

# INTRODUCTION

*“Happiness can be enhanced through mental training.” - Dalai Lama*

## **1.1 THE NEED FOR HOLISTIC EDUCATION: background and context for the Amazing Lyf Project (AML)**

A recent UNICEF Child poverty Report (2007), - a “comprehensive assessment of the lives and wellbeing of children and adolescents in the economically advanced nations”, which assembled 40 indicators of child wellbeing in rich countries, concluded that children in Britain fared less well than in any of the other 21 countries included in its analysis.

UNICEF states that *“The true measure of a nation’s standing is how well it attends to its children – their health and safety, their material security, their education and socialization, and their sense of being loved, valued, and included in the families and societies into which they are born.”*

This report shows that the British as a nation are failing to live up to this measure. Out of the 21 Countries studied British children ranked lowest with regards to family and peer relationships, unhealthy behaviour, risk taking and in subjective wellbeing.

The British Medical Journal contained a recent article by Pickett and Wilkinson (2007) which also studied child wellbeing, this time in relation to income inequality and they also found British children at the bottom of a list of 23 nations. In an article in the American media (Time Magazine) by C Mayer (2008), Britain is described as a country with a culture that is not child-friendly; this is evidenced regularly in the media including the nation’s recent fearful obsession with “hoodies”. This is not new, however, as Britain has a history of negative attitudes towards children (Yates, in Morrison, Yates & Scraton, 2008).

Scraton also pointed out that British Children are in fact having a more difficult time than ever before. One example of this is that the types of unruly behaviour that had been commonly recorded amongst gangs of youths since the 19<sup>th</sup> Century, has now become criminalized. Alongside the criminalization of young people is regular “naming and shaming”, so that in addition to being left with criminal records,

which will negatively affect their futures, they are often banned from local areas due to bad reputations, which worsen their present predicament. Scraton also pointed out the marginalization of our children; they have no voice within society, insufficient guidance, structure or purpose outside of school and they have inadequate mental and sexual health services. These issues often lead to self-medication in the forms of alcohol and drug dependency, as well as being a cause of violence towards self and other. Additionally the lack of close family relationships results in stronger ties between youths, which means greater peer influence and less influence from elders.

The front of a recent edition of Time magazine (April, 2008) describes the state of our young people as;

*“Unhappy, Unloved and Out of Control. An epidemic of violence, crime and drunkenness has made Britain scared of its young. What is causing the crisis?”* The article also quotes Prime Minister Gordon Brown as saying that our “Kids are out of control” in his first press conference of 2008 and it goes on to claim that British youths take more drugs; have more sex below the age of 16; show higher levels of promiscuity; and get drunk more frequently compared to other countries. British parents spend less time with their children than other nationalities and many people are afraid of teenagers, particularly in groups or gangs.

These statistics are alarming, and in my opinion, tragic. Some of the reasons for this, according to Mayer, are that “British kids are less integrated into the adult world and spend more time with peers” (Mayer, 2008); our children are often disaffected, lack useful or structured ways of spending their free time and they are undervalued. Family relationships continue to disintegrate with divorce rates so high in some areas of the UK it is unusual to see a family with both parents.

In addition, our education system emphasizes academic attainment over social development and our students sit more exams than other Europeans and are often extremely stressed. All this adds up to a situation which is becoming urgent. The British Government has barely begun to put interventions in place to deal with these issues, but is attempting to address them by bringing emotional awareness classes into some schools. This is called Social and Emotional learning (SEAL) and is described in the SEAL Resource (2003).

The Amazing Lyf Project (AML) attempts to address the core issues at the heart of this apparent crisis. The essentials for wellbeing have been variously described as a healthy sense of self; feeling safe; a sense of meaning and connection and knowing that we are loved and that we matter, (Zukav, 2001, Griffin & Tyrrell 2008). The AML is rooted in the assumption that every human needs this foundation in order to thrive and become a productive and functioning member of society. Our education system needs, in my

opinion, an overhaul. This means putting less emphasis on academic achievement and more on personal, interpersonal and transpersonal development, if we are to bring about a healthy balance within society. Others have been calling for this approach for a long time, including Sheldrake, Mckenna and Abraham (1991) who advocate a new holistic educational model which provides access for the community to have a say in the curriculum and where relationship to environment, life, and altruistic morality are paramount.

In order to attempt to meet this need for a more holistic education I developed the Amazing Lyf Project. This project was run for six months in a secondary school and then I evaluated the effects of the programme. This means that this thesis is thus divided into three aspects; the development and design of the project and its curriculum; the delivery of the project; and the assessment of the interventions and their effects upon the participants.

