THE UNIVERSITY OF HULL

Developing aspirations: the role of schools and teachers in the facilitation and maintenance of young peoples' aspirations

Being a Thesis submitted in partial fulfilment of the requirements for the for the degree of Doctor of Clinical Psychology

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By

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Overview

This thesis portfolio comprises of three parts:

Part One - Systematic Literature Review

The systematic literature review explored the effectiveness of community-based interventions available in the United Kingdom for young people with social, emotional and behavioural difficulties. A systemic search identified 10 studies detailing various interventions. A narrative synthesis of the findings is presented, incorporating methodological critique throughout. Conclusions from the evidence base are drawn, with implications for future research.

Part Two – Empirical Paper

The empirical paper explored the opinions and experiences of aspiration development in the education system. A qualitative approach was adopted, particularly thematic analysis. This included the perceptions of students, teachers and an unemployed people. Five main themes and nine subthemes were identified, acknowledging the importance of aspirations, the development of the individual, interactions, societal factors and new methods. The findings are discussed relative to empirical and theoretical literature, and considering the implications of the results and the avenues for future research.

Part three – Appendices

The appendices provide supporting documentation that are important for the systemic literature review and empirical paper, plus a reflective statement and an epistemological statement**.**

Total Word Count: 18, 463 (including abstracts, tables and appendices excluding references and appendices)

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PART ONE

Systematic Literature Review

Effectiveness of Community based interventions for young people with difficulties with social, emotional and behavioural well-being: A systematic review

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Effectiveness of Community based interventions for young people with difficulties with social, emotional and behavioural well-being: A systematic review.

Abstract

The community environment allows the opportunities to build psychological interventions to groups of young people in the United Kingdom. However, research into the effectiveness of such interventions is limited. The current review aimed to find and review interventions designed to support young people with social, emotional and behavioural wellbeing difficulties delivered in UK community settings. Ten papers were included describing four types of intervention approaches. It was found that integrated groups supporting families, young people and schools had the most effective impact on young people. Results from further studies are less clear. The review highlighted a need to develop programmes in the community and need to implement robust research, with longitudinal studies with larger samples in order to effectively evaluate which interventions are most helpful in community environments.

Key words: *Community, Intervention, Systematic Review*

Introduction

Social, Behavioural and Emotional Difficulties (SEBD) are a common problem amongst the younger population (Herpertz-Dahlmann, Buhren & Remschmidt, 2013). United Kingdom governmental reports in 2014 highlight that 10% of children and young people between the ages of 5-16 were diagnosed with a psychological disorder (Green, Mcginnity, Melzter, Ford & Goodman, 2005). The focus of emotional well-being in young people in the U.K is a growing research priority. Mental health problems in children and young people can be long-lasting, as fifty percent of mental illnesses in adulthood begin before the age of fifteen and seventy-five percent by their late teens (aged eighteen) (Jones, 2013). Difficulties in young people can lead to impairments in personal and family relationships, and educational progress that are maintained in later life (Kessler et al., 2007). Evidence based preventative and treatment focussed programmes are required that are accessible, applicable to a wide range of difficulties and based on holistic approaches to improve mental health to support young individuals, systems supporting them and society as a whole. The current review aims consider such approach and to explore 'community interventions', in this review such interventions are considered to focus on the system that holds responsibility for the wellbeing of young people. These interventions will look to integrate all stakeholders in young individuals care, parents, teachers and associated professionals.

This lack of early intervention proves costly to the economy (NHS England, 2015). Significant lack of funding due to financial constraints to early intervention services have raised concerns (Department of Health and NHS England, 2015) as the current model focuses on the access and support narrowly on clinical outcomes and there is a risk of overlooking the wider influences on the wellbeing of young people. Mental health problems in young people result in significant financial costs to schools, health and social care (Knapp et al., 2016).Costs to public services used by 'difficult' individuals are reportedly ten times higher than those with no 'difficulties' (Donovan & Spence, 2000). Investing in interventions for children, such as those provided in Child and Adolescent Mental Health services (CAMHS), is important to support young people to develop well-being (Department of Education and Skills {DfES}, 2005). Emphasis is being placed on the importance of schools, parents and professionals working together to maintain a

balance between generating meaningful outcomes and to identify the needs of young people, without focussing solely on mental health diagnoses (Mental Health Taskforce, 2016).

However, young people have the worst access to mental health services (Mcgorry, Bates & Birchwood, 2013). The current mental health model tends to provide access to young people with severe and complex problems (Wynne et al., 2016). Access to services may be delayed because of low resource and limited information and services lack a holistic understanding of young people's needs. Young people in the early stages of mental illnesses who may not fit diagnostic criteria, may be overlooked by services due to the lack of holistic preventative approaches available (Murphy & Fonagy , 2012) or of those young people who access services and receive treatment, fail to respond or would terminate the therapy before treatment was complete (Farrell & Barrett, 2007). The nature of local commissioning leads to a complex system and limited communication between agencies. Coupled with budget reductions, this can lead to children and young people falling through the net and not receiving appropriate support. Traditional interventions targeting young people are not easily accessible for all of the young people and families whom may benefit; therefore, it is important for services to consider innovative alternatives and methods of delivery.

Improving mental health outcomes of U.K children and young people requires intervention at different levels (Burns et al, 1995), not only focussing on the individual but also centring on the societal aspects influencing psychological distress (Lee, Draper & Lee, 2001). More community, psychosocial interventions have been introduced as services highlighted the importance of communities influencing resilience and facilitating interventions to target mental health difficulties. Young people benefit from socialisation (Kirk, 2007) and are particularly responsive to peer focused learning (Kulic, Dagley & Horne, 2004). Group based interventions are considered more effective than individual therapy, as groups are less threatening and closer to their everyday lives (Hoag & Burlingame, 1997). The most effective interventions are administered at a community level, focusing on the individual, peer, school and the wider society (Henggeler and Schoenwald, 2011).

The provision of evidence-based treatment programmes which can be delivered with minimal funding and that can be applied to the variation of young peoples' problems is important (Wynne et al., 2016). New models provide alternatives to traditional treatments

and adopt more community focussed care principles (Darwish et al., 2006). These approaches, build on holistic models, aim to develop the strengths of young people, their families and the local communities, to increase the different levels of support. Henggeler et al., (1997) argues that making changes to a young person, in an environment that is familiar to them will have a more positive impact than bigger changes in environments that are unfamiliar to them.

Caterall et al (1999) found that participation in community arts projects resulted in young people reporting an increase in creativity, reduction in dropout rates, improved social skills and improved educational attainment. Engaging in community-based interventions has a significant role to play with promoting mental health and well-being. Programmes are reported to help build self-esteem and confidence.

The NHS Health Service Advisory Report (1995) on Child and Adolescent Mental Health services (Together We Stand) illuminated the importance of effective integration between young people, families and professionals working in the community. Although limited resources in mental health services resulted in this model being difficult to adopt (Parkman et al., 1997) a youth focussed, community based model can serve to reduce the costs to services of mental illnesses in adulthood (Mueser, Bond, Drake & Resnick, 1998).

Models of early intervention and treatments are gaining momentum in Australia (Patton, Hetrick & Mcgorry, 2007) and Canada (Brock, 2010). Models are derived from a developmental- ecological framework (Broffenbrenner, 1977) and concentrate on factors influencing how young people think, interact, feel and how proximal and distal factors can influence behaviours. The 'Jigsaw' project in Ireland focussed on intervening in the multiple intersecting systems influential in the young people's development (Illback, 2010). The programme reviewed how current services could be more accessible and to alter the thinking of communities in relation to young people and their needs.

Evolving evidence recommends that community focussed preventative approaches offer solutions that are cost effective and can alleviate the economic burden of mental health difficulties (Mihalopoulos & Chatterton, 2015). Effective programmes involving schools, parents and communities are not only helpful for the individual's mental health but can lead to improvements in social development, academic performance and psychological well-being (Barry et al., 2009). Community level interventions provide a framework that can positively affect whole populations (Garrett et al., 2011).

Current research illuminates the need for improved quality of research into young people well-being initiatives as they may also act as an early intervention referral pathway for mainstream mental health services and other relevant agencies.

There is a distinct lack of interest in the area, and this review aims to integrate findings from the limited studies available. Most existing literature reports diverse findings, varieties of different interventions, and a lack of controlled evaluations. Furthermore, a significant limitation of the existing literature is that the focus is on interventions delivered outside of the United Kingdom (Calear & Christensen, 2010; Merry & Conley, 2011). Although there is evidence that community interventions show promise in the United States and Australia, the disparity of 'community' contexts between the countries results in the data being difficult to generalise to the United Kingdom (Horowitz & Garber 2006).

Literature in this area is difficult to integrate, as the understanding of 'community' appears conflicting. Heterogeneity of methodology is endemic. Community focused mental health programmes do not often replicate the 'gold standard' randomised controlled trials. Methodological problems include vague details of interventions, insufficient evaluation of programme implementation and lack of measurement using recognised measurement tools. Such interventions lack the financial resources to create scientific evidence (Tolan & Dodge, 2005), and as a result it is difficult to examine the effectiveness of such interventions.

Communities in the United Kingdom are beginning to provide interventions to support young people's social, emotional and behavioural well-being. However, programmes are not developed based on effectiveness. Experiments and gold standard methods of analysis prove hard to implement in community settings (Dodge, 2009). Because of the significant lack of research in this area there have been no systematic reviews evaluating the effectiveness of interventions delivered in U.K communities.

This review aimed to understand and identify interventions used to support vulnerable young people with emotional, behavioural and social functioning difficulties in the U.K. The review will continue to assess the design, methods and interventions used.

The following research questions were identified:

1. What empirically tested community-based interventions are available to address Social, Emotional and Behavioural difficulties in the U.K?
2. What do these interventions entail?
3. Are the interventions effective?

Method

Data sources and search strategy

Electronic databases (PsycInfo, Medline, CINAHL and Scopus) and government policies and websites were searched for published articles reviewing interventions provided in the Community. The search terms used were as follows: (*Indicates truncation):

((Adolescent* Or Child* Or Youth Or "young person"* Or Teen* Or Pupil* Or Student* Or Learner*) N3 (Psychol* Or "Mental* Health" Or Emotion* Or Resilien* Or Depress* Or Anxi* Or Transition*))And (Uk Or United Kingdom or Britain Or England Or Wales Or Scotland Or Ireland) And ((Prevent* Or Intervention* Or Program* Or Course or Therap* Or Initiative*) N3 (Communit* or societ* or social*))

A time limit was set of 2000 to 2017. The earliest date was chosen to coincide with the Department of Health expressing the importance of social cohesion in healthcare (DoH, 1999). All papers were hand searched to identify other appropriate papers. A bibliographic review of papers was also conducted.

Exclusion Criteria

Articles were not included if they:

1. Were not published in the English language due to time and financial constraints around translation;
2. Were not peer – reviewed to ensure the quality of evidence;

3. Review articles were not included with no recognised procedure or data collection;

4. Participants over the age of 18 were not used. The current review focussed on interventions for young people, therefore any studies including;

5. Involved interventions in hospitals or acute settings, or within mental health services were omitted. The current study focused on innovative methods that work with participants and their supporting systems (families and teachers);

6. Review articles with no recognised procedure or data collection;

7. Studies published before the year 2000, the Department of Health document focussing on increasing social cohesion in healthcare was released therefore this research aimed to capture interventions developed or researched after this time.

8. Qualitative results. The current study aimed to measure the effectiveness of interventions and quantitative results were easier to compare and would provide a standardised result of the change process following the identified interventions.

Given the expected variability in the methodology, inclusion criteria in terms of this study were not stringent. Reporting a diverse range of study quality, rather than restricting the search, was best felt to represent the research field.

Within the current view 'vulnerable young people' included those considered to have social, emotional or behavioural difficulties.

*Data extraction and synthesis*

Data extracted from the current studies included the study aim, design and the details of the chosen sample, interventions used (setting, components and formats used), variables measured, evaluation methods and results. Data was synthesised from a qualitative perspective. A meta-analysis was not considered due to the heterogeneity of measures, interventions and analyses used.

Details of included and excluded studies

The Preferred Reporting Items for systematic Reviews and Meta- Analyses (PRISMA) (Moher, Liberati, Tetzlaff & Altman, 2009) process was followed to identify articles for inclusion (Figure 1). The search strategy retrieved 1485 articles, limited to 1368 when papers that were not academic journals were removed. Of those, 301 were deemed irrelevant when the year limits were applied. Two of the remaining 1067 were not considered as they were not written in English language. 501 papers were removed as they reported qualitative, rather than quantitative findings. A further 507 studies were deemed irrelevant following a review of titles and abstracts, leaving 57, of which 22 were excluded following a full paper review. 12 of the final 22 papers were removed, as they were earlier revisions of the studies used, leaving 10 identified from electronic databases. No further studies were found through hand searching the reference lists.

Figure 1. Flowchart detailing the article selection process.
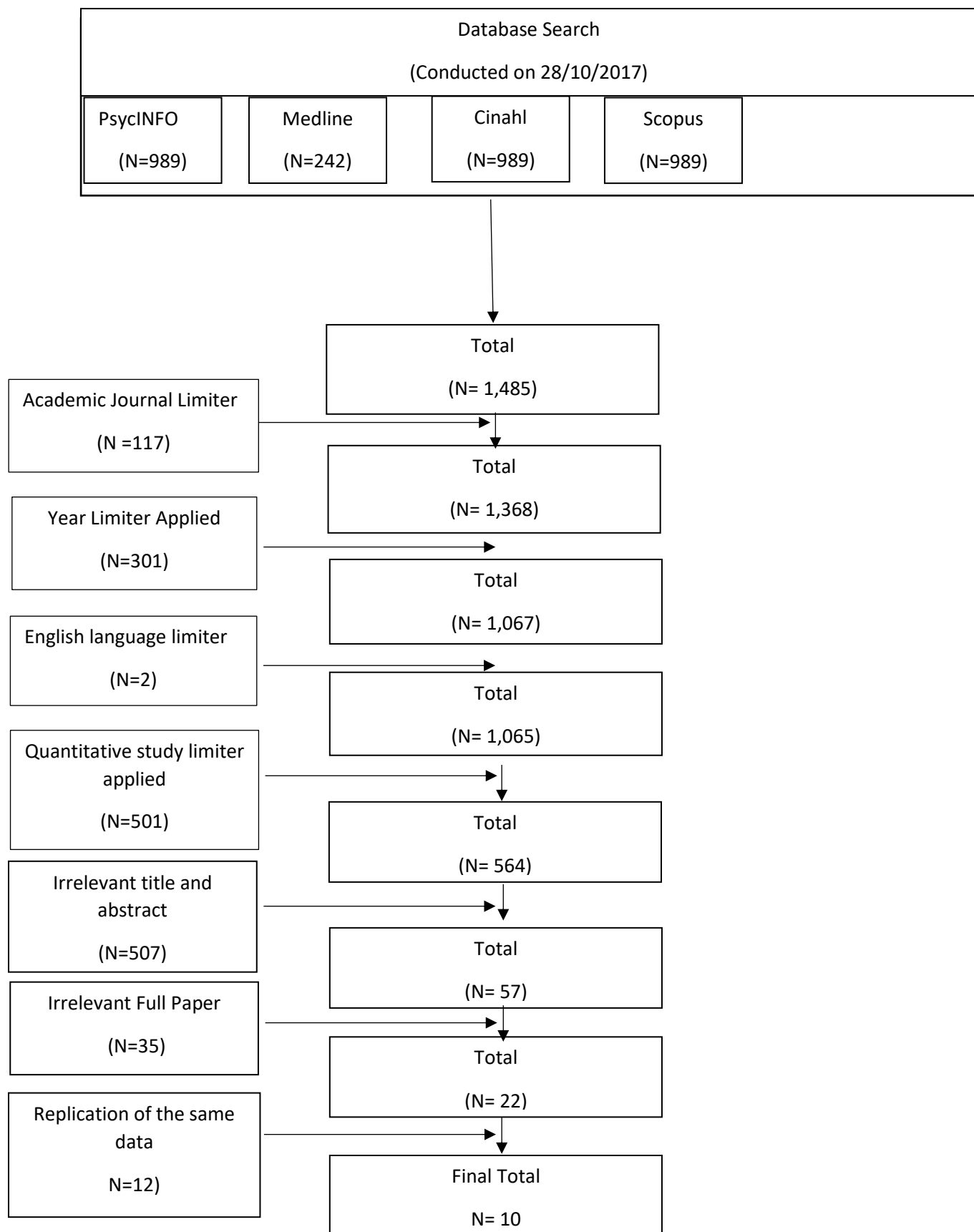
Results

Overview of descriptive characteristics of studies included in this review

Two studies reported data on family focussed interventions delivered in the homes of individuals needing care (Humayun et al. 2017; Wynee et al., 2016). This intervention method has been researched in the United States but these are the first two British investigations into this community-based approach. Both studies adopted different approaches to the therapy (Table 2).

Three studies focused on different approaches to parental based interventions and supporting young people and linked in with the school to support young people. The Scally Wags Scheme (Lovering et al 2006) is a community based early intervention programme for young people with behavioural, emotional and social problems. It integrates support in the school and the home and provides teaching for parents to support young people and improve emotional well-being. Similarly, the FamilySeal project (Downey & Williams, 2010) develops skills of young people in positive environments. This scheme aims to integrate the support in school and interventions within the home to bring teachers and parents together to maintain well-being and emotional competence of the young person. One study focussed on supporting at-risk children for the transition between primary and secondary school (Yadav, O'Riley & Karim 2010). Participants were recruited before leaving primary school and provided group support for anger management, managing friendships and improving relationships with parents.

