**Championing mental health in schools with *Book of Beasties:***

***The mental wellness card game***

Michelle Jayman and Annita Ventouris

**Supporting children’s mental health and wellbeing in schools**

Last year’s *State of the Nation* report (DfE, 2019a) on children and young people’s wellbeing indicated that the majority were relatively happy with their lives; however, many were not. This is starkly illustrated by the revelation from 155 English schools that 191 of their primary-aged pupils had self-harmed on school premises in the previous four years (Thomas & Titheradge, 2019). From September 2020, the new relationships and health curriculum (DfE, 2019b) places the spotlight firmly on schools to promote wellbeing and mental health, and support those experiencing difficulties. Interventions which help increase children’s emotional literacy and promote wellbeing are a crucial component of school-based mental health strategies.

**The *Book of Beasties* intervention**

The aim of *Book of Beasties (BoB) – The mental wellness card game* is, ‘to inspire the conversation, normalise the subject [of mental health] and make it less daunting when experiencing difficulties’ (Book of Beasties, 2019, p.2). *BoB’s* ethos is underpinned by the belief that every child should have the confidence to talk openly about their emotions and mental health**.**

*BoB* is a manualised programme, delivered by trained school staff to small groups of (up to five) children and can be implemented as a universal intervention or with selected pupils. Five, one-hour sessions are run consecutively with the same cohort on a weekly basis. Core elements of the game are standard but there is flexibility to adapt play to suit the needs of each unique group. The game introduces 10 characters – the ‘beasties’ - each one embodies features (e.g. self-consciousness or lack of energy) which may be associatedwith emotional difficulties (e.g. anxiety or depression). The objective of the game is to help as many beasties as possible to overcome their worries by collecting special cards depicting ‘items’ that can be of assistance (for example, ‘Bellows’ help with calmer breathing); or a particular ‘comfort’, which can be a person, place or object (for example, ‘French rabbit’ is a cuddly toy, reminiscent of a favourite teddy a child would typically have). There are linked wellbeing activities (‘action’ cards) embedded in the game, for example, deep breathing exercises (practised in a fun way by making paper boats and blowing through straws to race them). Other activities include yoga, origami, arts and crafts, and mindfulness exercises; these are sensory-focussed and involve active learning.

**The pilot study research**

This was exploratory, comprising a single case school. Four children (two boys and two girls) attended the five-week programme. The researchers’ main interest was to investigate the social validity of the programme; the acceptability, fitness of purpose, and satisfaction with the sessions perceived by the children, school staff andparents/carers. This type of preliminary research into a new and emerging approach utilises an exploratory method to help form the foundations for future studies investigating intervention effectiveness.

A focus group with the four *BoB* recipientswas undertaken*.* Focus groups can offer a less intimidating and a more supportive research encounter for children than one-to-one interviews as a group scenario can help mitigate perceived power differentials. A drawing activity was also incorporated so that children were not limited to verbal responses. Observational data from the five *BoB* sessions and interview data from school staff and parents/carers were also collected. Thematic analyses of pupil and adult data revealed consistent findings. Overall, *BoB* was perceived as ‘fun’ and ‘valuable’. *BoB’s* ‘playful-learning’ approach encouraged empathy and pro-social behaviours towards the beasties and between players. Greater emotional awareness and ability to regulate emotions was reported; children had adopted some of the calming exercises practised in the sessions in everyday situations (e.g. deep breathing before a test). Findings will help inform the design of a full-scale evaluation to examine *BoB’s* effectiveness and explore underlying processes.

**‘Real world’ outcomes**

Evidence-informed practice, derived from quality research, should be embedded in whole school approaches to promote and support the mental health and wellbeing of all children and young people. This requires the proliferation of robust evaluation case studies to share with schools to facilitate best practice and evidence-informed commissioning. The pilot study discussed in this article is a step in this direction and planned, further research on *Book of Beasties* will continue to address this research agenda.

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**The authors**

**Dr Michelle Jayman** is a lecturer and researcher at the University of West London. She is a Convenor for the British Educational Research Association’s Mental Health, Wellbeing and Education Special Interest Group and a Champion for the British Psychological Society Education Section. She is passionate about promoting and supporting mental wellbeing for all in education. Her research interests include mental health, resilience and programmes to improve learner outcomes. She has worked on several projects to support children’s wellbeing and help students reach their full potential.



**Dr Annita Ventouris** is a Lecturer at the University of West London, School of Health and Social Sciences. Her research interests span from applications of psychology in educational settings, intergroup and peer relations to child and adolescent psychosocial development and well-being. She is also conducting pedagogical research on factors affecting Higher Education students’ well-being. She is a Chartered Psychologist, an Associate Fellow of the British Psychological Society and a Fellow of the Higher Education Academy.

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**Questions for discussion**

1. How will the introduction of the new health and relationships curriculum benefit schools in terms of developing mental health and wellbeing strategies and embedding a whole school approach?
2. What steps can be taken to help ensure implementation decision-making in schools regarding mental health and wellbeing interventions is based on the strength of the evidence?
3. How can researchers make sure that the views and opinions of children and young people are prioritised in evaluations of interventions/services that affect them?