## **1.2 PUTTING TOGETHER THE AMAZING LYF PROJECT**

*“Whatever lessens destructive emotions is spiritual practice” - Daniel Goleman*

The AML project was designed with the intention of meeting the needs outlined above. This was to be achieved by increasing mindfulness and awareness of affective and cognitive states, and creating a space between such contents of consciousness and the self that experiences them. The purpose of this was to increase wellbeing and improve the development of a positive self concept of the students who participated in the project. It was also designed to support development of a positive self concept by encouraging awareness of, acceptance of and some detachment from all emotions, thus helping to diminish defensive/impulsive reactions and promoting insight into self and others (Brown et al. 2007 p.213). The techniques to encourage attitudes of emotional awareness and mindfulness were complemented by the cultivation of positive attitudes such as empathy, compassion, acceptance and non-judgement. Together these interventions reflect a holistic package of methods that have separately been shown to improve wellbeing, (Fontana and Slack, 1997, Goleman, 2003, Ferrucci 1990, Whitmore 1986) but have not yet been used together in this way.

The programme was created using a combination of techniques garnered from various eastern and western approaches to positive, humanistic, and transpersonal psychologies. These include **psychosynthesis**

(Assagioli, Ferrucci, Whitmore); **mindfulness**, meditation, contemplation; **emotional intelligence** techniques, including developing emotional awareness and personal responsibility (Zukav, 2001, Trueheart, 2008) ; This was combined with an awareness of **research into adolescence** and **psychological development**, (Geldard & Geldard, 2004, Csikszentmihalyi, Rathunde & Whalen, 1997; Erikson, 1959, Covey, 1998, Rice,); and **positive psychology** (Seligman) with particular reference to the **Human Givens Approach** (Griffin & Tyrrell 2008). Techniques and knowledge from **Yoga** and **Healing** were also used, in regard to working with emotions as movements of energy within the Chakric system. This combination of techniques and approaches, also rooted in **person centred counselling** and unconditional positive regard, gave birth to a deeper and richer set of practices and methods than had yet been used with adolescents in schools, as far as I am able to ascertain

Some methods were adapted from *Psychosynthesis In Education* (Whitmore, 1986). Whitmore found these techniques to be highly effective and transformative. They emerged from a combination of her work in the Human Potential Movement and Roberto Assagioli's clinical experience with psychosynthesis over many decades. This was an early synthesis of techniques that was an important source of the Project's methodology, as it combines many of the above mentioned approaches. Exercises were also adapted from *Heart of the Soul* (Zukav, 2001), *What We May Be* (Ferrucci, 1990) and *Transpersonal Development* (Assagioli, 1991). New exercises were created, informed by the above and by Eugene Gendlin's Felt Sense approach to "Experiencing"; The Human Givens Approach to Psychotherapy; Shamanic journeying, guided visualisation techniques etc.

### **1.3 RATIONALE FOR THE AML CURRICULUM FROM LITERATURE**

*“Meditation can lead to a new way of seeing the world ... in which feelings of compassion and love for one's fellow creatures become an integral part of one's world view”.*

*Fontana & Slack 1997*

Daniels (2005, p26) points out that combining transpersonal and positive psychological approaches would open up a wider field of enquiry as their different ways of working would complement each other. This is true for two main reasons. Firstly, the techniques that arise from the two methodologies combine well to create a deeper and more transformative experience for the participant and secondly, with regards to the

research methods, Positive Psychology adds experimental and questionnaire-based methodologies to the inquiry, whilst Transpersonal Psychology emphasises phenomenological and qualitative approaches, thus together they provide the best possible evidence and richest data. This is how the Amazing Lyf project was created, delivered and studied.

Daniels (ibid, p6) also points out that transpersonal psychology is a

*“... responsible moral science of action ... [which] should be orientated ... to ... bringing about the kinds of transformations it examines ... in the wider community and, ultimately at the global ... level”.*

As a piece of research within transpersonal psychology it was felt that with regards to the difficulties facing modern children and adolescents, and the adults that they will one day become, there is a moral imperative for researchers to explore the possibilities for transformation within institutions such as schools for the benefit of our society as a whole. There are too few examples of emotional or contemplative education curricula and those few that exist do so mainly in the US, such as Greenberg’s PATHS (Promoting Alternative Thinking Strategies) curriculum. This is based on a relatively new branch of psychology, known as “primary prevention, which seeks to protect children from later problems through teaching them skills for living”, (Goleman 2003). Other types of mindfulness education existing in the UK include the Transcendental Meditation (TM) Schools, which do not include focus on emotional awareness and positive psychological learning and it also situated within a specific religious context, which would exclude much of the population of the UK.

The emotional health of our children is also now being addressed by the UK Government in its *Social and emotional aspects of learning* (SEAL) resource literature. This government-led whole curriculum approach seeks to develop children’s self-awareness, ability to manage feelings, motivation, empathy and social skills. When putting together the curriculum I ensured that the AML met the criteria that were stated in the SEAL resource literature.