Three interventions measured the effectiveness of parental education programmes provided in the community by voluntary organisations to reduce the difficulties faced by young people with conduct disorder. Gardener, Burton and Klimes (2006) conducted controlled trials for the Family Nurturing Group. The study examined 76 children who were considered to have conduct problems between the ages of 2 and 9. The Little Hulton Project was a pilot study focussed on intervening with families and young people in the community. The project-educated parents, ran clinics to share challenges, trained staff supporting young people (White, Agnew & Verduyn, 2002). This paper evaluates the effectiveness of this innovative way of working. Aldred, Green & Adams (2004), adopted an approach to measure the effectiveness of parental interventions supporting young people with autism.

The final paper two papers highlighted interventions that could not be categorised measures the effectiveness of an art project to improve young people's well- being (Hampshire & Matthijsse (2010). Simpson et al (2010) measured the effectiveness of a community based intensive therapy team to support young people with mental health difficulties.

Table 1 Characteristics of the studies included in the review.

Author (Year)	Aims	Design	Sample	Intervention	Measures
Aldred, Green and Adams (2004)(Manchester, UK)	Aim to address parental communication skills in comparison to routine care.	Randomised Control Trials Outcomes measured at 12 months.	Target ages 2.0 - 5.11 years with a clinical diagnosis with autism spectrum disorder. N = 28 children with autism were recruited from the North West of England	Targeted social communication. Includes communication therapy skills, development with psycholinguistics and communication intervention difficulties.	Autism Diagnostic Interview (ADI) Autism Diagnostic Observation Schedule (ADOS) Vineland Adaptive Behaviour Scale. Mcarthur Communicative Development.
Hampshire & Matthijsse (2010) (London, UK)	Aiming to use community projects to improve mental health, well-being and social inclusion using a governmental sing up programme	Focus on improving young people's social and emotional well-being. Using arts participation to impact and health and well-being more broadly.	Mean age = 10.5 years. 41 children in the Sing Up Group 51 children in the control group	Weekly singing rehearsals. Singing with children, help serving break-time refreshments, watched performances and joined in post-performance celebrations.	Idiosyncratic Measures Taken from Schaefer – McDaniel (2004) with focus on social networks and sociability; trust and reciprocity and sense of belonging/place attachment. Qualitative measures

Downey and Williams (2010))(Dorset, UK)	Aim is to address SEAL themes corresponding to emotional and social aspects of learning. New Beginnings: Empathy, self-awareness, motivation and social skills Going for Goals: Motivation, self-awareness Getting on and falling out. Self-Regulation, empathy and social skills. Good to be me: Self-awareness, self-regulation, empathy.	Targeted school children Aged 7- 11 N = 37 Parents 52 Teachers Ratings from a none concern group and a concern children group	Works with teachers, parents and carers to develop a young person's sense of social, emotional competence, self-awareness, managing feelings, empathy, motivation and social skills	Emotional Literacy Checklists

Gardener, Burton & Klimes (2006) (Oxford, UK)	The Webster-Stratton programme employs a collaborative approach, with an aim to build parents strength and expertise.	RCT –Follow up at 8, 18 months. Pre and post intervention assessment with control group. Family included in analysis.	Aged 2- 9. Children with conduct problems N=76 referred via the Family Nurturing Network	Webster – Stratton Incredible year's video. 14 week group programme focuses on cognitive behavioural principles for managing behaviours	Measures of child behaviour Eyberg Child Behaviour Inventory (ECBI;p)
Humayun et al (2017) (London, United Kingdom)	To provide an effective intervention for young people with youth offending and anti- social behavioural difficulties. To provide an inexpensive intervention for adolescents.	Data collected over a three-year period. Intervention lasts 45 minutes.	Ages 11 – 18 N = 57 individuals between the ages Youth Offenders with presenting problems, needs intensive engagement and complex and diagnosable mental health.	Five Phases Engagement Motivation Assessment Behaviour Change Generalisation	Health of the nation outcome scales for children and adolescents (HoNOSCA) Parent Youth Relationship Questionnaire Observed Interactions

Lovering et al., (2006) (United Kingdom)	A Pre and Post Intervention assessment.	Aged 3-7 Behavioural, emotional and social problems N = 346 children	Child was part of an intervention plan. Tailored plans for each child over a space of six months. Key worker assigned to the child for 3 hours in the home and five hours in the school each week. Teachers encouraged using behavioural management techniques. Local Holiday programme for children and parents of 15-hours.12 session parenting curriculum. Assessed at pre and post intervention	Pre and Post Intervention Measures Eyberg Child Behaviour Invetory(ECBI) (p and t) + in child disruptive behaviour + problematic behaviours Maintained at 6 month follow up

Simpson et al., (2010)	Work with young people in their own homes.	Varied timing of intervention ranging from a 45 minute discussion to a full day.	Aged 11- 17. N = 57 individuals Difficulties ranging from Mood disorders, self-harming behaviours, psychosis, eating disorders, anxiety disorder, autistic spectrum disorder PTSD.	Case management Individual Support Psychoeducation for patient and families Support in accessing other agencies Group Therapy Social Integration Supervision Family Therapy	Health of the Nation Outcome Scales for Children and Adolescents (HoNOSCA)
Yadav, O'Reilly & Karim (2010) (England, UK)	Whether a mentoring intervention is helpful during the transition between primary and secondary school for "at risk" children. Mentoring used to impact on the behaviour of children and the inclusion of families to help alleviate adverse circumstance.		Participants in year 6 mean age 10 years and 11 months. N = 86 (59 males and 27 females)	Delivered over 10 months during school semester and during summer holidays Children accessed group work for anger management, friendship groups. School, home based support and relationships linked with schools.	Strengths and Difficulties Questionnaire (SDQ) Self Esteem Scale Pre and post Intervention

Wynne et al.,(2016) (United Kingdom)	To target the behaviours of adolescents with social, emotional and behavioural difficulties	Quasi Experimental Pre and Post group. Children with social, emotional and behavioural difficulties	Young People Aged 11-17 Parents Aged 33 – 64 years. N= 93 adolescents 106 parents and guardians (82 Mothers; 24 fathers)	Two groups run in parallel over 8 weekly sessions. Parent Plus adolescent programme and Working things out adolescent programme	Emotional and behavioural functioning Strength and difficulties questionaire(SDQ;p;c) + drop on parents reports of scores, emotional symptoms decreased. Better adolescent functioning observed post-test. Measurement of family functioning Functional measure of behaviour (FAD; p; c) = in family functioning between pre and post-test analyses. Revised Childrens Anxiey and Depression scale (RCADS; p; c) + improvements mare on the RCADs on the parents reflections = reported on the young people's RCADS

					Depression, anxiety and stress (DASS; c) = no significant observations
White, Agnew & Verduyn (2002) (United Kingdom)	To provide a service to provide successful interventions to families, maximise liaison with communities to improve parental coping and children's behavioural difficulties.	Pre and Post Group intervention. 6 month follow up, 12 month follow up and 6 month follow up for non-group attenders	Preschool children with emotional and behavioural problems. Parenting interventions and multi-agency training. Parental Surviving Course = 56 parents Clinic = 33 Young People's referrals.	Parenting groups (Seven weeks, weekly sessions with a cognitive behavioural focus - based on Webster Stratton, 1990 programme. Consultation (Monthly planning meetings held at community nursery clinics) Training sessions (provided monthly in two formats: Workshops for smaller groups. Lectures for larger groups)	Parent group measures- Depression measures Beck's Depression Index (BDI;p) Self-esteem Inventory (SEI;p) Child Behaviour Checklist (CBCL;p), Eyberg Child Behaviour Inventory (ECBI;p), The Problem Behaviour Checklist (PBCL;p)

Characteristics of research

The majority of studies were moderate to good quality and used a pre- and post- intervention assessment design with a randomised control group. Sample size and strategy varied between the chosen studies.

Overview of methodological quality of the research

The Downs & Black (1998) checklist was used to rate the quality of these papers. The overall quality of the papers ratings were 52% (Lovering et al., 2006) to 82% (White, Agnew & Verduyn, 2002). However, 7 studies had a quality rating of 60 or over, suggesting that the majority of studies were of a good quality. For further information, see Appendix E.

Study Design

Six of the ten studies used a pre/post intervention design with no control group (Simpson et al., 2010; White, Agnew & Verduyn 2002; Hampshire & Matthijsse 2010; Downey & Williams 2010; Lovering et al., 2006;Yadev, O' Reilly & Karim, 2010). The remaining four studies were randomised control trials (Aldred, Green & Adams 2004; Gardener, Burton & Klimes 2006; Wynne et al., 2016; Humayun et al., 2017).

Recruitment strategy

All 10 studies explained their recruitment strategy. Three accessed samples following a referral to the intervention by professionals working with families through a simple referral form by the multidisciplinary team (Lovering et al 2010; Wynne et al 2016; Simpson et al 2010). In three studies, self-referrals were considered, as well as referrals from the multi- disciplinary teams (White, Agnew & Verduym 2002; Gardener, Burton & Klimes, 2006; Alfred, Green & Adams (2004). Three studies focussed on school based recruitment, through young people at risk of exclusion (Yadev, O'Reilly & Karim, 2010), children considered to have concerns over social and emotional development with "hard to reach" parents (Downey & Williams, 2010) and through taster sessions to generate interest (Hampshire & Matthijsse, 2010). Participants in the final study were recruited through youth offending services (Humayun et al 2017).

Quality of included studies

The quality of the studies considered for this review were assessed using the Downs and Black (1998) quality checklist (See Appendix E). This tool comprises of a checklist measuring research papers against 27 criteria, each is answered using 'yes', 'no' or 'unable to determine', and produces a score out of 27. An independent researcher also reviewed a random sample of the papers and to assess inter-rater reliability. Any discrepancies were reported by the researcher and independent evaluator discussed and a final decision reached.

Overview of interventions

Most interventions were delivered in the community, in accessible buildings or volunteering centres. Two studies were delivered in the family home and the final two studies reported the inclusion of school based programmes as part of the overall intervention. For these studies, interventions were delivered in school and in the family home. Six studies described standardisation procedures. Intervention delivery varied; three interventions were delivered to parents, three were family focussed interventions, two studies offered the child individual input and the final two studies integrated family, school and individual support. Aims were similar across interventions: to reduce children's behavioural difficulties, improve emotional well-being and to increase parent's confidence and ability to cope with difficulties. Reference to theoretical frameworks used were reported inconsistently in reviewed papers. A summary of interventions can be seen in table 2.

Intervention Delivery

Only three of the group intervention studies reported the size of groups, this ranged from 10 (Gardener, Burton & Klimes, 2006) to a maximum of 22 participants (Hampshire and Matthijsse 2010). (Aldred, Green and Adams 2004) reported a group sample of 14. Two group interventions failed to report group sample sizes (Wynne et al, 2016; Downey & Williams, 2010). Individual based interventions referred to group support but did not stipulate group size (Yadav, O'Reilly & Karim (2010). The remaining studies were all family or school and parenting based interventions (Simpson et al., 2010; Humayun et al., 2017; Lovering et al., 2006).

Four studies reported the delivery of interventions in community settings (Gardener, Burton & Klimes, 2006; Wynne et al, 2016; White, Agnew & Verduyn, 2002; Hampshire & Mattijsse).

Two were delivered in the family home (Humayun et al., 2017; Simpson et al., 2010) and two were delivered in the home and in schools (Lovering et al., 2006; Downey & Williams, 2010).

Target age range of interventions

All nine interventions specified the target age range. Of these, one targeted young people from the ages 11-17 (Wynne et al., 2016), 5-11 years (Yadav, O'Reilly & Karim (2010), two studies targeted young people aged 11-18 (Simpson et al., 2010; Humayun et al., 2017), 2-5 years old (Aldred, Green & Adams, 2004), school aged children 7-11 (Downey & Williams, 2010),children aged 2-9 (Gardener, Burton & Klimes, 2006), aged 3-7 (Lovering et al., 2006).One study did not stipulate the target age range but reported on the mean age of participants as 10.5 years old (Hampshire& Matthijsse).

Who delivered the interventions?

The facilitators of interventions varied. Three were supervised by clinical psychologists. One paper (Lovering et al., 2006) indicated that educational psychologists lead on the project, supported by paraprofessionals with qualifications in childcare and education. Similarly, a clinical psychologist and an assistant or trainee psychologist led the Little Hulton Project (White, Agnew & Verduyn, 2002) parenting groups. If parents were unavailable, the trainee or assistant psychologist completed home visits. Six group leaders with backgrounds in nursing, teaching adult education and the child and voluntary sector delivered the volunteering project parenting programme (Gardener, Burton & Klimes, 2006). A clinical psychologist supervised leaders. Three studies discussed the facilitators but did not provide their professional background (Hampshire & Matthijsse, 2010). For the Singing groups, reference was made to the researchers supporting the group but their professions were not disclosed. Family SEAL programme (Downey & Williams, 2011) recruited from the local Educational Psychology Service, which works with young people in schools to provide support for individual learning, behavioural and social problems to parents, teachers and other professionals working with children. External facilitators provided training to teachers and parents. It is unclear what the role of the facilitators were in the psychology service. Alfred, Green and Adams (2004) discussed autism based interventions but did not discuss who was responsible for facilitation. Two full-time and one part-time Systemic Family Psychotherapists facilitated the family

therapy intervention (Humayun et al., 2017). One paper described involvement from a Community Therapy Team (Simpson et al., 2010) which is a multi- disciplinary team consisting of a clinical nurse specialist, two senior nurse therapists and a therapy support worker, working separately from the CAMHS multi-disciplinary workforce. The final paper focussed on a mentoring intervention (Yadav, O'Reilly & Karim, 2010). Mentors were eight adults from various backgrounds, including teaching assistants, fostering and nursing. They had three years minimum experience of working with children. Mentors received six week training on a variety of therapies, such as solution-focussed therapy, cognitive behavioural therapy, meditation and mentoring.

Manualised Procedures.

The majority of the papers did not indicate whether the intervention delivery had been subject to any standardisation procedures.

Gardener, Burton & Klimes (2006) used a structured approach, aiming for a sequence of topics but the programme employs a collaborative approach, to build parents strengths and expertise. Two studies described adhering to the Webster Stratton Programme (Wynne, et al, 2016; White, Agnew & Verduyn, 2002). To ensure the correct intervention programme had been adhered to, facilitators attended pre programme training, follow session plans stipulated in the manual, complete integrity checklists and attend regular supervision with programme developers. One paper ensured fidelity by offering initial training, six in-person visits to review therapy and live supervision. Consultants would also routinely measure session notes (Humayun et al, 2017).

Table 2. Summary of the content of the interventions included in this review

Author (Year)	Intervention	Format	Key Characteristics	Session Content
Downey & Williams (2010)	Community programme supporting schools parents and carers.	7 week intervention programme to run through half term. Parent workshops facilitated by teachers and external professionals.	Helping parents to improve young people's emotional skills Behaviours of young people Improvement of social competence.	Each session consists of an hour long workshop: Workshop begins with an ice breaker and games and to review group expectations and confidentiality Description and modelling of the approaches Consideration of how the approach can be modelled in the home. Reflection of how approaches are similar to parents own experiences. Children are brought into the workshop and activities are designed to provide opportunities to consolidate social and emotional development strategies Parents encouraged to try strategies in their homes.

Gardener, Burton and Klimes (2006)	Community Based Parenting Intervention.	14 week intervention is delivered to 10-12 parents for two hourly sessions.	To help increase parent strength and expertise. Measuring parent mood, confidence and reducing children conduct problems.	The sequence of topics includes parent-child play, praise, incentives, limit setting, problem solving and discipline. Video clips are shown to illustrate the different strategies parents use to manage children. Each week parents are encouraged to practice tasks at home. Telephone calls are made to encourage progress. Children did not participate but partners and grandparents are encouraged to attend.
Wynne et al (2016)	Family Based Intervention	8 week intervention. Both groups were run in parallel over the eight weeks. With the young people attending the WTO sessions and the parents attending the PPAP session. Two joint family sessions were run after week 3 and week 6 were the young person and their families came together to makes links between the learning.	Helping young people and their families by to reduce emotional and behavioural difficulties that have been referred from CAMHS services.	Positive Communication Getting along with your teenager Encouraging your teenager Listening to your teenager Establishing Rules Using consequence/ having a discipline plan Dealing with conflict

Simpson et al (2010)	Intensive therapy team	Community Home based interventions to help identify, label and build on the strengths of the family to equip them with the skills, confidence and stamina for them to provide an appropriate level of care and support at home.	This model aims to empower young people by focussing on: Therapeutic engagement with young people and their carers Building collaborative partnerships to facilitate positive change Sessions are home based	Study fails to report structured content. The nature of the work provided consists of appropriate case management, continued risk assessment, individual therapy, and psychoeducation for the patient and the family, support accessing alternative support and collaborations with other services.
Yadav, O'Reilly & Karim, 2010	Mentoring Support during transition phases		Promotes self-esteem and locus of control in young people Works with "at risk" vulnerable young people.	The programme is delivered over 10 months, which includes all of the natural breaks in the school calendar. The role of the mentor was to meet with the child on a weekly basis. The mentors worked across schools, communities and provided homebased support.
Hampshire & Mattijsse (2010)	Arts Project to Improve Well-Being	Conducted over 18 months. Three rounds of measurement. Baseline, 6months and 18 months. Aimed at Primary school children.	Helping children by: Changing lives and building stronger communities A focus on social and emotional well-being. Utilising involvement and participation.	Weekly singing rehearsals, singing groups held for the children, serving break time refreshments, watching other performances and being involved in post-performance celebrations.

