.080	.852	164	.395
Pair 2	Knowwhattosay - T2Knowwhattosay	.146	.534	.042	.064	.229	3.509	163	.001
Pair 3	Getadvice - T2Getadvice	.255	.659	.051	.153	.356	4.959	164	.000
Pair 4	Talktomyteacher - T2Talktomyteacher	-.073	.513	.040	-.152	.006	-1.822	164	.070
Pair 5	Beagoodfriend - T2Beagoodfriend	.000	.191	.015	-.029	.029	.000	164	1.000
Pair 6	@2Talktomyparents - @2T2Talktomyparents	.037	.413	.032	-.027	.100	1.135	163	.258
Pair 7	Talktomyteacher2 - T2Talktomyteacher2	.139	.551	.043	.055	.224	3.250	164	.001
Pair 8	Talktomyfriend - T2Talktomyfriend	.182	.566	.044	.095	.269	4.126	164	.000
Pair 9	Getadvice3 - T2Getadvice3	.146	.619	.048	.051	.242	3.027	163	.003