As previously mentioned, important areas to work on when aiming to increase wellbeing in adolescents include emotional regulation and awareness; also useful are working with self concept and self-efficacy, as they affect the way the students think and feel, particularly about themselves, and affect their behaviour. These are interdependent elements and are all important at this stage of life (Geldard & Geldard, 2004) when a new, more adult identity is being formed (Erikson, 1959). Emotions can become so intense in childhood that they become overwhelming; especially during adolescence as a result of

increased hormone levels and young people's behaviour can often be determined by emotional reactions at the expense of intuition, rational thought and common sense.

The Promoting Alternative Thinking Strategies (PATHS) Curriculum, (Greenberg, 1998) is a programme for primary schools that has been empirically tested over several years in various countries around the world. Findings show that use of the techniques, from two to five times a week, improve wellbeing in several areas of life; including social, emotional and cognitive improvements (Goleman 2003, p.262). Greenberg concludes from his research on emotional intelligence that cognitive and social development are deeply interconnected and should not be taught separately in the way that present educational systems do.

Greenberg states five characteristics for a successful curriculum in holistic education which are that the programme:

- a) calms kids down;
- b) increases awareness of own and others' emotions;
- c) encourages discussion of feelings to solve inter-personal difficulties
- d) includes strategies for planning and thinking ahead to avoid difficult situations
- e) increases awareness of emotional impact on others, empathy and interpersonal concern.

The AML covers all of these areas. Furthermore Greenberg goes on to say that four essential ideas must be included within the curriculum:

- a) Emotions are signals providing information about self/others
- b) We must separate feelings from behaviour
- c) You can't think until you are calm
- d) Treat others how you want to be treated

Ultimately these ideas and characteristics assist the students in becoming aware of feelings and taking responsibility for themselves. These ideas are fundamental aspects also of the AML.<sup>1</sup>

In 1998 Dundee University set up an initiative called Promoting Social Competence. This scheme was created to promote PATHS and other similar interventions within schools (Bremner, 1998). Bremner describes the value of PATHS as "a systematic developmental procedure for enhancing social competence and understanding in children". Bremner points out that despite government initiatives to improve social and emotional education, the interventions are failing to be put into practice at grass roots level; i.e. in the

schools themselves. Budgets are tight and money is not allocated specifically for this agenda; support is generally given to high achieving students and improving grades because academic results are still valued over social competence and as a result this initiative is not being adequately addressed (2008).

Bremner stated (1998) that in three clinical trials, the use of the PATHS Curriculum was shown to significantly increase the children's ability to:

- *Understand social problems*
- *Develop effective alternative solutions*
- *Decrease the percentage of aggressive/violent solutions*
- *Increase their understanding and recognition of emotions*

*In all three groups of children, teachers report significant improvements in children's socialcompetenceial behaviour in the following domains:*

- *Self-control*
- *Emotional understanding*
- *Ability to tolerate frustration*
- *Use of effective conflict-resolution strategies” (Bremner, 1998)*

The following is an excerpt from a UK government website for teachers in primary education. This shows that the government is promoting this type of education within the UK, however it is mainly aimed at primary schools and uptake is low, mostly due to lack of funding.

*“There have been four clinical trials of PATHS. Two have involved special needs students and two have involved ‘mainstream’ children. Across these trials, PATHS has been shown to improve protective factors (social cognitions, social and emotional competencies) and reduce behavioural risk (aggression and depression) across a wide range of primary school aged children. Effects have also been found on some cognitive skills. (Greenberg and Kusch , 1998 )”*

Based on research by Dawson et al. (1999) Goleman suggests that by five or six years old children with good planning and emotional awareness are less likely to be at risk of aggression and anxiety disorders. For those who do not have a background supportive to emotional development Goleman proposes that schools may be the only institution able to provide a universal education for building emotional health. At

this time our schools are not prioritising emotional and social education and for that reason I believe, as does Bremner, that the AML programme is responding to a lack within our modern education system.

The literature strongly suggests that these types of interventions are highly effective when delivered within the education system. However, the AML goes further and adds to the methods mentioned above contemplative techniques and development of more transpersonal approaches to life (metavalues in Maslow's terms), such as cultivating reverence, gratitude, awe and wonder, coupled with other spiritual values such as compassion and empathy with the use of Buddhist Lovingkindness meditation. In Goleman (2003) Greenberg, creator of PATHS, acknowledges that these positive attitudes and values are lacking in the PATHS curriculum and recognizes that this needs addressing. In addition to dealing with this lack, the AML also looks at personal meaning and the students' ability to create positive change in the world, which supports and develops personal agency and self-efficacy. There is no literature relating to using this type of holistic blend of educational techniques, so the AML is in that sense entirely innovative.