White, Agnew & Verduyn (2002)	Community Based Early Intervention Team –Little Hulton Project	Parental survival course Groups were accessed by self-referral for parents encountering difficulties with children's behaviours. Each group ran for 7 weeks with weekly sessions. If parents were unable to visit a home, visit was arranged at home.	Community approach allowed for better attendance rates Highly valued by families and professionals Helped to identify issues early in children and helped to monitor referrals to psychology services.	Session content not fully explained.
Alfred, Green & Adams (2004)	Community Psychosocial intervention given alongside existing care.	Initial sessions of psychoeducation for parents, parent and child attend monthly treatment sessions, followed by a further six months of less frequent maintenance sessions.	A new method of intervention that helps children by: New method that offers an alternative to routine care Less expensive treatment Encourages family engagement, social interactions and improvements in parent knowledge and vocabulary.	The sessions consist of communication skills, development of psycho linguistics and communication and intervention strategies. The initial focus is on shared attention, followed by parent sensitivity and responsiveness, adapted communication strategies and consolidation and elaboration. Routine Care Group Received routine care alone.

| Humayun et al (2017) | Functional Family Therapy | Functional family therapy group typically consisted of 12 sessions across 6-12 months. Management as usual group utilised help, education, employment substance misuse, anger management, sexual health, mental health problems and social groups. | Helping adolescents by: Facilitating personal and family development Treating people in a safe environment(adolescents own homes) Inexpensive intervention Linking in with community institutions (School, etc). | Family therapy consists of 5 stages: Engagement –Active engagement to connect with young people and parents and to agree initial sessions. Motivation – therapists work to enhance the perception that change is possible. Assessment – Assessment of risk and protective factors. Behavioural Change – Uses a range of techniques, including communication training, problem solving skills and parental training. Generalisation – Improvements made in a few specific situations to wider contexts, including help negotiating positively with community agencies, such as school. |

Lovering, Frampton, Crowe, Moseley & Broadhead (2006)	Community Based Intervention Programme	An individual programme with core targets to be achieved in 6 months. Includes children and their parents if they are disrupted at school or there is family breakdown in the home, or emotional problems.	Helping children by: Given a different option to the existing CAMHS service. Engaging families with elevated risks Improving relationships between parents and children Improving parent's child's behaviour management skills.	The interventions are as follows: Individual child programme focussing on core targets – intervention is made on the basis of need, literature, and professional experience. Key support worker allocated to work in the home for 3 hours a week and in the school for 5 hours a week. An organised holiday programme for children and parents of 15 hours per week during school holidays A 12 session parenting curriculum delivered at a local parenting group or in the home. Based on existing scheme – cooperative kids (Hartley-Brewer, 1996) Liaison and coordination between the various settings, local services and persons involved with further referrals as necessary.

Content of Interventions

Explanations of content delivery was inconsistent across the studies. For details of intervention content, see table 2.

Theoretical basis of interventions

One of the ten interventions investigated clearly discussed a theoretical basis. The mentoring programme (Yadav, O'Reilly & Karim, 2010) combines two theoretical approaches; Cognitive Behavioural Therapy (CBT) and solution focused therapy. One study refers to being based on relevant literature (Lovering et al., 2006) but failed to discuss theoretical underpinnings.

Effectiveness of the interventions

Due the heterogeneity, the effectiveness of each intervention will be considered individually. Qualitative responses will be omitted from this section and quantitative outcomes will be discussed. Only outcomes related to the research question will be discussed. Data relating participant or parent satisfaction will not be detailed in this review.

The majority of studies reported parent rated quantitative measures. Two studies supplemented this with information from teachers (Lovering et al., 2006; Downey & Williams, 2010) and four used additional data from the participants and parents (Humayun et al 2017; Simpson et al., 2010; White, Agnew & Verduyn, 2002; Yadav, O'Reilly & Karim, 2010).

Based upon the findings from the reviewed studies, the interventions with the strongest support was in the integrated interventions. Improvements were noted on one or more measurement outcome. The evidence for the remaining interventions varied. The intensive therapy team and SingUp interventions were supported by the literature, but the outcomes were difficult to compare with similar interventions.

- Integrated Intervention– School, individual and parenting.

This form of intervention, which combined school, parenting and individual support, was reported in three papers (Lovering et al., 2006; Yadav, O'Reilly & Karim, 2010; Downey & Williams, 2010).

The Scally wag scheme (Lovering et al., 2006) utilised a six-month, intensive intervention programme and focussed on behavioural approaches to integrate the needs of family schools and young people. Project leaders were educational psychologists and they ran three person teams to work with children, families and their teachers. One similar study lead intervention workshops that aided teachers, parents and children to support their understanding of social and emotional well-being (Downey & Williams, 2010). The final study reported findings based on a mentoring system that were employed by the education system to work in the community to support 'at risk' of exclusion when transitioning from primary to secondary education.

Lovering et al., (2006) used the Eyber Child Behaviour inventory measure to assess the impact of the intervention (ECBI: Parent and Teacher Form; Eyberg, 1999) and the Parenting Stress Index – Short Form, Third Edition (PSI-III; Abidin & Brunner, 1995). Parents reported clinically significant improvement in problematic behaviours in 47% of the children of the cases with 4% of children getting worse at 6-month follow up. However, this was not a clinically significant deterioration. Teachers also reported significant improvement (32%) of children's disruptive behaviours on the ECBI intensity scale and that there was a decline in scores (10%) at six month follow up. Clinical improvements were reflected in the mean scores and show that there was a significant improvement overall in parent and teacher related scores for both measures. Parents also reported significant decrease in parenting stress index (PSI-II). Comparisons for pre, post-test and follow up scores were all statistically significant on the teacher and parent ratings on ECBI scores. The clinically significant range decreased overall from 74% pre-intervention to 44% post intervention on the parenting stress. Beyond the outcome data, authors express the importance of 'real-life' interventions and how there is need for more intensive, community based programmes linking home and school.

Downey and Williams (2010) used a collaborative approach to engage teachers and parents as partners in developing children's social and emotional needs from a much smaller sample. Similarly, groups projects were facilitated by experienced members of the CAMHS service, though they do not disclose the occupation of the group facilitators,

the author stipulates that is not from an educational psychologist. Downey and Williams (2010) reported findings for the Family Seal interventions. In the study, the Emotional Literacy Assessment Instrument (ELAI; Southampton psychology service, 2003) was used to measure young people's social and emotional competence. Results were reported in relation to each of the five aspects of the SEAL initiative (see table 1.) The paper found improvements in social and emotional skills following parent and teacher reports post intervention. The 'concern' children were identified as young people that teachers or parents were having difficulties with their social and emotional development. Significant improvements were reported for all five aspects (Self-awareness, self-regulation, motivation, empathy and social skills) from parents and teachers in the 'concern' children group and parental ratings in the 'non-concern' children. The mean gains were reported for self-regulation. Evidence suggests that the FamilySEAL intervention has a short-term impact on the social and emotional skills of young people. Although, qualitative results are not considered in this review, parents and young people highlighted the value of a 'real life learning experiences'.

Eight adults delivered the mentoring school transition programme (Yadav, 0' Reilly and Karim 2010) with backgrounds working in education. The focus was to evaluate the effectiveness of mentoring interventions for young people who are considered 'at risk' of exclusion. Yadav and colleagues used two self-report measures to study the impact of the Mentoring intervention: the Strength and Difficulties Questionnaire (SDQ; Goodman, 1997); and the Barbara and George Self Esteem Scale (B/G self-esteem scale; Maines & Robinson, 1998). Overall, there was an improvement of self-esteem over the intervention in both the pre transition period. The study does not discuss the time between the intervention and the pre and post transition periods. Effect sizes were calculated using eta squared using a one-way repeated Anova and Cohen's criteria (small effect = 0.01, moderate effect = 0.06 and large effect = 0.14). Forty percent of children had scores over 15, but after the study 80 percent of people recorded above 15. Scores on the SDQ, showed significant improvement over time. The significant changes occurred in the pre-transition period, with the transition period not showing significant effects. With regard to the SDQ scores children with a score in the clinical range (above and including 17) dropped from 40 percent at onset to 22.4 percent at the end of the intervention. Large effects were observed on the self-esteem (0.46); SDQ (0.52); hyperactivity (0.24); emotional scale (0.39); peer relational (0.34); prosocial scales (0.17). According to

Cohen's criteria (small effect = 0.01, moderate effect = 0.06 and large effect =0.14) these are all large effect sizes.

- Parenting Interventions

This method of intervention was measured in three papers (Gardener, Burton & Klimes, 2006; Aldred, Green & Adams, 2004; White, Agnew & Verduyn, 2002), two of which used the Weber- Stratton programme (Webster- Stratton, 1998). This method of intervention employs a collaborative approach and aims to develop parents' strengths and expertise. Gardener and colleagues administered the Eyberg Child Behaviour Inventory (ECBI; Parent form; Eyberg, 1999). There were significant intervention effects on the Eyberg problem and intensity scales in for the intervention sample. Effect sizes were measured using Cohen d (small =15-4.0; medium = 4.0 - .75; large >.75). Medium effect sizes were observed (0.48) on the Eyberg child behaviour measure. At 18-month follow up, there were no significant differences from outcomes measured post intervention. Comparisons with the control groups in this study were not discussed as at 18 months; the control group were offered interventions and could no longer be compared to the intervention group.

The second study utilised a similar intervention (White, Agnew & Verduyn, 2002) and measured the effectiveness of interventions by using a number of standardised self- report outcome measures (Beck's Depression Inventory; BDI; Beck et al., 1961; Self – Esteem Index; SEI; Rosenberg, 1965; Child Behaviour Checklist; CBCL; Achenbach, 1991; Eyberg Child Behaviour Inventory; EECBI; Robinson, Eyberg & Ross, 1990;Pre-School Behaviour Checklist; PBCL; Richman, 1977) pre and post group, at 6 months and 12 months and by a group of non-attenders at 6 months. Pre- group means had significantly improved when measured at post group on all of the measures. The difference between pre-group means were maintained at a clinically significant level at both 6 and 12 months. Scores were compared from parents that attended the course and those that did not, there were no significant difference at the time of referral. At 6 months, the 'non-attender' group reported children having more behaviour problems on all of the measures. Scores on the ECBI reached significant level.

The final parental intervention (Aldred, Green and Adams, 2004) measured change using standardised measurement outcomes of adaptive functioning (Vineland Adaptive

Behaviour Scale; Sparrow, Balla, & Cicchetti, 1984). Higher scores on this measure reflect greater abilities in the young person. The mean pre assessment score was 22.6 for the treatment group and 20.0 for the control group. At post assessment scores was 36.9 for the treatment group and 28.7 for the control groups highlight a mean change of 14.3 for treatment and 8.7 for control group. This represented a non – significant effect. Parental stress was also measured, but there was no significant difference in change for the total PSI scores or on sub scores of parental perception of own level of distress, interaction difficulties with the child from parent responses.

- Family Interventions

Family focused interventions were described in two papers (Humayun et al., 2017; Wynne et al., 2016). Huymayun and colleagues aimed to demonstrate that family supporting interventions had a significant positive impact on participants' wellbeing when measured at baseline, 6 months and 8 months using Functional Family Therapy. This used the Alabama Parenting Questionnaire, (APQ- 15; Scott, Briskman & Dadds, 2010), Self-report delinquency scale (Smith & McVie, 2003) to measure the impact of an intervention to reduce youth offending and anti-social behaviours and to improve young people's relationship development and social functioning. There were no significant differences in anti- social behaviour between groups at six month follow up (es = 0.13), or at 18 month follow up (es =0.12) for both control and intervention groups. However, self – report delinquency scores reduced between the baseline and 18-month follow up for both groups, but not between the baseline and 6 months follow up. There were no significant differences observed between groups at 6 or 18 months for conduct disorder symptoms (es=0.22, 0.07) or oppositional defiant disorder symptoms (es= 0.05, 0.15)

Wynne and colleagues focussed on a family intervention for adolescents with social, behavioural and emotional difficulties. They measured the impact of such interventions using the strengths and difficulties questionnaire (SDQ; Goodman, 2001), The McMaster Family Assessment Device (FAD; Epstein, Baldwin & Bishop, 1983), The Kansas Parental Satisfaction Scale (KPS; James et al., 1985), The Parental Stress Scale (PSS; Berry & Jones, 1995), The Revised Child Anxiety and Depression Scale (RCADS; Chorpita et al., 2000), The Depression Anxiety and Stress Scale – 21 (DASS; Lovibond & Lovibond, 1995). The study examined both parent and young persons' response to the questionnaires. A significant drop of 22% was observed in adolescents falling in the

clinical range on the parent report of the SDQ. A significant gender difference was observed following intervention, with parents reporting female scores lower than the male children's scores. Results highlighted that parents of male children were reporting higher levels of hyperactivity. Females were reported to have significantly higher levels of emotional symptoms and significantly lower levels of conduct problems. No significant effects were observed for adolescent- rated total SDQ scores, although main effects were observed for adolescent- rated emotional symptoms scores post intervention. No effects were observed for the RCADS. No significant effects were observed for the DASS. McMaster general functioning reported more positive family functioning. The study highlights the importance in developing parent confidence. The study highlighted an interaction in child gender with improvements over time. Results suggest that this intervention is more effective to female adolescents. The study does found that adolescent rated emotional symptoms improved for the overall samples, suggesting that the intervention does have some impact on males in relation to emotional difficulties.

- Other interventions

Simpson et al., (2010) described an intensive therapy team intervention, which aimed to provide an innovative model of community based care. The impact of intervention was measured using the Health of the Nation Outcome Scales for Children and Adolescents (HoNOSCA; Gowers et al., 1999). At the time of referral the mean HoNOSCA score for participants was 19.12, following the intervention the mean score reduced by 10.85 and at referral with the average score at discharge being 8.17. Significant positive changes were observed on all of the four main component scores (Behavioural, Impairment, Symptomatic and Total score). Nearly 90 percent of those treated in this study improved beyond the level of clinical significance of change in score values. The 10 percent that did not meet clinical significance were 3 cases that conditions deteriorated rather than improved.

The final intervention examined a community based arts project (Hampshire & Matthijsse, 2010), adopted a self-developed questionnaire that aimed to incorporate the principles associated with social, emotional and behavioural wellbeing. The questionnaires included items relating to relationships, self-esteem, and aspirations, use of social networking sites and nature and frequency of contact with friends. Not enough participants completed questionnaires to complete a statistical analysis. Questionnaires completed were used to

examine baseline differences between participating and none participating young people and to inform the questions asked in the interviews after the intervention. All of the interventions were dominated by females. Clinically significant effects were observed with the control group. Children taking part in the Sing Up programme were more likely to engage in social activities and use creative techniques to help manage their social, emotional and behavioural problems. Due to the inconclusive analysis, these findings should be analysed with caution.

Discussion

The focus of the current review was to identify and assess empirically tested Community based interventions delivered in community settings, designed to support young people with social, emotional and behavioural difficulties. Literature was reviewed systematically and 10 studies were found describing 5 different methods of intervention. Overall, studies were of moderately good quality; scores were variable. The majority of papers reported outcomes from the parents' perspective. Varieties of measures were used to assess the impact, and the heterogeneity of design, meaning that it was not possible to complete a meta-analysis. As a result, the studies in this review were examined for effectiveness qualitatively. The interventions fell into four categories based on who the interventions were aimed at and if there were any similarities between studies. Two studies could not be categorised and were discussed independently: Integrating interventions between parents, school and young person; parenting interventions; family interventions and individual interventions that discuss intensive therapy and arts based methods to improve young peoples' emotional, behavioural and emotional wellbeing. This is the first review to summarise the existing literature of effective community focussed interventions for young people with social, emotional and behavioural difficulties. There are innovative methods that appear essential to making mental health support accessible for young people outside of traditional mental health services, such as active outreach, school based programmes, sharing of knowledge. This is supported by findings by (Bond et al., 2001), which investigated assertive community treatment for people with mental illnesses.

Significant gains were observed in the three studies that focussed on the interaction between schools, parents and teachers. All studies incorporated a degree of psychological focus. Psychologists were involved with the creation, supervision and implementation of

two programmes (Lovering et al., 2006; Downey & Williams) and the mentoring intervention has entrenched in psychological therapies (Yadav, O' Reilly and Karim, 2007). Interventions yielded results having impacts on different elements of a child's emotional, social and behavioural well –being. Lovering and colleagues focused on the impact the intervention had on the behaviour of young people. Downey & Williams (2010) explored the impact of self-awareness, self-regulation, motivation, empathy and social skills in comparison to Yadav, O'Reilly & Karim (2010) who used questionnaires based on self- esteem and strengths and difficulties. Only one study (Downey and Williams, 2010) included a control group so the results should be interpreted with caution. The FamilySeal scheme relied on teachers reports and was only considered effective for young people 'causing concern. Therefore, it is impossible to conclude based on this evidence that this integrated programme is more effective as a target intervention or as a universal intervention offered to all young people. The heterogeneity of measurement makes it difficult to assume which is most effective. Qualitative appraisals of the interventions illuminated the importance of a 'real life' intervention. Future implementation of community-based support systems would benefit from psychological based developments. The programmes were successful at engaging families who are at risk of future involvements in services. Although, all three studies are very much still in their infancy and would require further research to increase their efficacy as preventative intervention models. All of the integrated models support offer the opportunity for practitioners to take lead roles and to share knowledge and supervision to both teachers and parents. Policies have begun to support the integration of young people, parents and schools (Department for Children, Schools and Families, 2007) and should continue to build upon this triangulation of support to increase young peoples' social, emotional and behavioural well-being.

Two of the parenting interventions used manualised procedure to help parents to develop strength and expertise to support their children with behavioural difficulties (White, Agnew & Verduyn, 2002; Gardener, Burton & Klimes, 2006). Studies used randomised control trials and measured participants at follow up at 6 and 18 month follow up. It is difficult to compare the effectiveness of the interventions as one study focussed on children with behavioural problems (White, Agnew & Verduyn, 2002) and the other with children with conduct problems Gardener, Burton & Klimes, 2006). Families supported the 'real world' intervention and the focus of the intervention is a video-based programme that makes it accessible throughout the community. Clinical psychologists supported both

groups' leaders. The studies show that cognitive behavioural-based parental interventions can be effective in the community sector, it is important to highlight that sharing knowledge and education with parents is a helpful way to support young children. Aldred and collegues supported this and found that parental intervention is an accessible way to improve child outcomes. The homogeneity of research content makes it difficult to address specific qualities but the current research highlights that parental group based programmes have yielded positive effects with a range of social, emotional and behavioural difficulties.