In summary, the AML curriculum was designed to meet the needs of the present education system as stated above.

Table 1. Interventions used in the AML, their purpose and the need they were designed to meet.

<b>Intervention</b>	<b>Type</b>	<b>Purpose</b>	<b>Identified need</b>
Weekly Handouts	Written accounts of topics and interventions	Full understanding of topics	All needs below
Discussions of Topics	All topics covered <i>See appendix 1</i>	Full understanding of topics	All needs below
Meditation	Guided sensory work	Development of focus & imagination Skill building	To enhance concentration & focus
Meditation	Guided relaxation	Trust building, creating safe space Developing ability to focus Developing connection to body	Skill for coping with stress
Meditation	Guided visualisation	Problem solving skills	Development of inner resources
Meditation	Guided visualisation	Learning disidentification from emotions	Reducing habitual reaction
Meditation	Guided experience of physical sensations in body	Development of emotional awareness during experience of emotion	Emotional awareness
Role playing & emotions game	Practicing emotional awareness in context	To learn emotional regulation and Awareness	Emotional awareness Emotional regulation
Meditation	Guided visualisation –the bridge	To change mood consciously	Emotional regulation
Reflective meditation	Reflection upon positive quality	To develop that quality &/or Self knowledge	Cultivation of positive Qualities
Reflective Meditation	Intention/goal setting	Developing will and purpose	Sense of personal Responsibility
Meditation	Loving kindness	Developing that quality Developing connection	Cultivation of positive qualities/ deeper connection to group
Discussion	Heartprint effect	To develop meaning and personal agency	Improve self concept
Meditation	Chanting	To develop calmness, inner stillness	Stress, relaxation, cognitive skills,
Meditation	Breath work	To develop calmness, inner stillness	Stress, relaxation, cognitive skills,
Meditation	Guided visualisation	To develop mindfulness, Gratitude, appreciation	Emotional awareness Emotional regulation

## 1.4 DEFINITIONS OF TERMS

*“A short programme in mindfulness meditation produces demonstrable effects on brain and immune function. These findings suggest that meditation may change brain and immune function in positive ways”.*

*Richard Davidson*

**Mindfulness:** Receptive attention to and awareness of present events and experience, without discriminatory, categorical or habitual thought processes overlaying the direct experience.

**Awareness:** The conscious registration of stimuli, including the five physical senses, the kinaesthetic senses and the activities of the mind. (Both adapted from Brown et al., 2007)

According to Davidson (in Goleman, 2003, p.202) emotional clarity and regulation reduce perceptual and cognitive bias. We often don't see the world as it is, but instead we perceive through the filter of our own thoughts, past experiences and emotional reactions based upon them. Mindfulness lessens the affects of, or bypasses those filters. It has been associated with greater emotional awareness, understanding and acceptance of emotions, and enhanced ability to shift mood states (Bown & Ryan, 2003; Baer, Smith, & Allen, 2004, cited in Brown et al., 2007). It has also been shown to facilitate recovery after, and promote equanimity during, emotionally challenging experiences, as well as enhancing mental health and wellbeing, relationships and creativity (ibid. p.220-224).

Mindfulness can increase wellbeing by the creation of a space between the internal processing of responses to internal and external stimuli and resulting action, thus facilitating more controlled responses, rather than habitual, automatic or impulsive reactions (Zukav, 2001, Brown et al., 2007). Ultimately, behaviour that results from an individual's more conscious awareness of their subject/object interactions becomes more adaptive as well as more appropriate to the authentic needs of the self, which may result in less risk taking behaviours and greater self-control and autonomous self-expression (Zukav, 2002-2006, Brown et al., 2007). This strengthening of the structures and states within self concept not only increases wellbeing but will be supportive to the developing personality during adolescence.

**Wellbeing:** For the purpose of the AML the working definition of wellbeing comprises of three elements; feeling safe, feeling valued and feeling connected. (Adapted from the Human Givens Approach, Griffin & Tyrrell, 2008 and Zukav, 1990, 2001). All interventions were aimed at increasing the experience of these elements.

**Self concept:** How the participants see themselves in relation to their world.

## THE LYF SYMBOL

The LYF symbol was created intuitively using images that were at once appealing to researcher and adolescents (it was shown to various adolescents ranging from 12 to 16 years) and symbolic of the deeper meaning of the programme. For example the L<sub>o</sub>tus represents being rooted in the present moment and opening in trust to the inner and outer experiences of life. The Y<sub>i</sub>n yang represents balance, harmony, and equanimity in the face of joys and sorrows – whatever life brings. The F<sub>l</sub>ames represent flow; being in the flow within one's day and one's life (for example losing sense of time and space as one is absorbed within a creative act, (Csikszentmihalyi et al. 2003) and also being in harmony with the flow of life. Therefore the symbol represents the foundational intention of the whole programme. The students loved this symbol and were all given name badges with the image on and it was used on all AML resources. (See front page for detail).

## **1.5 THE IMPORTANCE OF THE FACILITATOR**

*“Virtues are harmonised by exposure to wise elders” (Aristotle, cited in Goleman 2003).*

In order to create change within the programme, the relationship between facilitator and participants is, according to Geldard & Geldard (2004, p118) more important even than the methods or model used to promote the change. The relationship must be created in an atmosphere of confidentiality, safety and trust, as well as openness and warmth. Ability to empathise and good listening skills are extremely important attributes for the facilitator, as in order to allow change to occur the participants need to feel listened to, understood and accepted. The skills of the facilitator must include therefore the ability to listen actively, including good reflecting skills, normalizing of the often intense emotions experienced, positively affirming success and continual support of effort.

The facilitator also needs to be able to work cooperatively and collaboratively, which is a style adolescents use naturally (ibid, p122). This process occurs by challenging, reviewing and revising constructs and beliefs that participants hold about themselves and the world. It is also suggested that the facilitator is not someone perceived as occupying a position of power over the participants, such as a parent or teacher, but someone who only works with them in this context.

The facilitator also needs to be familiar with symbolic, creative, emotional and cognitive behavioural strategies that are used in the programme in order to promote growth, awareness and change as it is essential for students to see these being modelled (ibid. p122). “When teachers don’t model what they teach, the children don’t use it” (Goleman 2003, p274). During the development of the AML project I spent some time informally canvassing opinions regarding the content of the programme and how it was to be delivered. I made a point of communicating with professional educators who also felt that that many adults, including parents and teachers, having lacked this type of education themselves, are not able to model or teach something they do not themselves embody. Goleman points out that it is extremely useful for teachers to also learn these skills themselves, so that the whole school environment is supportive of these positive and life-enhancing tools. This, however, is demanding, challenging work and not easy even for someone extremely dedicated to self-improvement. There is not yet adequate support

within British culture or the education system for the development of self-awareness, particularly regarding emotions. Thus the facilitator's role is critical.

## **1.6 RESEARCH INTO TRANSPERSONAL PRACTICES**

*“When we are angry we don't deal with the obstacle, but instead we deal in a hurtful fashion with the person who is causing the obstacle”.* (Ekman, P. in Goleman, 2003, p.352)

Why mindfulness, meditation and emotional awareness? Most humans live with only parts of our attention focussed on our experience, and the events that are going on around us, in the present moment. We spend much of our time with our consciousness oriented towards thought-generated accounts and reactions based in the past, or fantasies or ideas about the future (Brown, Ryan and Creswell, 2007). This leaves us in a state of waking sleep, diffuse attention, or semi-unconsciousness. For example, when we find that we have driven through several towns on our route somewhere, with no conscious recollection of having done so. The present moment is thus often only partially experienced and we tend in this state to react habitually and sometimes inappropriately or incongruently with how or who we really are in that moment. Mindfulness orients the consciousness back to the fullness of the present moment.

As far back as 1903 Pierre Janet, one of Freud's teachers recognised the value of mindfulness. He understood that mindfulness “could be developed and that to do so contributed to the sense of psychological wellbeing.” Engler (1988). One of the ways that this is achieved is because mindfulness, and other contemplative methods, create some distance or detachment from emotions in order to be able to manage them in a more balanced and healthy way, and allows the feelings to be put into perspective. Welwood shows how meditation creates this distance when he states that “Feelings and emotions which arise during meditation practice are not viewed as having any special importance ... the meditator does not try to unfold the meaning of his feelings ... thus meditation cools the heat of emotional fire” (Welwood,1979). This supports the development of greater behavioural self control and deeper emotional awareness. Mindfulness and emotional awareness appear to be inextricably linked.

Much research has been done into the beneficial effects of mindfulness. Brown et al. (2007) did a metastudy of the overall theory of mindfulness and the evidence so far for its salutary effects. They looked at well over two hundred studies and concluded that even though research in this area is relatively new, there is a large body of evidence suggesting that mindfulness research is a worthy endeavour, as it is

broadening our understanding of consciousness and its fundamental role in human functioning.

Mindfulness may be the way to optimize that functioning. For example, Rogers (1961, cited in Brown et al, 2007 p.214) “argued that the movement from cognitive distance to direct contact with and ownership of experience was a central therapeutic change process”.