Impacts of other interventions were less clear Hampshire & Matthijsse (2010) reflected on the importance of Art Projects to improve young peoples' well- being and feeling of social inclusion. Qualitative reports expressed how the project increased feelings of connection and helped young people to develop self-confidence. The design of this study makes it difficult to interpret results. Not enough quantitative data was derived from this study. Further investment should be considered to investigating the effectiveness of such projects as they are inclusive and require low resource. Qualitative responses have yielded positive results but this requires further, more robust investigation before it is considered as an effective intervention for people with social, emotional and behavioural difficulties.

All papers discussed in this review report that interventions are implemented independently, however with community focussed studies, they are all delivered in the context of a system i.e. within the family, education settings or community based institutions. Further investigation should consider which systemic factors are the most influential in the interventions. It is difficult for the current study to assess this.

The results of this intervention may be a result of methodological factors. In general, inadequate control groups and absence of randomisation limits the conclusion of the studies in this review. Future research is necessary to access the identified interventions in order to elucidate areas in which there are mixed results.

The intensive therapy team Simpson et al., (2010) developed a cost effective intervention that was built on community based principles. Interventions were nurse led and supervised by Consultant clinical psychiatrists providing a more accessible network for clinical intervention. The study found reductions on measures significantly reduced following intervention. However, there was no control group in this study so results should be approached with caution. The intervention reflects on the importance of managing people in their own environments and helps them to function in their

communities. The team works alongside stakeholders to identify strengths in the individual and aims to create a network of support. The development of the therapy team is still in its infancy, more research is required to measure the effectiveness of this service.

Limitations of review

Though this review did offer a review of the sparse evidence base, it has limitations. This review aimed to illuminate an overview of current literature around 'community' interventions. The initial research questions have been adequately addressed, a number of key questions remain unanswered, as the evidence was insufficient. The operationalisation of 'community' carried across studies as the understanding of such interventions varied. Due to the distinct lack of research in this area, it is difficult to compare the interventions, as the current review was unable to collect a homogenous group of studies. Firstly, a number of studies did not define community-focussed interventions. Most of the papers throughout the review related community interventions to traditional mental health services. The interventions were categorised based on the aims but it was difficult to generalise the findings. Similarly, it is unclear whether there is a significant time to intervene with participants, as the ages of young people was variable and therefore it was difficult to establish an optimum time of intervention.

The review was limited to papers published from 2000 onwards, meaning that pre- 2000 papers were excluded. The exclusion criteria were strictly applied and only identified reported outcomes relating to social, emotional and behavioural well-being. This may have excluded papers that reported findings related to distal factors but equally important measures, such as parental relationships and educational attainment or adherence post-intervention. A number of databases were used to complete a comprehensive literature search but no authors were contacted to consider new literature.

Only focussing on quantitative based papers reduced the quality of response and understandings of what was most effective. Due to the limited, robust, research in this area. Future literature reviews should potentially look to analyse qualitative feedback to allow for a richer exploration of the pertinent issues in this area.

In this review, there is scope for potential biases in study selection. Search strategies were discussed with members of the academic team and inter-rater reliability was considered, but only one researcher completed the search. The definition of 'community' focussed

intervention could be confused and papers were selected in relation to literature and the opinion of the researcher. The review only considered published papers, which negates potential for publication bias. The number of empirically published papers in this area was low and the lack of publications highlights the need for more research for 'community interventions' to be implemented in the U.K. In comparison to other countries, the United Kingdom appears to be behind in providing free, accessible initiatives to support young people experiencing psychological difficulties.

Overall, the quality of the studies was generally good. However, heterogeneity of studies means it is hard to construct conclusions, or consider specific components of the interventions that may have been important in the interventions for young people. A review of all 'community' focussed interventions may provide a clearer understanding of the effectiveness and efficacy community approaches. Further research into this topic would need a degree of funding, as evidence-based research needs robust, sufficient, up to date studies of innovative initiatives.

Conclusions and Evidence Based Research

This review offers an overview on 'community – focussed initiatives' developed to support young people with emotional, behavioural or social functioning in the United Kingdom. Most interventions reported significant impact on the emotional well-being of the young people who were identified as being vulnerable to the development of mental health difficulties. Although the direction of causality is yet to be established, the most significant effects were seen in the programmes that integrated schools, parents and the young people.

Professionals should focus on utilising the findings of this review by considering characteristics from the successful interventions. Researchers should continue to investigate programmes and strategies to support young people. For example, it is important to increase interactions between parents, schools and young people and supporting them with activities and education to benefit young people with social, emotional or behavioural difficulties. In addition, it is vital to offer continued support to those who have already benefitted from the interventions for a longer, sustained period. Further studies may focus on investigating the extent to which skills taught in the context of intervention can be generalised into other settings, and to develop an understanding whether these new approaches can be further developed, to maintain their effectiveness.

Continuing research would result in improvements in evidence- based decision making about support for young people in community-based settings, subsequently relieving pressures on CAMHS services. As discussed earlier, it is important to continue to investigate cost-effective, innovative interventions as mental health services are expected to meet standards, with limited resources. Research in to community-based interventions require financial backing to provide high quality evidence relating to a variation of interventions. Further studies will have to face up to the logistical challenges of conducting high standard research of community- based interventions. Further research to develop strategies for supporting and facilitating good mental health in young people is timely (Department of health and education, 2017), given the high levels of incidence of mental health difficulties (Patel et al., 2007) and the pressures this results in on the NHS and schools. (Layard, 2005).

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PART TWO

Empirical Paper

Multiple perspectives of the role of educators in the development and maintenance of aspirations

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Multiple perspectives of the role of educators in the development and maintenance of aspirations

Abstract

Aims: The aims of this research was to examine participants' subjective experiences of aspiration development within the education system. Existing research focuses on the development aspirations, but fails to explore the significance of school's in supporting young people to formulate aspirations

Methods: The role of educators in the development and maintenance of aspirations were explored from multiple perspectives. Focus groups with young people, educators and unemployed people were conducted and analysed using thematic analysis.

Results: Five themes and nine subthemes were identified and participants identified importance, identity development, interactions, societal factors and new methods as important factors of aspiration development.

Conclusion: The importance of aspirations in school is emphasised, with wider implication for developing methods to encourage this.

Keywords*: Young People; aspirations; development; education*

Introduction

Understanding Aspirations

Aspirations are defined as educational or occupational dreams that an individual aims for in their future work place or education system (Sirin et al, 2004). People often find it difficult to make definite judgements at critical points in their lives. We are forever making comparisons based upon our environment, events that have happened in the past and what our expectations of the future are. The concept of generating expectations is derived from early theories involving aspirations and expectations (Gottfredson, 1981). The formulations of aspirations can look very different and are shaped by peoples' personal traits and how they view themselves (Banbury, 2014). Individuals base their aspirations on their perceived ability to achieve, based upon grades at school (Juang & Silbereisen, 2002), parental hopes (Hill et al, 2004), parental occupations (Trice, 1991) and societal expectations (Wahl & Blackhurst, 2000). Research suggests that aspirations develop at an early age, and continue to form until early adulthood (Gottfredson, 2002). A recent qualitative study found that mid-teenagers aspired to three main things: continuing with education, getting a job, and starting a family (Steinberg and Morris, 2001).

Why is it important to study aspirations?

There is a large body of research focussed on whether it is helpful for young adults to begin their development of aspirations at an early age. Schoon (2001) conducted a longitudinal follow-up study of teenagers in the United Kingdom, and found that teenagers who held positive aspirations were more likely to attain a profession they were satisfied with later in adulthood. The occupations that young people aspired to were significantly related to their occupational attainment at the age of thirty. Holland (1985) argues that adolescence is the most significant period for developing aspirations for future careers. From the age of thirteen, young adults are beginning to formulate where they want to be in the future and are critically assessing their abilities to proceed in their career paths. Gottfredson (2002) posits that the most critical period regarding career commitment occurs between the early adolescent stages through to early adulthood. Educational systems are noticing the importance of aspirations and are introducing new policies to help young people at this difficult stage. For instance, the Scottish government

developed new policies to increase educators' attention to the development of student aspirations (Dunlop, 2015).

Dunlop (2015) argues that teachers are in the best position to develop young people's aspirations and encourage them to chase the occupations they desire. Recent studies have aimed to identify other factors important for the development of aspirations, which include parental engagement (Rojewski and Yang, 1997), family occupations (Dandy & Nettleback, 2002) and governmental policies (Dunlop, 2015). These studies considered how maintaining high aspirations could increase the likelihood of achieving better in later-life. Other research has identified how low, or lack of, aspirations can have to detrimental consequences. Wells, Deykin and Klerman (1984) argue that low occupational aspirations are a significant factor in reports of low mood and adolescent suicide. A more recent study examined depression in migrants and ethnic minorities in the United Kingdom (Bhgura and Ayonrinde, 2004) and found that the main factor of depression in migrants was due to the discrepancy between an individual's personal aspirations and their actual achievements. Bhgura and Ayonrinde (2004) argued that the disparity between what an individual wants to achieve and what they can, leads to the development of low self-esteem, which subsequently leads to depression. Low aspirations are intrinsically linked with low employment rates. Paul and Moser (2009) suggest that unemployment leads to individuals becoming more distressed, with unemployment being a cause of mental illness in 34 percent of the population. Durkheim (1987) argued that distress occurs when a "disparity of needs" exists, between social conditioned expectations and an individual's aspirations. Failure to combine the expectation with the aspiration can lead individuals to resort to suicide.

Helwig (2004) aimed to explore if socio-economic backgrounds influenced childhood aspirations and showed that socio-economic status had a significant positive effect on young adults and their level of aspirations. Participants from higher-class backgrounds tended to aim a lot higher than young adults from poorer families. Dandy and Nettleback (2002) highlighted that when families from lower socio-economic backgrounds were questioned about their personal hopes and aspirations for their children, they were satisfied with lower paid occupations and apprenticeships. Parents expressed disinterest in their children pursuing any further education. Crasnoe, Mistry and Elder (2002) put forward that parents from lower-socioeconomic backgrounds had negative perceptions of their child's ability to perform well academically and therefore showed little interest in their child's education. It could be argued that if parents have a pessimistic view of their

child's ability to succeed then they may share similar views in their involvement of the development of aspirations. Thus, it may require other significant adults in the individual's life to help formulate and maintain occupational and educational aspirations (Finley, 1984).

Secondary education is a critical period in a young adult's lifespan in which preparation for adulthood takes place, and a time when young adults evaluate their talents and personal interests, constructing attainable occupational or educational aspirations (Majoribanks, 2002). Young adults form an interest in their own futures as they prepare for the end of their statutory education and develop an idea of what they want to do next (Beal and Crockett, 2010).

Research has focused on the involvement of parents in their child's education and how they can help facilitate the development of young adult's aspirations (Astone and Mclanhan, 1991). Koskey et al (2010) identified that parents who show an interest in their child's educational abilities had a significant positive effect on the child's development throughout the educational period. In contrast, Louie (2001) reported that parents from lower socio-economic backgrounds did not have the time and resources to aid their children's education and found that the school did not provide appropriate support to further their child's learning opportunities.

In Germany, a system based on predicted school grades has been applied to aid adolescents to develop, maintain and potentially adjust occupational aspirations (Heckhausen & Tomasik, 2002). This unique approach was initially developed to ease the transition of children from school into work or to progress to further education. Developers of the model felt that there is a short window of opportunity to work with pupils to construct their aspirations in a way that is beneficial to them and that considers their level of ability (Quaglia & Cobb, 1996). The German model identifies the importance of collaboration between teacher and pupil to formulate attainable aspirations. Therefore, this relationship between teachers and students is crucial for the young peoples' decision-making.

The Development of Aspirations

Gottfredson's (1981) early theory of aspiration development identifies that aspirations reflect one's self-concept. Aspirations are based on an individual's knowledge of the potential occupational and educational pathways that are available to them. Gottredson (2002) later revised her theory and put forward a framework to consider how individuals from similar backgrounds and circumstances develop different aspirations. Gottfredson (2002) defines self-concept as a multi-dimensional component of an individual's ability to formulate aspirations and argues that self-concepts are formed by an individual's perception of their appearance, gender, personal characteristics, and their position in society. The theory also highlights how individuals develop their personal images of occupations, which includes an individual's perception of the personality required by different occupations, the ways that people working in the occupation live, and the personal and financial rewards for working in the occupation. The theory contends that individuals develop their aspirations by considering the compatibility of the image they hold for themselves with their perception of what is required for the different occupations.

The circumscription and compromise theory (Gottfredson, 2002) highlights concerns that people sacrifice career dreams to conform to what is expected of them. Circumscription is the process in which young people reduce their levels of aspiration by eliminating what they perceive to be unattainable options. This theory argues that circumscription of aspirations occurs across four stages of the adult life span.

Circumscription stages (Gottfredson, 2002)

The first stages occur between the ages three and five (stage one), which focuses on size and power, during this phase children start to understand occupations as adult roles. The second stage (age 6-8), where children are concerned with fitting in with existing career-related gender stereotypes. This study focusses on the next two stages of development.

Stage 3-Orientation and Evaluation stages (ages 8-13)

During this stage, individuals' awareness of social evaluation increases. Young people are vigilant to factors influencing social class (clothing, differences in behaviours and mannerisms). By the age of 13, young adults rate occupations in a similar way to adults and individuals can make links between income, education, and potential job prospects. Young people consider their own understanding of their personal capabilities but also

consider the views of other significant adults in their lives. Teachers and parents share an important role in encouraging adolescents by assisting them to formulate attainable aspirations. Parental influence was highlighted too by Nurmi (2004) who argues that young adults' aspirations are formed based on their parents' desires and the perceived norms established by their current society. These aspirations are later adapted when an individual develops further understanding of their own capabilities by highlighting their own perceived strengths and weaknesses.

Stage 4 – Orientation of the internal unique self (ages 14 and above)

Adolescents at this stage take their futures and aspirations for granted. Adolescents over 14 find it difficult to identify what values, interests, and abilities they hold. In most cases, their interests and values are still developing. At this stage, students form their own aspirations, and begin to develop ideas for their futures; like attaining a job that will allow them to provide for their future families. This stage of Gottfredson's theory highlights similar explanations to Beal's (2010) study, which identifies early adulthood as an important time for the development of aspirations and it is argued that this critical period is when young people consider their future and explore the extent of their possibilities.

The first three stages of this framework focus on the rejection of what an individual considers an unacceptable aspiration, whereas the fourth stage allows for the consideration of the most preferred aspirations and what is considered attainable. Stage 3 focusses on the input from other significant adults in young peoples' lives (parents and teachers). It could be argued that the fourth and final stage of aspiration formulation requires the most input from important external figures, such as parents and teachers. In summary, the third and fourth phases are critical for the development of aspirations and it is important for parents and teachers to recognize their significance.

This study aims to investigate the current perspectives of Educator's roles and position in working with pupils at the vital stages of their development by asking a multitude of people and professionals currently, or in the past, involved in the education process. Using Gottfredson's theory this research will ask participants to review their experiences of stages three (Orientation/ Evaluation stages) and four (Orientation of unique self) to investigate whether educators' were significant at these stages; and if so, what helped or hindered this process.

Rationale of this study

This study is the first to explore how aspirations are developed in the education system by drawing on the voices of educators, students and ex-pupils on how education currently facilitates aspirations. Previous studies have identified that low aspirations held at a young age subsequently result in a lower quality of life and potential mental health difficulties. The findings of this study therefore have considerable potential clinical relevance, as rising numbers of young people are unemployed or using NHS mental health services. The perspective of the unemployed sample is important for this study as people who were unsuccessful throughout their early educational years are often over looked in previous education studies (Roberts, 2011). This population also helps to consider the reflections of individuals who may not have held high aspirations throughout young adulthood (Warr, Jackson & Banks, 1988). The research also aims to expand the understanding of educators' roles in child and young adulthood development of aspirations.

Finally, this research adds significantly to the existing literature regarding aspirations by offering a different perspective to the existing literature, which until now has focused on the role of parents in the development of young adult's aspirations. The current study considers aspiration development as a shared ownership and aims to examine the overlap between the aspirations that significant others hold for the young person and the young person's understanding of what they can achieve.

This study aims to provide a new understanding and recommendations to ensure smoother transitions from secondary education to adulthood. The current research aimed to address the following questions.

1. What is the current role of schools in the development of aspirations?
2. What are the current techniques that have been used/considered in aspiration development and how these techniques have been beneficial to young people achieving their goals?
3. Is developing aspirations an important part of young people's development in schools?

2. Method

2.1 Design

This is a qualitative study. The focus group method was selected as it allows for informal and natural discussions that are similar to the conversations that are held in everyday life, which allows the researcher to reach a true understanding of participant's reflections on aspiration development in schools (Kitzinger, 1995). Participants were encouraged to debate and offer their opinions based on the content of the conversations that had developed in each of the groups. Responses were analysed using Thematic Analysis (Braun & Clarke, 2006).

Five focus groups were carried out, involving participants of Primary School teachers, Secondary School teachers, Sixth Form Students, University students and a sample made up of a group of unemployed participants. All five focus groups were conducted in Hull and the East Riding area. The different samples were chosen to reflect different perspectives on the development of aspirations in young people.

2.2 Participants

Recruitment criteria for the focus group reflected the profession or position of each intended sample. Participants for the Teachers groups were qualified teachers only. The students sample needed to be registered with their respective institutions and the final group of participants were unemployed. In each of the groups, the participants were aware of each other, as they had spent time together in their respective institutions. Participants provided demographic information prior to the focus groups as detailed in this section. More females (18) participated than males (10), leaving 28 participants overall, three in the Sixth Form group, 3 in the Secondary School teachers, 7 in the university sample, 7 in the unemployed group and 5 in Primary school teachers group. All groups fell within the 2 – 8 recommended range (Wilkinson, 1998). All participants described themselves as White British.