Brown et al. (ibid. p.216) also found that mindfulness is associated with outcomes such as self-control, emotional regulation and compassion and that these reflection and self-awareness skills are intimately bound up with enhancement of identity and self-concept. Mindfulness leads to a state of integrative awareness, characterized by an assimilatory, non-discriminatory interest in internal and external stimuli and promotes synthesis and integration in functioning. This state of awareness facilitates wellbeing and adaptation (ibid. p.217). It is also associated with enhanced ability to cope with stress and reduced levels of anxiety, lowering of blood pressure, and greater internal locus of control (Engler, 1984).

A common fallacy about Buddhist meditation is that it sets out to completely rid the self of any trace of ego. However, despite many misunderstandings about the relationship between Buddhism and the ego-self, Engler (1984) states that mindfulness and meditation are not intended to replace the tasks of identity formation, which is a common misconception about Buddhist teachings. On the contrary they can in fact be used to assist in completing psychosocial and developmental tasks appropriate to life cycle stages, such as discovering “*who I am, what my capabilities are, what my needs are, what my responsibilities are, how I am related to other selves, and what I should or could do with my life*” (ibid. p.35). Together, the interventions employed in the AML are intended, in Engler’s words to facilitate “*the integration of contradictory self concepts, object images and affects into a cohesive and stable sense of self able to maintain constant relationships with objects even in the fact of disappointment, frustration and loss*”.

This is not the first time transformational technologies have been taught within education. The Esalen Institute has been teaching various methods since the 1960s (Daniels, 2005, p24), however this was not accessible to adolescents, nor part of mainstream education. Petrides, Fredrickson & Furnham did a study on the role of emotional intelligence in academic performance and deviant behaviour in 2002, which did work with school children. Since 2000 positive psychology has been promoted by Martin Seligman and these methods are just beginning to be explored within education, but there is little published literature on the subject; for example Wellington College in Berkshire introduced happiness lessons to 14 and 15 year olds. This has reported in the press, but no academic papers were published regarding the results.

Research in this area within UK education is at an early stage and there is still little being published as yet. Therefore I have been unable to find any academic papers relating to it. However, Dr Baylis, co-director of Cambridge University's Wellbeing Institute, is at present studying "healthy and good-hearted lives". This was quoted in the press by Hogan, 2007 and there are not yet any papers published with regards to this research, but it is evidence that this type of research is now beginning to spread. The work that is published seems to be limited to one or two approaches, such as the vast amounts of research done on meditation and particularly on mindfulness since the 1980s. There is a very good account of teaching meditation in schools (Fontana & Slack 1997), and an excellent book on psychosynthesis in education (Whitmore, 1986) which proved useful in developing the curriculum for the AML and describe many benefits to be gained from such approaches.

In the US the University of California has set up the *Mindfulness Awareness Research Centre*, which has had good results using Vipassana meditation with children with Obsessive Compulsive Disorder (OCD). Stanford University is also researching the effects of mindfulness, much of which is based on Kabat-Zinn's 1979 work at the University of Massachusetts and his continuing work on Mindfulness Based Stress Reduction (MBSR). In Australia many studies on prevention and early intervention programmes in schools have been done with positive results including Sheffield et al (2006), Mifsud and Rapee (2005) and Quayle et al (2001). These programmes tend to be based on cognitive behavioural therapy (CBT), interpersonal therapy (IPT) or psychoeducation. Mindfulness is not the foundation of these programmes (Neil and Christensen, 2007).

Mindfulness is central to many therapeutic interventions and theories including Cognitive Behaviour Therapy (Teasdale, 1999), Self-Determination Theory (Deci & Ryan, 1980, Ryan & Deci, 2000), Gestalt approaches (Perls, Hefferline, & Goodman, 1958) and Personality Systems Interaction (Kuhl and Kazen 1994). Mindfulness-Based Cognitive Therapy (Segal, Williams & Teasdale, 2002) and Mindfulness Based Stress Reduction (MBSR) (Kabat-Zinn, 1982); MBSR was initially aimed at treating pathological states, however mindfulness is now used with healthy but stressed individuals. This is a demographic which adolescents could easily fit into. All of these approaches that have mindfulness at their core strongly suggest the benefits of using this within holistic education. Mindfulness is of course also central to Buddhist, Hindu and other Vedic based meditation practices, which have over two thousand years' worth of experiences of this mode of consciousness.

In addition to the research above there is good evidence for neurophysiological changes that result from meditative practices. Short term practice of meditation may reduce stress and improve state affect, but

temperament itself may be improved as a result of the long term use of these techniques, due to changes in the brain that occur over time (Davidson et al. 2003). This is the basis for the length of the AML programme, which was intended to run for a whole school year, thus giving the participants as much time as possible to improve affect at state and trait levels.