2.3.1 Primary School Teachers

All females participated in this study (n=5). Ages ranged from 24 – 33 years (mean = 28.4) two participants had taught in Primary schools for more than nine years and three had worked for between four and six. Three participants had completed postgraduate degrees and two had completed bachelor's degrees.

Table 1. Primary School Teachers (PT) demographics

Participant Number	Age	Gender	Ethnicity	Length of time in their role	Occupation/ status	Highest Level of education completed
Focus Group 5						
Ivy	25	Female	White British	4-6 years	Primary Teacher	Postgraduate Degree
Corinne	27	Female	White British	4-6 years	Primary Teacher	Bachelor's Degree
Fiona	33	Female	White British	More than 9 years	Primary Teacher	Postgraduate Degree
Jaden	33	Female	White British	More than 9 years	Primary Teacher	Bachelor's Degree
Chantelle	24	Female	White British	More than 9 years	Primary Teacher	Postgraduate Degree

2.3.2 Secondary School Teachers

The group consisted of only females (n=7).Ages ranged from 26 – 41 years (mean = 33.14). Length of time in teaching differed as four participants had taught for over nine years and three had worked between four and six years. The highest level of education was identified as PGCE (Postgraduate certificate in education).

Table 2.Secondary School Teachers (ST) demographics

Participant Number	Age	Gender	Ethnicity	Length of in their role	Occupation/ Status	Highest Level of Education completed
Focus Group 2						
Tammy	37	Female	White British	More than 9 Years	Secondary Teacher	Other-PGCE
Becky	28	Female	White British	4-6 years	Secondary Teacher	Other-PGCE
Rachael	26	Female	White British	4-6 years	Secondary Teacher	Other-PGCE
Sandra	38	Female	White British	More than 9 Years	Secondary Teacher	Other-PGCE
Dora	41	Female	White British	More than 9 Years	Secondary Teacher	Other-PGCE
Jez	32	Female	White British	More than 9 Years	Secondary Teacher	Other-PGCE
Tia	30	Female	White British	4-6 years	Secondary Teacher	Other-PGCE

2.3.3 *Sixth Form Demographics*

More females (n=2) participated than males (n=1). Ages ranged from 16 – 17 years (mean =16.67) and all had attended Sixth Form between six months to a year. The highest level of education were secondary school qualifications.

Table 1. Sixth Form (SF) demographics

Participant Number	Age	Gender	Ethnicity	Length of in their role	Occupation/ Status	Highest level of education
Focus Group 1						
Fred	17	Male	White British	6 months – 1 year	Sixth Form Student	High School Graduate
Pauline	17	Female	White British	Prefer not to answer	Sixth Form Student	High School Graduate
Jean	16	Female	White British	6 months - year	Sixth Form Student	High School Graduate

2.3.4 University Students

More males (n=4) participated than females (n=3). Ages ranged from 23 – 58 years (mean =31.26) all had attended university to a varying degree. Four participants between one to three years, two participants between four to six years and one for less than 6 months. The highest level was also varied. Three participants were educated to bachelor degree level, two had postgraduate degrees, one had A- levels and one participant had GCSE's.

Table 2..University Students (US) demographics

Participant Number	Age	Gender	Ethnicity	Length of in their role	Occupation/ Status	Highest Level of Education completed
Focus Group 3						
Miles	58	Male	White British	Less than 6 months	University Student	Postgraduate Degree
Ralph	23	Male	White British	4- 6 years	University Student	Bachelor's Degree
Lisa	33	Female	White British	1-3 years	University Student	College- A levels
Ruth	28	Female	White British	1-3 years	University Student	Postgraduate's degree
Bruce	24	Male	White British	1-3 years	University Student	Bachelor's Degree
Misi	27	Male	White British	1-3 years	University Student	GCSE's
David	26	Female	White British	4-6 years	University Students	Bachelor's Degree

2.3.5 Unemployed Sample

Table 3. Unemployed Sample (UN) demographics

Participant Number	Age	Gender	Ethnicity	Length of time in their role	Occupation/Status	Highest Level of education completed
Focus Group 4						
Callum	43	Male	White British	More than 9 years	Unemployed	High School
Cassie	24	Female	White British	4-6 years	Unemployed	High School
Riley	61	Male	White British	4-6 years	Unemployed	High School
Romelu	55	Male	White British	1-3 Years	Unemployed	High School
Pete	27	Male	White British	Prefer not to answer	Unemployed	High School
Louise	54	Female	White British	4-6years	Unemployed	sOther - PGCE
Linda	24	Female	White British	1-3 years	Unemployed	High School

More males (n=4) participated than females (n=3). Ages ranged from 24 – 61 years (mean =41.14). Amount of time unemployed varied, three participants for four to six years, two for between one to three years, one for more than nine years and one person opted not to answer. The majority identified the highest level of education were secondary school qualifications, one person had completed a PGCE.

2.3 Data Collection

The five focus groups were conducted from September 2017 to March 2018. Focus groups were directed by a semi- structured interview, developed by the author, allowing for flexibility to give participants the opportunity to bring their own agendas (Longhurst, 2003).

Participants were recruited through email advertisement and contact with their service, school or college representatives. Initial contact was made with a representative of each of the organisations who then allowed the study to be advertised throughout their organisations. Poster, flyers and emails were distributed through each of the institutions and interested potential participants were asked to contact the researcher to arrange dates and times to meet. Participants were provided with information sheets and consented to be part of the study, after being offered the chance to ask questions about anything that seemed unclear. Participants provided demographic data including age, gender, and ethnicity, length of time in their role, occupational status and highest level of education. Focus groups were completed within each of the institutions were the samples were recruited from e.g University students were interviewed at their Universities, Sixth Form students were interviewed at their Colleges and the Unemployed sample focus group was conducted at a local volunteering service. The final two groups were made up of Primary school and Secondary school teachers from East Yorkshire and the focus groups were completed in their respective institutions. Ethical approval was received from the Hull University Research and Ethics Committee in September 2017 (See appendix, F).

Participation in this study was voluntary. An individual interviewer carried out the focus groups. The average length of each group interview was 57 minutes. Participants were asked to reflect on their experiences in education, to express their views on aspiration development and to discuss how schools could implement strategies to improve aspiration development in schools. Each focus group was audio recorded and transcribed to allow for data analysis.

Responses from the initial focus group were reviewed to ensure the schedule of questions were understandable and easy to engage with; no changes were made after this group.

2.4 Data Analysis

Focus group interviews were analysed using Thematic Analysis (Braun & Clarke, 2006). This is based upon realist assumptions and intended to explore the semantic content of the responses of each of the Focus Groups. The first author conducted and transcribed the interviews verbatim to ensure that as much of the original meaning was retained. Following this, the author began searching for patterns in the transcripts, generated from initial codes. As more codes were discovered, the more patterns were developed and new codes were pursued. Codes were direct participant quotes, to reduce the possibility of researcher's interpretation bias. Codes were shared with peers and researcher supervisors to ensure that codes were not overlooked. Codes were categorised, reviewed, and revised, with consideration for the research question. These groups were then developed into themes. Themes were discussed with members of the research team and the second author. It became clear at this point that participants reflected on aspiration development on numerous different levels and felt that building aspirations was a complex, layered process. Considering the different factors would offer the opportunity to analyse these areas further. Each of the focus group transcripts were analysed separately, as codes were derived the data was analysed as a whole to develop themes that were common across all of the groups.

The author kept a reflective research journal to monitor the extent to which his own personal biases and beliefs could be influencing data analysis. Continual reviewing to ensure themes are balanced and an honest reflection of the participants experiences as possible. The researcher was aware of his personal impact on the results of the research and potential biases when considering the findings. For example, his interest in the chosen topic may illicit responses from the participants that replicated his passion for this conception.

Results

Nine subthemes emerged from the data (See Table 1), with five main themes: "Importance", "Developing the individual", "Interactions", "Societal Factors" and "Solutions". These themes and their subthemes suggested that the development in aspirations within schools were considered to be important, with consideration of the different levels influencing aspirations and how participants felt schools and teachers could integrate themselves into the aspiration process.

Table 1.

Themes and subthemes drawn from participant' responses.

Themes	Subthemes
1.Importance of aspirations	
2.Developing the individual	2.1 Identity Development
	2.2 Real Life Preparation
	2.3 Invested in and Valued
3.Interactions	3.1 Role and Role Models
	3.2 Parent and Teacher Interactions
	3.3 Being inspired/inspiring
4.Societal Factors	4.1 Staying safe/ Fear of Failure
5.New Methods	5.1 Individual development
	5.2 Exposure

1. Importance

Participants initially reflected on the development of aspirations and explored how and why they felt that it was relevant for school to have a role in development. The data is integrated to reflect how each of the groups talked about the different topics. Groups reflected on the importance of aspirations and how they are developed in school.

University students expressed their opinions on aspirations as a concept *"Aspirations, of course they are important…That's what drives you…. That's what drives the human race"* (UN, Riley)

Highlighting how they have an impact on your confidence and self- esteem and not just your future *"I find that aspirations and goals are vital in life……….. makes me want to push on with life even further and it helps obviously with your confidence and self -esteem" (UN, Romelu)*

Sixth form students considered why it is helpful to develop aspirations throughout your time in the education system *"I say the school is important… because you, you're there so often and you see those teachers pretty much all day, every day, but then to push you towards your aspirations more, they can have more staff for that"(SF, Jean).*

They discussed why they felt that school was important place to develop aspirations, and how trust is an important factor for schools to consider.

"Erm… I definitely think schools, and the educational system in general, has the utmost responsibility to cater to developing a student's aspirations because you spend the majority of your time growing up in school, in education, surrounded by the same teachers… so you grow to… you grow to rely on them in a sense, you trust them" (SF, Pauline)

Teachers expressed their role in aspirations and how they felt it should be regarded as part of the role "*I think most of what we do it raises aspirations-I feel it is the job of the school to facilitate this" (ST, Rachael)*

Exploring how they feel this is important and how they use aspiration as a form of motivation*"You can do better, you can get better, to be better" (ST, Tia)* and how they feel they are well placed to support young people, *"So I think when it comes to aspirations we are the main people that will push them and doesn't matter what background they come from, what kind f influences they've got at home school are the ones that push them there". (ST, Racheal).*

2. *Individual Factors*

Participants discussed the role of school and there are a lot of factors that people felt needed to help focus on the development of pupils as individuals to help them understand themselves and gain a more rounded understanding of the next steps in their lives.

2.1 Identity Development

Participants discussed personal growth and how schools had an important part to play in helping young people gaining a sense of their identities, which allowed them to feel more secure when moving forwards.

University students explored the role of teachers and how they perceived their role in the development of identity *"I think a lot of it a case of fitting what is that there in their aspirations and their identities that has not been revealed yet... like it's a lock that requires a specific key almost". (US, Ralph)*

"I needed somebody to help me find my faults, my downfalls and help me find strength in my identity" (US, Lisa)

Participants reflected on how they felt the education system currently lacked a meaningful process to support them to develop aspirations *"I remember doing a, a careers quiz and getting Fence erector – for somebody who needed help figuring their identities, how does that help"(US, Ruth)*

Sixth Form members expressed the important of identity development and how it makes transitioning through schools, difficult.

'I came to this college with no idea what was going on because you find that if you're in a high ability set you are just left on your own and expected to do. As you get older you are expected to know who you are and what you want – school focuses on grades when they should be developing people… identities' (SF, Fred)

Teachers reflected on how they feel that identity development is important but they feel they are not fulfilling the needs of children. Secondary school teachers felt that.

"We're not encouraging those creative, artistic, practical, doing subjects -kids are passive in school because we are forcing them into a mould and restricting their identities" (ST, Jez)

"We need to appreciate that they are children and not a statistic…. there is just no freedom to help them develop their identities…" (PT, Corinne)

2.2 Real Life Preparation

Another aspect of the groups' reflections on education and aspirations was that participants felt that the role of schools were to help young people for the reality of life, to help young people gain an understanding of what is available after school and preparing them for life outside of it.

Teachers felt that their role was to *"Bring the scary world to them" (ST, Tammy)*

The unemployed group felt that *"I think schools is building kids for real life isn't it" (UN, Riley).*

Whereas Sixth Form group expressed their concerns about the current role of schools in preparation for the next stage of life.

"It was more quantity over quality I guess, they were trying to get as many people as they could through secondary without any consideration for how they came out at the end". (SF, Fred)

Secondary School teachers reflected on the experiences of their students, and how past pupils had felt unsupported when considering the next stages of their lives.

"Feedbacks as well from students is that I wish I'd had training at school on I don't know, manage a bank account, how to pay for university, things about life in general" (SS, Tammy).

Teachers also expressed how their students were under prepared

"They've no idea how competitive real life is – I feel it should be our job to tell them" (SS, Becky)

Or was unaware of how to manage activities of daily living following their school experiences.

"They don't know how to manage money or how to even earn it" (SF, Tammy)

Discussions focussed on the arguments between grades and real – life experiences

"They might come out of school about a GCSE in English but have no idea to speak to people or how to go to an interview and get a job" (SF, Dora)

2.3 Investment and Feeling Valued

An aspect of aspiration development was discussed in terms of individuals feeling respected, invested in and valued by teachers. Groups reflected on the importance of this and how it helps them to instil confidence and to be able to develop positive aspirations moving forward.

Sixth formers reflected on the importance of investment:

"That would always be put first but towards the end of the lesson you could go to them with something you needed to talk about – teachers that showed that extra investment in you" (SF, Fred).

On respect:

"Helped us because we felt like they respected us, they were pushing us for us not for them" (SF, Pauline)

On motivation:

"A teacher that pushed me and saw something in me and said you need to go for it and saw to be a Teacher and that's when I first thought of it" (ST, Jez)

University students felt that investment was a trait that was rare in teachers:

"The ones that kind of were interested in how you were doing you know……. That kind of like investment that you cannot really fake that can you, you cannot really fake that investment in you" (US, Ralph).

"Every teacher like Ralph said has to be invested in the student" (US, David).

The unemployed sample discussed investment and how they felt it was lacking from their experiences, describing the education as a factory:

"Secondary School is more of a factory – No investment….Junior school is where they pay students more attention" (UN, Callum).

How schools failed to encourage:

"Teachers didn't encourage me much….they did not ask the questions…. I feel they had no time to invest in my needs" (UN, Romelu).

Primary school teachers talked about the restrictions they felt and how it was difficult to invest in their pupils.

"*We have to tick so many boxes we don't have time. Oh he's brought an acorn in today let's get fascinated about it….Right it's an acorn….. Right I will see you later. We aren't investing in things they are interested in"* (PS, Fiona).

3.Interactions

3.1The Role and Role Models

Groups talked about the role of a teacher and how there is potential to have many sides to it. It was discussed in the sense of aspirations and what was required for teachers to be supportive in aspiration developments. It was discussed a lot how people felt that the roles of teachers were also to be role models. It was felt that all groups and all participants recognised role model teachers. It was often reflected how teachers are the first contact young people have with a person in a position of profession, so the interaction with a teacher is important to lay the foundations of positive aspiration development.

The university group reflected on what was important.

"The role is to be their role models and to act as a sounding board to their ideas" (US, Miles).

The unemployed group talked about what they perceive the role of a teacher to be.

"The teacher's role should be I never, ever am going to stop my aspirations for anybody coming through the door and I have got respect for anybody" (UN, Wendy)

"I noticed a lot of teachers are in a very safe job so they don't have to think about aspirations because they are safe" (UN, Callum)

Primary school teachers reflected on what they feel their role as a teacher is.

And teachers made me really enjoy it and that is why I wanted to be a teacher because I wanted kids to enjoy school how I enjoyed school and you don't realise how much you are making a change sometimes" *(PS,T)*

That we do make more of an effort to make sure we are there and are there for the children and build really good relationships with the children.

"We are not just teachers – we are teachers, mothers, social workers" (PS, Fiona)

"We are filling all of those gaps that they don't get from home" (PS, Ivy)

"We are mopping up for those missed parts at home" (PS, Chantelle)

Secondary school teachers reflected on their experiences and what had led them to follow in their chosen profession and how the role of a teacher is to instil inspiration and aspiration by being a good role model.

"I had a really good English teacher. I was like I really want to be like you and be an English teacher". (ST, Racheal)

"My role models were my teachers…….. when I looked at my teachers, I saw successful people who'd done well and had a purpose and were influential and important" (ST, Dora)

University students discussed how their first experiences of role models were found to be their teachers.

"Role Models, you know we have talked a lot about – that there is this idea of a teacher that is going to inspire you one way or another but even still everyone comes across a lot of their teachers in their school lives so there are plenty of opportunities there for role models as educators" (US, Ralph).

How teachers can be meaningful role models for the pupils that may not have that figure at home:

"I would agree, role models for people who are without like the parent who can push them" (US, Bruce).

"Teachers aren't just there to teach Maths, English and Science are they…..They stand in front of us as role models" (US, Lisa)

"Maybe it sounds like it is the inspirational teachers that are more important than really formal careers advice – do you know, just having that role model" (UN, Misi).

Teachers reflected on themselves as role models.

"I think it is such a big thing and I think it is nice that they do because sometimes they maybe need that as they don't have a figure to look up to" (PS, T).

"We need to be those people that they remember and can do funny things and try and inspire them because otherwise they just blend into the background" (ST, Jez)

3.2 Parent and Teacher Interactions

Groups talked about the importance of their close relationships for aspiration development and spoke about how the relationships with their parents and the link between teachers and parents were integral to positive aspiration development. It was felt that aspiration development *"Very much depends on the attitude of the parents" (PS, Fiona).*

Teachers discussed how it can be difficult at times when the relationship with parents breaks down. It is reflected that at times parents do not engage with schools which subsequently impacts young people's development and their aspirations. *"Sometimes they're scared that they're not as clever" (ST, Jez).*

Teachers expressed how the relationship between teachers and parents needs to run further than school hours.