## RESEARCH METHODS

### 2.1 DESIGN AND HYPOTHESIS/ RESEARCH QUESTIONS

I decided to combine qualitative and quantitative data collection methods. This integrative approach is recommended by Braud and Anderson (1998) for this type of research, which is intended to understand experience, as well as evaluate a programme. They propose that using methods similar to experiments is the most suitable way for “exploring causal questions and for assessing the effectiveness of ... interventions ... [as] they provide the greatest feelings of confidence in conclusions and ... yield the least ambiguous findings.” (p.37). However, they also suggest that the data may prove to be somewhat superficial in depth of understanding, if only experimental methods are used, as they lack richness. Therefore, interviews, artwork, photographs and pieces of writing were included to enrich the data and give more depth and meaning, also providing a fuller account of the experiences of the participants.

#### 2.11 Quantitative Approach

There is much evidence to show the positive effects of contemplative practices; positive psychology skills; and emotional intelligence techniques upon wellbeing and self-representation in adults. Therefore it was hypothesised that using these methods on a regular basis within the school, would support adolescents in creating a more positive and healthy self concept as well as increasing their life skills such as emotional awareness and regulation, thus improving the participants’ wellbeing.

The quantitative assessment of the effects of the programme utilised five psychological assessment tools. In order to assess wellbeing the following self-report measures were used: the Trait PANAS and State PANAS Scales (Watson et al. 1988); and The Satisfaction with Life Scale, (Diener et al. 1985) were used. Moreover, the formation of positive self-concept was assessed by the following measures: The Self-

Efficacy Scale, (Bosscher & Smit, 1998) and The Self-Esteem Scale, (Rosenberg, 1965) were used. These scales were designed for use with adults, therefore a Pilot Study was run with the assistance of several 12 to 14 year old who found that there were a couple of words they did not understand. These were changed to synonyms that were within the vocabulary of that age group and the changes were agreed with the supervisor.

Two groups were presented with the scales: the participants in the project (AML) and a control group (Control). Scores were collected for the scales and totals were calculated for each variable. The study was of a mixed design with a between group analysis before the project (AML and Control group) and a within group analysis of the AML (time a, before intervention, and time b, after intervention).

**Hypotheses:**

1. There would be a significant difference between scores at time a, and time b in the AML group using the PANAS trait scale.
2. There would be a significant difference between scores at time a, and time b in the AML group using the PANAS state scale.
3. Scores for self-esteem would be higher at time b than at time a in the AML group.
4. Scores for self-efficacy would be higher at time b than at time a in the AML group.
5. The satisfaction with life scores would be higher at time b than at time a in the AML group.

In summary the quantitative data collection methods illustrated in table 2 below were used in order to assess the effects of the interventions upon wellbeing and self concept.

*Table 2. Quantitative Scales and their use in the study*

PANAS TRAIT	Assesses trait affect before and after interventions – a measure of wellbeing	Used to assess if the emotional temperament of the participants has changed during the project
PANAS STATE	Assesses state affect before and after interventions – a measure of wellbeing	Used to evaluate the current emotional state of the participants to see if this has changed during the project
SELF ESTEEM SCALE	Measures self esteem before and after interventions – a measure of	Used to evaluate any change in self-esteem as a result of project

	self concept	
SATISFACTION WITH LIFE SCALE	Measures satisfaction before and after interventions – a measure of wellbeing	Used to assess if level of life satisfaction has changed during the project
SELF EFFICACY SCALE	Measures self efficacy before and after interventions – a measure of self concept	Used to evaluate any change in self-efficacy as result of project

## **2.12 Qualitative Approach**

### **Research Questions:**

- A) To explore the experiences of the participants of the AML particularly in relation to wellbeing and identity formation.
- B) To investigate the efficacy of the AML program.

Using qualitative methods adds flexibility to the approach, regarding what type of data would be generated and how it could be collected, interpreted, and analysed. This also meant that the research questions posed might be subject to being extended or changed in response to the participants' experiences. For example, the particular type of experiences I was interested in initially, in order to explore the above questions more deeply, were:

- How will the participants experience the techniques?
- How will the participants feel about their experiences?
- Will the participants enjoy the program?
- Will the interventions have positive effects on wellbeing and self concept?
- What changes will need to be made to the curriculum to meet the needs of this particular group?
- Which methods will be most useful and enjoyable for the participants and which will they not like?
- How can I work together with the participants to improve the project?

As research questions are flexible I was open to changing them or adding others, as appropriate, during the course of the project.