"Parents saying I want you to do the revision here's the revision sit at the table and do it but that's the extent of the support" (ST, Tia)

"They come into school for parents evening and don't say a word and sit in front of you with their eyes to the floor as if it's their parents evening" (ST, Racheal)

"We need parental involvement, a lot of parents buying into it instead of very scared of us" (ST, Jez)

Primary school teachers also echoed the need for relationships with the parents and the potential parent's reflections of the school and teachers pay impact the parents. *"It is like hard, because are negative like you say towards us"* (PS, Ivy).

They spoke about conflicting opinions can restrict aspiration development.

"The message to them at school that you can do this, but they go home and parents feed them the opposite" (PS, Corinne).

Or how negative opinions of school are reflected in the child's behaviour.

"Their opinion is hate maths so you will hate maths because it is horrible and really hard" (PS, Jaden)

"What parent support you put in with them they feed the message back to the kid". (PS, Chantelle)

"I had a parent that said they can't be arsed to do homework, can't be arsed to read books at home and then the child that I teach that was his attitude 24/7" (PS, Fiona)

And how a change in attitudes towards teachers has had an impact on the level of influence teachers perceive they have.

"Something has changed with parents and having respect for teachers" (PS, Ivy)

"My parents taught me that you respect your teachers - something has gone wrong and parents are so quick to want to have a go at us find that we are in the wrong and I think our relationships with the children is changing because of that" (PS, Chantelle)

University students discussed how breakdowns between school and their parents had an effect on their ability to formulate their aspirations and how, without schools and parents interacting, there was a potential to feel lost.

"Like why I wanted to do more, school wanted me to do more to them (parents) they were like you have a job I don't understand why you are not happy" (US, Misi).

One individual talked about the lack of interaction and how this influenced his experience of school.

"Could have like glided by school if like flunking everything without my parents knowing. They wouldn't have known unless I was not well behaved" (US, Bruce)

3.3 Being Inspired/ Inspiring

After identifying that teacher's should be role models the groups talked about the specific traits that led them to feel inspired by a teacher and the things that they had experienced in school, which empowered them to believe they were able to achieve. *"The personal qualities of a teacher….. to show your pupils to change their directions or to aspire" (US, Lisa)*

Sixth form students expressed that a teacher showing passion towards a subject helped them to engage and aspire.

"I should say teachers… making subjects you enjoy are more likely to impact what you want to do as a career" (SF, Fred)

Participants illuminated how particular traits may lead for a dislike of the subject.

"A teacher who is strict instead of the nicest person to be around that might lean you towards not enjoying the subject in question" (SF, Pauline)

Or instil enjoyment:

"She was extremely friendly and you underestimate how inspiring that can be" (SF, Jean)

"They were clever, they were clever and funny and confident" (ST, Sandra)

"You felt like it what special the things you were learning, it was things that not everyone else knew, that's what I liked" (ST, Becky)

How passion can transcend to pupils, when demonstrated by the Teacher:

"You say passion, the fact that they've got that passion that they see that" (ST, Dora)

"Such passion that you were mesmerised with his teaching" (ST, Tia)

"It was the love for his job that shone through and his love for the students yeah". (US, J)

How building trust can lay the foundations for inspiration:

"Build up those positive relationships with students. I feel that when somebody is trusted in you it is the first step to helping them be who they want to be" (ST, Jez)

"It is a lot about trust. Especially in this school, you have to build that trust. I felt when I was at school I was able to put my future in the hands of my teacher. I think trust precedes inspiration…." (ST, Tammy)

4. Social Economic Factors

4.1 Staying Safe and Fear of Failure

In terms of aspirations, groups reflected on the barriers they perceive when working through aspirations. It was discussed that people coming from these areas envisage a *"Social – Glass Ceiling" (PS, F)* that restricts or prevents young people from holding high aspirations and that is reflected in teachers attitudes and school policy. Groups talked about the potential fears of failure and how having low aspirations acts to keep young people safe.

Secondary teachers talked about the financial fears attached to further education and how pupils *"Understand debt. Very, very well" (ST, Becky)* and how it is felt that further education and higher aspirations are secondary to that:

"When they hear 40 grand worth of debt, they think, that's just dangerous". (ST, Dora)

"It's not about education, it's about how quickly can I earn money – How quick can I feel secure" (ST, Tia).

They don't think at some point that they'll ever want more than that. *"It's almost like they're settling, that'll do, I'll settle for that" (ST, Sandra).*

University students discussed social norms:

"But I was guided in that direction because it was not the norm – it was safety" (US, Bruce).

The unemployed group continued to discuss this and felt that they do not feel part of society and feel safer having lower aspirations:

"Everybody is climbing big massive ladders and you are at the bottom looking up and they are all chucking each other off it just to get at the top" (UN, Cassie).
Reaching for the higher aspirations appears dangerous, as they look ahead to the potential negative outcomes of aiming above the norm.

"The bigger you are the higher you fall". (UN, Riley)

"The higher up the ladder you are the further you have got to fall". (UN, Callum)

"If you're at the bottom it is harder to fail". (UN, Cassie)

Primary School teachers reflected on parental restrictions and how debt, societal norms and geographical restrictions restrict young people's aspirations:

"Yeah so they have a real blocked, sort of glass ceiling that they can ever achieve any of that. Stay down here, up there is dangerous" (PS, Corinne).

5. Solutions

Groups were asked to consider how they would like to improve the current education systems and how, if they deemed it relevant, they could increase aspirations and encourage young people to aim higher. Aspirations are considered to be a product of the interactions between the individual, interpersonal and societal and the role the education system has to play.

5.1 Individual Based

When considering individual based interventions, groups talked about having somebody to be able to balance the academic with the personal, and support each young person to create realistic aspirations.

"There's always something or somebody that slips through the net and then we feel like we've let that person down or we feel like we haven't fulfilled that part of intervene and inspire and expose more and educate in the different sense then what we actually do" (ST ,Becky)

Others agreed that a more personalised approach to aspiration development would be helpful:

"Grades are not reflective of the true personality, ability and capability of the student. The advisor can advise and is someone that knows that because they know their level and know where they should be" (US, Miles).

"You know so it is that person as knowing that student as a person that might make that difference. They might understand why, if they understand you and what's going on around you" (US, Bruce)

Participants reflected on the potential reasons why the current solutions are not effective.

"I think the reason that we do not use these careers services because they don't have a clue who we are and like the scale of our visions."(US, David).

"Are not content until they have it all but you don't know that unless you know the person you cannot just gauge that through an appointment"(US, Lisa).

"....assigned a mentor like a tutor if you will. That you can keep going back to, and asking advice but I guess that you applied that in high schools people would get to know you and your visions". (US, Ruth)

Participants focused on how the school should aim to inspire young people:

"Good teacher or a good school - would say its open… its open …. It's open house…. The possibilities are endless you are endless you can do what you want to do" (UN, Wendy)

Discussions were held to consider how they can incorporate time into the curriculum to help build identities:

"Treated as a lesson…….. Being taught about what's out there, what is available and who they can be" (UN, Callum)

Primary school teachers agreed with this.

"Free up the curriculum…. .. This is what you do and this the amount of money that you get paid and then this is the type of things that you can afford with that money…." (PS, Ivy)

"*There needs to be time allocated to teach children about aspirations and it needs to come from teachers*". (PS, Corinne)

5.2 Exposure

Groups talked about a big restriction of people's aspiration development being exposure and how exposures to different areas and communities was discussed.

Secondary school teachers suggested mentors, which were external to the school system to spend time with you people to aid them with their aspirations:

"Mentoring, like you said bringing in people from outside of the community and business leaders and that kind of thing. Individual mentors with time for the kids to meet with them and not just in year 11 and trips" (ST, Tia)

Allowing young people to see what is available, because how can young people aspire without knowing what is available to them.

"*Taking them to like universities, different universities, and different subjects. Exposing them to the world" (ST, Tammy)*

University students explored the prospect of exposure and how they may have benefitted from more of getting experience of different things:

"How can you know what jobs exist in the world if you don't know what is around you" (US, Miles)

"More real world or had more exposure to more different real world roles". (US, Ruth)

"Exposure to like what was going on in the world would have been nice" (US, Misi)

The unemployed volunteers how they try to work support others to be exposed to occupational possibilities

"We try to take people to different activities and areas where people can work that they didn't even know existed. It is opening up your ideas". (UN, Romelu)

Bringing external members of the public in to increase their exposure to what is available:

"Different people from the community that did different jobs and they would come and do like a half an hour talk to each class, and then just rotate around and talk about their

jobs and what they did and how they get into and what qualifications you need see what other people in the community did". (PS, Ivy)

Discussion

The current study aimed to explore aspiration development in school. Specifically, it aimed to uncover whether people felt aspirations were important and what had been helpful in forming them. The study used Thematic Analysis to interpret data derived from Focus Groups. This discussion summarises the main findings and explores themes in more detail, with reference to existing literature.

Summary of main findings

Emergent themes were linked to existing educational literature. Personal development, relationships with others and perceptions of where they are in society were key to participants understanding of aspirations. Participants reflected on how feeling inspired, being valued and invested in were important for aspiration development and that exposure to real world situations are lacking in current education programmes.

Findings provide an understanding of how the participants in this study perceive, understand and work toward building positive aspirations. Overall, all participants felt that aspirations should be an important factor in the school curriculum and that schools should become more focussed on the aspirations of young people. Participants showed a good understanding of what would be needed in schools to lead to the development of positive aspirations. Results are similar to Gottfredson's theory of aspiration development, analyses identified the complexities of aspiration development and how the focus is not solely on the young person as an individual, but that there is a consideration in their interactions with teachers, family and their external world. Similar to existing literature, which discusses child development focus must be placed on young peoples' interaction with their larger environment (Brofenbrenner, 1992). Themes will now be discussed in relation to theoretical and empirical papers, with a focus on the relationships between themes and the implications for clinical practice.

All groups discussed that aspirations were important, and that schools had an integral role in their development. Students and the unemployed group felt that school was the most important place to develop a sense of self and to use aspirations as a driver to increase confidence and self-esteem. Findings were consistent with literature, highlighting that teachers in schools are in the most important position to help young people develop

aspirations (Dunlop, 2015). Where it was considered that young peoples' needs are being neglected.

Groups discussed identity development and how schools are currently restricted in working with young people to help them gain an understanding of who they are. Erikson's psychosocial theory (1968) proposes that young people must develop a coherent identity during adolescence and be engaged in exploring values, beliefs, independence and exploring careers choices. A lack of an understanding of identity may lead to psychological difficulties in the future (Goth et al., 2012). Similar to aspirations, young people's identity is constructed through interaction with their contexts, and significant care givers (Stryker & Serpe, 1994). Previous literature highlights identity development as a life-long process and explored socio-economic status, gender, psychosocial-adjustments and adolescent parent relationships (Benson & Elder, 2011). Social spaces in schools, maximising flexibility and promotion of transparency (Abbasi & Noori, 2016) are helpful developments to create identity-developing environments in schools. Participants in the current study highlight how the development of identity is inseparable from aspiration development. It was crucial for schools to be a part of the development of identity provided a safe space and appropriate support for young people to gain an understanding of who they want to be.

Participants experiencing feelings of investment and value helped them to develop aspirations and lack of this resulted in disengagement from moving forwards. These concerns can be understood in the terms of Maslow's hierarchy of needs (1943) in which feelings of value and belonging are required before the higher levels of need such as esteem and self-actualisation. Participants expressed that feeling safe and valued was important and had a positive effect on the formulation of aspirations. Experiencing valued support was considered important in educational settings (Gilligan, 2000) general but never discussed in literature in relation to aspiration.

A focus on interactions was illuminated as a theme. Participants discussed the young person and teacher dyad and how it is important that they all work together to facilitate positive aspirations. Participants talked about how information should be shared more effectively to aid young people to develop aspirations. When discussing 'interactions' participants illuminated the importance of being inspired and how teachers act should act as role models because teachers are often the first time young people meet a professional.

The importance of interactions in education has been acknowledged elsewhere in in the literature (Rowjeski & Yang, 2007). Similarly to this study, it is stressed that there is an importance of having multiple sources of information.

Ecological system theory also predicted that participants were aware of societal changes and the subtheme 'fear of failure' they described how they felt their aspirations were limited by a self-perceived 'social glass ceiling' that prevented young people from reaching their potential. Participants felt that there was an understanding of danger and debt that young people considered before aiming high. Teachers, students and the unemployed all talked about feeling safe and being unsure about 'climbing the ladder'. Literature supports how the individual is aware of their surrounding contexts and makes decisions based on this. Previous research identifies that people from lower socioeconomic backgrounds (Wahl & Blackhurst, 2001) and how people construct their aspirations based on their understanding of how society views them. Current research illuminates the voices of people from lower socioeconomic backgrounds and highlights how fear is a barrier to individuals from such backgrounds holding high aspirations.

Themes may also be interrelated. The groups talked about all of these themes interchangeably. There are factors present in other themes that relate to aspiration development; like having positive relationships with parents (Wintre & Yaffe, 2000), feeling part of society (Coffield, Borril & Marshall, 1986)

Strengths and Limitations

This study is one of a few giving people, educators and the unemployed a voice about their experiences of aspiration development throughout education. To reflect retrospectively on what was helpful, or what is required to help young people develop positive aspirations. The use of focus groups allowed for groups to generate realistic, engaging debate about the research topic and it was clear that participants had a lot to say about education, providing recommendations for improvements.

Despite the inclusiveness of this research, there are limitations in the methodology. Although group settings encouraged debate, it was clear that participants were careful of what they shared in-group settings. Despite attempts at reducing the "dominant voice" (Smithson, 2000) in sessions, in the Unemployed group two of the participants did not contribute to the discussion. Group discussions may inhibit the participant's ability to talk

freely. The use of focus group data can have limitations. While the groups were facilitated to hear everyone's voice, in some cases, participants shared more opinions, and their reflections may be more represented in the outcomes (Poland & Pederson, 1998). Another limitation is the possibility of social desirability of narratives and it could be assumed that teachers may have shared positive factors about their respective schools, but in this case, the effect seems minimal, as participants provided varied reflections on the development of aspirations. Participants in each of the Focus group knew each other as a result of them sharing seeing each other in their respective institutions, again results should be interpreted with caution as individuals may have previously discussed issues explored in our sessions. Similarly, participants true reflections may have been inhibited as a result of knowing other members of the group and fearing that the information provided may be discussed outside of the group.

Thematic analysis allows the author to analyse the perspectives of participants, but findings are not generalizable to others (Willig, 2013). Therefore, other teachers, students or unemployed people may have experiences that this research may not discuss. Additionally, although the choice of analysis was not an interpretative approach, the research does contain elements of the researchers own beliefs, assumptions and approach. Another researcher with different personal experiences may have different interpreted the data differently. Researcher reflections are provided (Appendix N) to offer transparency.

All participants were 'White British'. Different cultural motivations toward aspirations exist (Seginer & Vermulst, 2002); therefore, findings may not reflect the understandings of aspiration development cross-culturally. More females, than males took part and Warrington et al., 2000 identified that both sexes reflect on their school experiences differently. Therefore, no findings related to gender can be generalised. No male teachers were part of this study. Furthermore, the recruitment process may reflect self – selection bias as participants volunteered to take part. The majority of participants wanted to reflect on the lack of aspiration development in schools and this may be reflected in the findings and may bias results. Additionally, a number of participants dropped out of the research as they were unable to make the session times.

Implications

The current study has a number of implications, for individuals, services and for the development of future policy in relation to the facilitation of aspiration development in schools. The focus on what is considered important by both professionals and school

attenders is a novel addition to the literature, providing considerations for clinical work with young people, professionals supporting them and establishing positive links with the families. The findings highlight the importance of school staff having an awareness of young peoples' needs when for developing aspirations. Participants expressed the importance of aspirations and the link it has with identity, feeling valued and being inspired during school. Clinical Psychologists can work in collaboration with schools to provide a structure that supports educators into providing this may allow young people to benefit from education in a more positive way. Supporting young people to develop identities through formulation and clinical discussions can be used in conjunction with teaching programmes to support young people to develop meaningful aspirations. Work is to be considered in facilitating interactions between teacher, parent and pupil to provide a whole school approach and to educate people on the importance of aspiration development and use the results of this research to provide future school interventions to support in the development of aspirations. The integration of psychology, education, parent support and the aspirations of each young person may prove a beneficial antidote to documented difficulties of youth unemployment or mental health issues that develop as a result of young people dissatisfied with future prospects (Dunlop, 2015).

Participants in this study saw developing role models and maintaining positive parent teacher interactions as key. If schools were able to maintain positive parental relationships, increased opportunity for high aspiration development may be induced. The most positive experiences came from people who could identify with a significant adult who had seen them as human beings rather than statistics. Lastly, participants made it clear on the potential changes, most commonly addressing the lack of exposure, would be beneficial. As low confidence and identity confusion results in a fear of failure. Exposing experiences, identity development and management of this fear could be worked on with professionals to increase the possibility of high aspirations being developed.

Finally, the findings may have implications beyond the education system. Thus recent Healthcare policies (DfES,2003), focus on taking into account young peoples' experiences in the education system, but the focus of success is around attendance, behaviour and academic attainment but the current method lacks a contextual focus. A shift in focus, to promote the importance of such attributes should be introduced to fully explore and understand the concept of aspirations. Focusing on developing young people further than the current curriculum allows for. Policies should focus on professional practice, developing frameworks that focus on the Maslow's hierarchy of need and

integrating the Ecological System model when helping young people to gain a sense of what the next steps are for them. There is a further need for teachers to be a support blanket to provide safety but to enthuse young people to break social stigma and perceived barriers.

Future Research

Given the limitations of this study, it was difficult to investigate all of the relevant factors. Scope for further research were indicated.

 This research may have benefitted from including the views of parents alongside their children and their teachers to further explore potential convergence and divergence between responses and an increased level of understanding of the interpersonal aspects of aspiration formation. Regrettably, this information went beyond the scope of this study, but should not be overlooked for future research. The current study focussed on a larger sample of different opinions, vast data was obtained but future research should focus on particular samples to allow for rich, manageable data to be collected. A future approach may consider methods adopted by teachers and the impact this has on young people and a clearer exploration into the mechanisms in place may be beneficial.

This study provides a unique and contemporaneous insight to how young people, teachers and unemployed consider the role of aspiration development in schools, and it provides potential directions for future research.

Conclusion

This study highlights the views and perceptions of students, professionals and the unemployed and their aspirations. The results provide an alternative viewpoint to the current literature, with recommendations of how to instil a positive outlook. The findings have far-reaching implications, as schools were considered important in the development of aspirations. Suggestions for clinical work with young people were noted, as was the need for training education professionals in the importance of aspiration development.

This research has given a collective voice to young people and professionals supporting them, providing the foundations for more research to understand how young people develop their aspirations and how schools can work to support this. This vital work helps develop young people's identities and frees them from the self–perceived glass ceiling.

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PART THREE

Appendices

Effectiveness of Community based interventions for young people with difficulties with social, emotional and behavioural well-being: A systematic review

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Question	Yes	No	N/A	Rater Comments
1 Is the hypothesis/aim/objective of the study clearly described?				
2 Are the main outcomes to be measured clearly described in the Introduction or Methods section?				
3 Are the characteristics of the patients included in the study clearly described?				
4 Are the interventions of interest clearly described?				
5 Are the distributions of principal confounders in each group of subjects to be compared clearly described?				
6 Are the main findings clearly described?				
7 Does the study provide estimates of the random variability in the data for the main outcomes?				
8 Have all important adverse events that may be a consequence of the intervention been reported?				
9 Have the characteristics of patients lost to follow-up been described, if applicable?				
10 Have actual probability values been reported (e.g. 0.035 rather than < 0.05) for the main outcomes except where the probability value is less than 0.001?				
11 Were the subjects asked to participate in the study representative of the entire population they were recruited?				
12 Were those subjects prepared to participate in the study representative of the entire population they were recruited?				
13 Were the staff, places and facilities where the patients were treated representative of the treatment the majority of the patients received?				
14 Was an attempt made to blind study subjects to the intervention they received?				
15 Was an attempt made to blind those measuring the main outcome of interventions?				
16 If any of the results were based on 'data dredging' was this made clear? (I.e. retrospective unplanned analyses)				
17 In trials and cohort studies, do the analyses adjust for different lengths of follow – up of patients, or in the case of control studies, is this time period between the intervention and the outcome the same for cases and controls? (if differences in follow- up are ignored, state 'no')				
18 Were the statistical tests used to assess the main outcomes appropriate?				
19 Was compliance with interventions reliable?				
20 Were the main outcome measures used accurate (valid and reliable)				

21 Were the patients in different intervention groups (trials and cohort studies) or were the cases and controls (case-control studies) recruited from the same population?				
22 Were the subjects in different intervention groups recruited over the same period of time?				
23 Were the study subjects randomised to intervention groups?				
24 Was the randomised control intervention assignment concealed from both patients and staff until recruitment was complete and irrevocable?				
25 Was there adequate adjustment for confounding in the analyses from which the main findings were drawn?				
26 Were losses of patients to follow up taken into account?				
27 Did the study report a power calculation?				

Appendix C: Data Extraction Form

Data Extraction Form.

Study	Intervention	Design	Target Intervention	Sample	Intervention Description (Aim/Format/Characteristics/Content	Main Variables, measures and outcomes

Appendix D – Paper Selection Strategy

Study Selection (Inclusion and Exclusion Criteria)

Studies were selected based on the following criteria:

1) Published between 2000 and December 2017

2) Intervention study or evaluation conducted in the UK,

3) Participants aged between 3 and 18 years old,

4) Intervention delivered in community settings (Outside of NHS institutions),

5) At least one primary outcome measure related to emotional, psychological or social well-being.

6) Interventions targeted at vulnerable young people.

7) English Language

Exclusion Criteria

1) Children over age 3, under age 18

2) Interventions in hospitals or acute settings, or within mental health services

3) No results or outcomes, or impacts presented

4) Non – English Language

5) Review articles with no recognised procedure or data collection

6) No strict methodological criteria were applied due to the known variability in the literature

7) Within the current view 'vulnerable young people' included those considered to have social, emotional or behavioural difficulties.

Search Strategy

Fields: Abstract and Title

Keywords:

 ((Adolescent* Or Child* Or Youth Or "young person"* Or Teen* Or Pupil* Or Student* Or Learner*) N3 (Psychol* Or "Mental* Health" Or Emotion* Or Resilien* Or Depress* Or Anxi* Or Transition*))

And

TX (Uk Or United Kingdom or Britain Or England Or Wales Or Scotland Or Ireland)

And

((Prevent* Or Intervention* Or Program* Or Course or Therap* Or Initiative*) N3 (Communit* or societ* or social*))

Application of limits and paper selection

Figure 1, on the following pages illuminate the stages taken in this systematic literature review and reported in Part one of this portfolio.

Appendix E: Quality Ratings of Papers for Systematic Literature Review

The following table provides the authors of all of the studies included un the systematic literature review that is part of this portfolio and shows the quality scores calculated using Downs and Black (1998) quality checklist.

Author of Study (Year)	Quality Rating (Maximum Score. 25)

Quality Ratings of Papers for Systematic Literature Review

The following table provides the authors of all of the studies included in the systematic literature review that is part of this portfolio and shows the quality scores calculated using Downs and Black (1998) quality checklist. Scores are rated out of 27.

Study Authors (Year)	Quality Rating (max. 27)
Aldred, Green and Adams (2004)	19 (70%)
Downey and Williams (2010)	20 (74%)
Gardener, Burton & Klimes (2006)	18 (67%)
Hampshite & Matthijsse (2010)	14 (52%)
Humayun et al., (2017)	20 (74%)
Lovering et al., (2006)	14 (52%)
Simpson et al., (2010)	18 (67%)
White, Agnew & Verduyn (2002)	22 (81%)
Wynne et al., (2016)	20 (74%)
Yadav, O' Reilly & Karim (2010)	16 (59%)

Reference

Downs, S. H., & Black, N. (1998). The feasibility of creating a checklist for the assessment of the methodological quality both of randomised and non-randomised studies of health care interventions. *Journal of Epidemiology & Community Health*, *52*(6), 377-384.

Appendix F: Letters to Confirm Ethical Permission

Removed for hard binding

Appendix G: Study Information for Participants

<u>Participant Information Sheet</u>

Title of the study: Young adult and professional's perspectives of the role of educators in the development and maintenance of aspirations.

We would like to invite you to take part in a research study, which is looking at perspectives of the role of educators in the development and maintenance of aspirations in young people. Before you decide if you want to participate, we would like you to understand the reasons behind the study and what is expected of you before you decide whether to take part. The researcher will answer any questions you may have.

<u>What is the purpose of the study?</u>

Aspirations provide us with an ideas and a sense of direction, of the next steps to take. Previous research highlights the importance of aspirations and how they are developed in young people, when implemented at an early age. Studies have identified that young people with early- developed aspirations are more likely report greater satisfaction, later stages in life.

Aspiration development is a process influenced by socio-economic status, parental engagement, parental occupations and school expectations. However, researchers in Scotland have argued that the education system has a significant role in developing the goals and aspirations of their students. The current study aims to investigate how students and educators perceive aspiration development, what is in place to aid young people as they transition into adulthood and have students or educators considered different ways of facilitating the development of aspirations.

<u>Why have I been invited?</u>

We are inviting you to take part because either you are an educator of young people or you are a young person who has recently been in secondary education. This study also aims to gather the information of people whom are currently unemployed, therefore you may have been asked to take part in this study as a result of your current occupational status.

<u>Do I have to take part?</u>

It is up to you to whether you would like to take part. We will talk to you about the study and go through this information sheet. If you agree to take part, we will then ask you to

sign a consent form. You receive a copy of the information sheet and the signed consent form. You are free to stop the research at any time, without giving a reason.

What will happen if I decide to take part?

If you want to take part, you will be involved in a "focus group". This will involve having a discussion around some questions that the researcher will provide with between 6 and 12 people who are members of your institution that are working or studying at the same time as you. You can choose to be involved in the discussions however; you like and can answer as many or as few questions as you wish. The focus group will take place at the (Insert Premises, depending on which group receives this) at a suitable time. The focus group will last between an hour and an hour and a half, with a break at around half way. Discussions will be recorded so it can be listened to and typed up later. All of the recordings and typed up Focus group data will be kept locked away, and have no personal details on them.

Will other people know what I have said?

During the focus group, you may want to raise points that you may not want people outside of the group to know about. Everything you speak about in the focus groups will remain anonymous and confidential. Non-anonymised information (e.g. signed consent forms and your personal information) will only be accessible to the researcher and will be securely stored at the University and kept separate to the recordings and transcriptions. Some direct quotes from your group may be used in the write-up of the study but none of your personal details or any identifiable information will be included.

If you tell the researcher something which gives us concern for your own or someone else's safety we may have to tell someone else about this. Should this occur, we would discuss this with you before any action was taken but in some cases, the researcher may need to tell someone about these concerns without asking you first.

What are the possible disadvantages and risks of taking part?

Discussing perceptions of young people and the role of education in aspirational development may be difficult, so it might bring up topics that you feel uncomfortable talking about. If this happens, you will be given details of where you can get further support. You will be asked if you feel you need this after the focus group or you can leave the focus group at any time if you would like. If we become worried about your wellbeing

we may have to inform the relevant staff at your institution, and this will be talked about before we do this.

If you take part, you would be contributing to an under-researched area around the impact of the education systems role in aspiration development in young people, as we are aiming to publish the research when it is completed. Growing support from government and other schools may influence how young people's aspirations are addressed in schools.

What will happen if I decide I no longer wish to take part?

If you agree to join the research and then change your mind, you can. You are free to leave the focus group at any point. However, any information you have provided up until the point you leave the group, will be retained. Confidentiality will still apply.

What if there is a problem?

If you are worried about any part of this study, you can speak to the researcher who will try to answer your questions [Ross Davis, R.G.Davis@2015.hull.ac.uk]. If you are still unhappy and wish to take this further, you can do this by contacting the Associate Dean for Research, Faculty of Health Sciences, University of Hull, Cottingham Road, Hull, HU6 7RX. 01482 463 342 or Dr Annette Schlosser, research supervisor (contact details below)

What will happen to the results of the study?

After the study is completed, the results will be written-up as part of the researcher's thesis and may be submitted for publication in an academic journal or presented at conferences. Some direct quotes from your interview may be used in the write-up but none of your personal details or any identifiable data will be included.

Who is organising and funding the research?

The researcher is a doctoral student in Clinical Psychology at the University who is also employed by the Humber NHS Foundation Trust. This study is part of his doctoral research project. The University of Hull is providing research expenses.

Expenses and Payments
Your participation in this study is voluntary; therefore, there will be no payment for taking part.

Who has reviewed the study?

The Research Ethics Committee checks all research at the University of Hull. This study has been looked at and agreed by the School of Health and Social Work Ethics Committee.

<u>Further information and contact details</u>

If you are interested in participating, you can:
- Ask the member of staff who gave you this leaflet to pass on any queries to the researcher, and provide contact details if you are interested in taking part.
- Contact the researcher, Ross Davis, via the details below.

If you would like any further information about this research, please contact me:

Ross Davis

Doctorate in Clinical Psychology

School of Health and Social Work

Aire Building, University of Hull

Cottingham Road

Hull

HU6 7RX

Telephone: 07572 151033

E-mail: R.G.Davis@2015.hull .ac.uk

This research project is being supervised by:

Annette Schlosser

Doctorate in Clinical Psychology

School of Health and Social Work

Aire Building, University of Hull

Cottingham Road

Hull

HU6 7RX

Telephone: 01482 464804

E-mail: A.Schlosser@hull.ac.uk

Thank you very much for your interest!

Appendix H Consent Forms

CONSENT FORM

Title of Project: Young adult and professional's perspectives on the role of educators in the development and maintenance of aspirations.

1. I confirm that I have read and understand the information sheet dated (insert date) for the above study. I have had the opportunity to consider the information. If I had any questions, they have been answered satisfactorily.

☐

2. I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason, without my role or relationship with my employer, colleagues, teachers or lecturers being affected. I understand that the information that I have provided will still be used if I withdraw.

☐

3. I confirm that direct quotes from the interview may be used in future publications or conference presentations and understand that they will be anonymised. Any quotes that might identify me will not be used in publications.

☐

4. I agree to take part in the focus group understand that this will be audio recorded.

☐

5. I agree to ensure sensitive details or information about other participants is not shared outside of the group settings.

☐

Name of participant   Date   Signature

_____   _____   _____

Name of person taking
consent

Date

Signature

_____   _____   _____

Name of Researcher: Ross Davis

Please initial boxes

When completed: 1 for participant; 1 for researcher site file;

Appendix I Focus Group Interview Schedule

Focus Group Schedule – Students/ Unemployed

The focus group schedule will not be strictly followed, but rather, used to guide questions and the general direction of the discussion.

Research Question

Experiences, understanding and perceptions of how their personal aspirations are developed and the role, if any that school had in this.

Focus group aims:

- To investigate how ex pupils of Secondary schools felt about their experiences in school, what things were in place to aid them to develop aspirations.

- To investigate what students had felt had gone well in school, what may have been done differently and how aspiration development has led them to where they are today (academically/ occupationally).

Questions

1. What impact or experiences do you have of developing aspirations growing up?

   Prompts   Life changes   Self-perception   Others perceptions Significant others   Education

2. What were your experiences in Education regarding aspiration development?

   Prompts   Perceptions of them   Expectations of achievement   Changes in behaviour   Everyday life   Goals/Ambitions   Significant Relationships

3. What has been helpful/unhelpful for you in developing your aspirations and goals?

   Prompts   Class Expectations of achievement   Stigma/discrimination Isolation   Support   Parental Influence

4. Should schools be significant in the development of aspirations? What would this look like?

Prompts   On the wider community   Schools role   How else are aspirations developed.

Focus Group schedule Teachers and Educators.

<u>Focus Group Schedule – Teachers and Educators</u>

The focus group schedule will not be strictly followed, but rather, used to guide questions and the general direction of the discussion.

<u>Research Question</u>

What do Educators feel their role is in the development of Young Adults Aspirations. Do they feel they have a significant impact?

<u>Focus group aims:</u>

- To investigate how Teachers felt about their experiences of aspiration development in schools.

<u>Questions</u>

1. What impact or experiences do you have of developing aspirations throughout School?

   Prompts   Life changes   Self-perception   Others perceptions Significant others   Education

2. What were your experiences in Education about aspiration development?

   Prompts   Perceptions of them   Expectations of achievement Changes in behaviour   Everyday life   Goals/Ambitions   Significant Relationships

3. What has been helpful/unhelpful for you in developing the aspirations and goals of others?

Prompts   Class Expectations of achievement   Stigma/discrimination
Isolation   Support   Parental Influence

4. Should schools be significant in the development of Childhood aspiration? What

would this look like?

Prompts   On the wider community   Schools role   How else are
aspirations developed.

Participant Number:

Information about you

Please tick ☑

1. **What is your age in years?**

   ....

2. **Are you male or female?**

   Male ☐   Female ☐   Prefer not to say ☐

3. **Which ethnic group describes you best?**

☐ White British	☐ Other Asian background
☐ Other White background	☐ Black Caribbean and White
☐ Black British	☐ Black African and White
☐ Black African	☐ Asian and White
☐ Black Caribbean	☐ Other Dual Heritage
☐ Other Black background	☐ Chinese
☐ Indian	☐ Traveller
☐ Pakistani	☐ Bangladeshi
☐ Other Ethnic Group	☐ Prefer not to say

4. **Which of the following are you?**

   ☐ Primary School Teacher

   ☐ Secondary School Teacher

   ☐ Sixth Form Tutor

   ☐ Sixth Form Student

   ☐ University Student

   ☐ Currently Unemployed

   ☐ I have a different occupation. Please state below

   …………………………………………………………………………

5. **Around how long have you been involved in education (As a pupil or an educator)?**

☐ Less than 6 months

☐ 6 months-1 year

☐ 1-3 years

☐ 4-6 years

☐ 7-9 years

☐ More than 9 years

☐ Prefer not to answer

6. **Highest level of education completed:**
    ☐Completed some high school
    ☐High school graduate
    ☐Completed some college
    ☐Associate degree Bachelor's degree
    ☐Completed some postgraduate
    ☐Master's degree

    ☐Ph.D., law or medical degree

    ☐Other advanced degree beyond a Master's degree
    ☐Other: _____
    ☐Prefer not to answer

7. **How long have you been in your current job/role/unemployment?**

☐ Less than 6 months

☐ 6 months – 1 year

☐ 1-3 years

☐ 4- 6 years

☐ 7-9 years

☐ More than 9 years

☐ Prefer not to answer

Thank you for completing this questionnaire

Appendix K: Worked example of analysis.

Descriptive Codes	Transcript	Exploratory comments
Teachers influence Motivation instilled by teacher	A: Oh well the school I was at, no one was ever sent there. It was usually that the student had discovered the school, or that you know, our admissions team had done a good job. Let them know about the school, then petitioned and worked at their families and possibly their local community or possibly some countries they were able to get some state support to come to school there. So they were motivated kids from the start. Most of them. And yeah their aspirations were strong and high and pretty sensible. Researcher: And just following on from what J and T were saying about a teacher that had really stuck out for them and I know you had mentioned that your students had really thanked you for, what do you think it was about your input that was, that really stuck out for them?	Going above their job role, starting early?
Showing investment Enjoying the job role	A: Because I remembered, the hypocrisy of so many of the teachers who had taught me and I tried to be the good guy and apparently was successful. I don't really know what I did you know. Working everyday with the students and it was a positive experience.	Does enjoyment improve the relationship between pupil and teacher?
The role, helping to facilitate aspirations Mediating ideas	Researcher: And sorry, just to stick on the aspirations thing, you said they were very concrete in what they wanted to do did you have any input on that, or was that something that they had already came with. A: Well I worked a lot with the creative writing kids. Who tend to be quieter and who have a lot going on, in a tight group but I also worked with the theatre kids, but in both cases I think I would act as a sounding board to their ideas, which were often sensible. But, if they weren't sensible	Sounding board, can teachers generate ideas or are they responsible for policing them

	or realistic I think I can use my background to in a sort of friendly way in a fashion say, well you might just think that now lass, but you just wait.	
Being driven by the people close to you How to be motivated	Researcher: And has anybody else, got any sort of input or experiences. I know you said that yours were very different C to what had been said. Hows that?	
	C: Erm yeah, I guess I feel like erm, the setting I was in, erm, well a lot of my peers and a lot of my friends erm it was very much the norm of going to University, but thinking about aspirations I think the drive for me to achieve at school academically came from when I was behind my peers, so when I was not doing as well in my A levels as my Peers, that's when I would really start to get that drive for me to aspire to something. Like, look at my Peers they are like achieving and Im not doing as well as them, so I feel that I am a bit different, in	Is there a drive from a fear of failure? Falling behind?
Parental Influence	that sense that it was the norm around me for me to achieve and move forward academically. So I kinda felt like I had to keep up with that I had to sort of keep up with that, and that is where my drive and my aspirations came from.	Role models needed at home? Following the aspiration trajectory of parents?
Parental influence/ socioeconomic background	J: Did that set in through your parents? Or was in anything like. Because what H touched on was erm her Dad had a big push with you with education didn't he. H: Think he was leading by example.	Forming aspirations based on the modelling of others?
Societal expectations Hidden expectations	J: Was that the same in your case. C: Kind of, I mean I never really felt like a pressure from my parents to go to University, but I think because they both went to University J: So did they guide you? C:I think they, it was almost like the norm you know, but it wasn't like spoken . It wasn't kind of like do you're a levels and then go to University. J: I was just interested in that myself if you didn't mind me asking. C: Yeah	

Appendix L: Epistemological Statement.

Because of my profession and previous experiences, I believe that individual's thoughts, beliefs and attitudes are extremely subjective and impact their experience of life. As a psychologist, I use talking therapies, assuming that the service users can translate their experiences into words. This allows me to try to get an understanding of their worlds and the experiences that have helped shape them. In therapy, this process is not all one way. People's thoughts, experiences, and the potential links between them are not always readily available. At times, as a therapist I will act as a guide, or provide prompts to help facilitate the creation of an individual's life descriptions. I must remain aware that I myself am my own person, with experiences, beliefs and assumption that have been constructed by interaction with my immediate world. Furthermore, in sessions, or focus groups I make conscious effort to remain neutral, though the questions that I consider helpful to ask, or the topics of conversation I feel are the most relevant will be influenced by my own lived experiences, as a result the descriptions of experiences are co – constructed. There is a dynamic interplay between myself and participants that it is deemed impossible to be ignored. The resulting invention remains a representative reflection of the client's experience. (Ponteretto, 2005).

This discussion illuminates my epistemological and ontological stance. Epistemology describes the theory of knowledge development, and how as humans – we know what we know (Ponterotto, 2005). I am personally aligned with the Constructivist interpretivist stance, as I believe that our reality is socially and subjectively formed, and that the dynamic described earlier between researcher and participants is important to construct an understanding of lived experience. My stance is influenced by my understandings of Social Constructivism. The teaching of Social Construction describe the importance of an individual's culture and context when developing an understanding of developments in society. I feel this position sits with the subject of my empirical paper – the development of aspirations and the role of society. The role of social constructionism has similarly been discussed with other development based models such as Vygotsky's social development theory (1990).

Based on the above approach I wanted to choose a method, how to understand the experiences and opinions of my sample was next. Quantitative research sits with positivist epistemologies and focusses on variables defined by the researcher before the research

begins (Willig, 2008); this method did not fit with me wanting to understand my participants experiences, therefore a qualitative approach felt more appropriate. Interpretative phenomenological analysis works from a phenomenological stance, but focusses on making meanings from people's different experiences in relation to their contexts (Smith, Flowers & Larkin, 2009). This approach was considered but did not fit with what the researcher was aiming to uncover. The focus of the empirical paper aimed to uncover ideas rather than develop meaning. Two further analyses were considered for this study. Narrative analysis (NA) and grounded theory (GT) are not related to particular epistemologies (Willig, 2013). However, such methods were not deemed appropriate, as the current research was less focussed on developing a theory of how the concept of aspirations worked or how people shared their experiences as stories throughout their time in education. The focus of GT is to develop a theoretical understanding of phenomenon, therefore requires a substantial data set. Given the known challenges of recruiting from educational populations, this approach not considered and the research was interested in experience rather than theory generation.

 Thematic analysis (Braun & Clarke, 2006) is the final method of qualitative analysis considered. Similar to the aforementioned analyses this method does not adopt a particular epistemological stance (Braun & Clarke, 2006). The current method fitted with the aims of the empirical study to hear about students, professionals and the unemployed people's experiences. Thematic analysis allowed the researcher to stay true to the accounts of the participants without having to involve information to add meaning to their experience, consistent with a descriptive phenomenon. Most importantly, this method of analysis can be used to see how multiple people can understand a phenomenon and can focus on the variations in understandings across different groups. This was consistent with the method and sample chosen to investigate the research aims.

The empirical research adopted an inductive approach to analysis. The analysis focussing on what is generated from the data rather than coding transcripts for what similar research has already identified as in important (Braun & Clarke, 2006). As there was limited research in this area, the current approach seemed appropriate, as the current literature around the topic did not highlight specific concepts that would be important to code for when considering peoples experiences of aspiration development during their time in education.

It is important to notice these underlying beliefs in order to make sure that the methods adopted fits appropriately with the researcher and more importantly, the aims of the research. The main aim of this study was to explore the experiences of aspiration development in schools as they are transitioning through life. The focus was on the period during secondary education. The understanding of what is helpful and unhelpful during this period is difficult to establish and that there is limited existing research that explored this with people to highlight the importance of school from an aspirational sense, rather than an educational one. Given the lack of research and the need for understanding of experience, this study adopted a qualitative approach.

Finally, the values and professional position of the researcher will have affected the selected approach. The current empirical research is influences by the researcher's passion for community-based approaches and to explore innovative ways that can improve young people's well- being from an early age.

References

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Willig, C. (2013). *Introducing qualitative research in psychology*. McGraw-Hill Education (UK).

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Appendix N: Reflective Statement

Putting together this thesis for my doctoral portfolio has been very challenging. I have questioned myself, my beliefs and my morals throughout. Throughout the process, I kept a research diary and recorded my thoughts, feelings and behaviours in relation to every step of the research journey.

My interest in this chosen topic originated from my experiences throughout school – growing up in local school aspirations were never really discussed and from a young age I felt that schools, certainly my school seemed to be missing an integral ingredient in the development of young people. My first involvement with Clinical Psychology Doctorate course in Hull was to attend the research presentations conducted by the trainees that were graduating from the course. I opted to watch a study based on aspirations and the presentation focussed on young people and how at an early age they still held positive aspirations, despite their socioeconomic background. This initially sent my thoughts into overdrive, and I felt that my journey to where I am now needed to end with an exploration of the concepts I had personally identified from a very early age. Being local as well, I felt the need to give a voice to the people living around my areas and to get an understanding of peoples and professional opinions with regard to aspirations. I wanted to understand/question/ consider my own belief in a positive approach to psychology and considering early interventions that could benefit young people at an early age rather than it resulting in unemployment, depression, violence or suicide.

I knew that for my empirical paper I wanted to hear peoples' voices. During my Undergraduate degree, my dissertation had focussed on the "Wandering Mind" and results were obtained using a mobile phone app – I had very little interaction with the people in my study. Therefore, given my passion for the subject, and my lack of experience collecting data qualitatively I opted to consider this methodology when constructing my research proposals. I was told throughout Undergraduate Degree that Qualitative studies were "rubbish" and "did not really stand for anything" but following lectures and reading around the methods I felt utilising this methodology would help me to consider and question my own values and challenge me to integrate the skills I have

acquired as a clinician, and a researcher. Once I had identified my methodological approach, I needed to consider my sample and the research questions I aimed to ask.

Selecting my sample was difficult, trying to get the balance of all the questions I was trying to answer. Do I want to just speak to young people? Is it teachers that will provide a more helpful insight? Do I interview people on their own? Alternatively, there is more power in a collection of voices. These concerns were discussed with peers and fellow professionals when presenting my ideas. I left this meeting with even more ideas – it was suggested that, if I was trying to give a voice to people and understand aspiration development that teachers and students may bias the sample and only uncover the positive aspects of aspiration development. This was taken into consideration and I put forward my ethical application and stated that I had looked to recruit Primary School teachers, Secondary School Teachers, Sixth Form teachers, University Students and Sixth Form student to gain a holistic understanding of aspiration development from a number of different perspectives. The university ethics committee felt that organising six different focus groups would prove difficult, due to the short amount of time and the high level of work that would be required to organise, conduct, transcribe and analyse this high volume of people. This dilemma followed me around for a while; many supervisions were spent considering the high amounts of data and the potential difficulties in recruitment. After a lot of thought, I agreed to continue with my research, as planned, as I felt that the perceived richness of data outweighed the complexities of my sample. I was supported in supervision and throughout the research proposal process. I had run consultation groups in institutions I was considering recruiting from to get feedback on my research proposal - after gauging the interest of young people, I felt recruitment was achievable.

After establishing a vast amount of contacts, I felt that I would be able to get up and running with data collection quickly. This was not the case, I was finding that potential participants were happy to agree to take part in the study but the difficulty was coming up with a time that would suit everybody. University students were relatively easy to recruit, they appeared engaged in the principles discussed in my study and had flexibility in their diaries. Generating the remaining focus groups proved difficult. Professionals were expressing an interest but were reluctant to commit to putting things in their diaries. However, following a great deal of persistence, there was eventual success. When considering what the 'miracle' changes in circumstance had been, was it persistence that had improved my situation? Was I doing anything differently? Conversations in supervision helped me to gain an understanding of this. It was here where I developed an

understanding of the importance of networking, professional etiquette, gaining the trust of others and most importantly understanding the importance of balancing persistence and patience in my approach to all of my participants.

Though at times recruitment was challenging, the process of data collection for my empirical paper proved to be my favourite part of the study. Hearing the opinions of young people, professionals and people out of work reflecting on their previous experiences and aspiration development were really powerful experiences. My initial concern about whether groups would identify with aspirations was quickly proved unwarranted. Facilitating the Focus Groups was challenging but empowering. Hearing the voices of people talking so eloquently about their opinions of the education system supported my fundamental beliefs that it was important for everybody's voices to be heard. I had a sense in the meetings that people had supressed their feelings in relation to aspirations because of the systems and regulations that are in place. My study felt like I had allowed people the space to safely air their concerns about the development of young people in their surrounding areas. I reflected on the skills I learnt throughout this process and how I can integrate my research and clinical skills – managing groups, opinions, dominant voices and retaining information over prolonged intervals was difficult. I also learnt to never underestimate the importance of people's narratives and maybe how the opinions and thoughts of the people that are instrumental in the education system, by either influence or participation may be ignored in policy development. Often during this time, I would think of clinical practice and how important the voices of people using services are – during data collection I had an interview for a job in which I explained how important it is to use the stories of others when developing services. I also needed to be careful about my own ego, and the impact that I assumed I could make. It would be very optimistic of me to assume that my reflections on aspiration development could make a significant impact on this area. Though I felt that if my research can be considered as a part of collective growing evidence then there is scope to make the changes and aim to influence the recommendations and ideas that were illuminated by the people involved in my study.

I refrained from waiting for all my data to be gathered before beginning the arduous task of transcribing Focus Group data – I had been warned that the size and scope of my study

was huge and could be difficult to finish well, and within the time limits before deadline. My first group was around two months before the other so I was able to test out my transcription skills on an individual document. 24 pages later, my first transcription was complete. Advice to other researchers, do your own transcriptions and try to do them as quickly after your groups as possible. This helps you to put faces to names and context to content. Yes, transcribing is unbelievably time consuming, slightly mind- numbing and really tests your typing skills. Another tip, try to use two computers, type on one and control your recordings on the other. I felt once I had mastered this, the process of transcribing was much easier.

Upon reflection I understand that my favourite elements of the research was facilitating groups – I remember each session with a warm feeling and genuinely felt that simply holding conversations with each of the populations was helpful for them and informed me greatly. The conversations exceeded my expectations three fold. However, I was very anxious for a number of reasons for the next stage of writing up my research.

Upon writing up the research, I became aware of the anxiety I had toward writing up professional research. There were a number reasons of for this: my schemas around fear of failure; and my unrelenting standards and desire to do justice to the research and the participants that had made it. After each focus group participants reflected on the importance of the research to them and how they would find it beneficial to hear the feedback upon completion. This added a personal incentive to do the research justice but the pressure was something that fuelled my anxiety and potentially slowed down the writing process. When working on my thesis I began to question my research and whether it just a concept I had developed in my head with no solid theoretical background – again a sign of my ongoing battle with anxiety. My understanding of this changed though as the news, online podcasts and members of parliament all began to explore the importance of aspiration development (or lack of) but I had to continue to rein myself in and remind myself that this study was not designed to change the world, but to act as a starting point for further exploration. I also noticed my discomfort with describing one of the samples as 'unemployed' – the description appeared to under value what they had provided as participants and it was difficult to come up with a more appropriate way to address the people within the study. This was an ongoing reflection through the right up process and I felt that the impact of describing a group of people in this way should not be underestimated. Using this description misrepresents the diversity and the background of

this population and potentially influences fellow researchers and professionals further from this populations understanding of themselves. I often wondered if the unemployed sample would describe themselves in this way – or the connotations they carried with this label. However, I did briefly explore this during interview and it was agreed that 'unemployed' was an acceptable way to describe participants in this research.

When conducting my systematic literature review I became increasingly aware of the amount of interventions that are out there to support people in the community. Community interventions are a passion of mine and my aims for the full thesis was to explore innovative ways to support young people, either at the early stages of development or in institutions that may have a positive influence. However, the difficulty came for me when narrowing down what it was that I actually wanted to uncover. I decided to investigate interventions based in the U.K, which may have confused my search terms because here in the United Kingdom we are moving towards Mental Health services that are based within our communities. Other countries description of community based interventions are more consistent with my own views – easily accessible, free, drawing on the people within the communities to make the interventions sustainable so that people can pass on their knowledge and skills to others and the support and understanding of difficulties spreads and develops more understanding 'communities'. The review highlighted that there is a lack of robust research into innovative sustainable interventions and will inform my future research interests. There is opportunity to provide services with professionals in settings that do not only address emotional well- being difficulties but works in parallel to address the barriers of prejudice and stigma that effects service delivery in current mental health settings. By stretching out mental health programmes further into the community, more young people will be able to profit from early interventions to defend them from later and mote deep-seated psychological diagnoses. Reviewing literature to address notable absence of research came with great difficulty, with an ambiguous understanding of 'community'. However, I believe that if there is a place in psychology for me it will be to continue to address the gaps in UK evidence bases and to continue to strive to identify effective ways and building a psychologically sound society on the foundations of strong communities. Warmth, belonging, comfort and understanding are all principles that if worked with and introduced into our societal systems, different approaches to mental health will be uncovered in both child and adult populations. I approached this current review in a critical yet open manner in order to encourage future researchers to increase the evidence

base. I hope that the review provides a framework for future researchers to help understand effective methods of interventions and robust methods of evaluating them.

I feel that the most valuable lesson that I have learnt during my research journey is simple. I feel that it is a trait that I have always enjoyed having. I feel there is power to peoples stories, I feel listening empowers others and sharing strengthens relationships. It is sad that these simple things are often overlooked in British society. As a professional, I feel there is nothing more powerful than meeting with people, developing a collaborative relationship and working with their understandings of the world and giving us, as adults, ideas. I am a firm believer of building on the knowledge of people that have been through the experience to develop effective ways of moving forward. I am proud of the participants that stepped forward to take part in the empirical study for their reflections and their willingness to engage in my study. I have arranged sessions to return to their institutions and disseminate the findings, in the hope that professionals, young people and adults alike can share our understanding of aspiration development and enthuse others around them to consider young people and their understanding of aspiration.

On a final note, I would like to send a message out to others to get involved in research. Six months ago I would not have felt comfortable saying that. Although it has been hard and I have questioned myself, my ability and my motivations on a daily basis but this has certainly being the most rewarding piece of work I have ever completed. Find something you are passionate about and use that as your motivation to make a change, even if it means giving somebody a voice. I found something that I had been interested in from a young age and I felt my drive came from the sixteen-year-old boy that asked the questions about society and why none of his peers even considered bursting the aspirational bubble. This research has tested me and pulled my emotions into every different direction possible but I now reflect on this as character building and feel that I am more flexible, confident and resilient. My own understanding of transition, confusion and fear is similar to the participants' reflections for my paper. Similar to their reflections, I understand the importance of identity, role models, exposure and the difficulty breaking through perceived social glass ceilings. I would like to take this opportunity to give a huge thank you for those who allowed me this opportunity and hopefully saw more in me than my socioeconomic background, past history and previous education. I hope this research like those aforementioned provides the opportunity for something different to get a chance.