Several qualitative data collection methods were used to explore these questions and are illustrated with explanations in table 3. Semi-structured interviews were conducted at the start and end of the project;

weekly feedback was presented orally by the participants and notes taken; artwork and other creative expression was encouraged to explore experiences; and finally participants wrote a summary of their experiences, which were presented at a school assembly to the year eight students. Additional feedback forms were created for further data collection at the end of the project, as I felt that further corroboratory data would be useful. These feedback forms were based on the possible outcomes I had anticipated as a result of research into the literature on the effects of meditation and other transpersonal practices used in the program. They were intended to present the views of participants, and those adults most likely to notice changes in them.

*Table 3. Qualitative methods used and their purposes*

<b>Method used</b>	<b>Purpose of Method</b>
Semi-structured interviews	To get a picture of how the participants saw themselves in relation to personal, interpersonal and transpersonal areas of their lives. To enable the participants to set goals for the project
Weekly feedback Sessions	To get a picture of the ongoing experiences of the participants and to create a safe supportive space for any issues to be shared
Lotus Mandala	A piece of artwork jointly created to express the combined experiences of the whole group
Beauty Spot –a creation by individual participants of a special place in their environment, to represent their idea of beauty	To elicit an image that would present the students’ ideas about and experience of beauty
Poems based on the two interviews and my experiences of the participants	These were created in order to present my evaluation of the changes that the participants had made, based on the interviews, along with my experiences of them and relationship with them
Self report feedback forms	To establish if the participants felt they had changed in relation to the stated variables
Parent report feedback forms	To establish if the parents felt their children had changed in relation to the stated variables
Teacher report feedback forms (For report feedback variables see appendices 14, 15 and 16)	To establish if the teachers felt their students had changed in relation to the stated variables
Self Portrait, other art work	To support expression of experiences through creative alternatives to spoken language

## **2.2 PROCEDURE**

A local Secondary School was approached by letter (appendix 3) requesting an opportunity to deliver a project in their school designed to improve wellbeing of students and staff in order for the facilitator to research its effects. Consent was granted after an initial interview with the head of Pastoral Care and another senior member of staff.

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The project began with two school assemblies inviting participants from years 8, 9 and 10 to join the AML Project. By the end of the second assembly forty potential participants signed up and were invited to meet me to discuss the programme. Those who decided to continue after this point (now 22 of them) were then invited for interviews a few days later. The staff screened the students who signed up for the program to make sure that any students with possible contraindicated psychopathologies (such as borderline personality disorders or serious emotional problems) were not included in the programme.

The interviews then took place a few days later. These were semi structured, lasting about ten minutes each and were audio recorded on digital equipment. The questions were split up into three sections designed to elicit information about personal, interpersonal and transpersonal aspects of the students' sense of identity. Two interviewers were present and interviewed 10 students each. In order to fulfil child protection safety requirements the students were interviewed in rooms with glass panels with two other students outside, filling in questionnaires in the corridor close to the interview room. Chairs were provided for the participants outside and a member of staff was on hand if they needed anything. The questionnaires consisted of five scales to assess wellbeing and mood states and traits. (See results section for more details).

The first set of interviews was conducted by the researcher and an assistant, a trained Integrative Therapist, who was there in order to interview all 20 participants in one day. The interviews were repeated at the end of the project, six months later by the researcher/facilitator only, as there were only nine students remaining.<sup>2</sup> All interviews were then transcribed and individual profiles constructed, as

suggested in Braud and Anderson (1998, p.189). The profiles were in the form of poems, which were returned to the students for verification (appendix 2).

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The programme curriculum was to be tested with the participation and cooperation of the students, who were invited to contribute to its development during the six months the project ran in the manner of Action Research (Braud and Anderson, 1998, p.38 & 241/2). This was intended to improve the programme using feedback from the students themselves, so that it could be tailored more to their particular needs.

The programme was initially conceived as being delivered over three terms, with weekly classes and daily meditation practice, ideally in a quiet, secluded, private room that would be used consistently throughout the year. In the event, the school decided that only two terms would work with their timetable and there was only one, fortnightly, one hour slot available during tutorial time for teaching the classes. This led to a reduction by two thirds of the original curriculum and lesson plan (appendix 1). Furthermore, the time allocated for practice (15 minutes during the school lunch hour) and the location of the rooms used for the practice, led to great challenges with noise and students outside the room shouting at the participants, coming in and interrupting and generally trying to distract the students during the meditation. Also the room was changed for the second term and from then on the space was no longer consistent. This led to some difficulty in maintaining the focus and relaxation necessary for the students

### **2.3 SAMPLE SIZE AND SELECTION**

Two school assemblies were given by the facilitator/researcher to a total of approximately 500 pupils between the ages of 12 to 15, (years 8, 9 and 10) of Hilbre High School, in West Kirby, Wirral. These assemblies took the form of a PowerPoint presentation, which introduced the practices and some outcomes that might result from attending the project. (Appendix 4) 40 students signed up at the time, only 20 decided to follow through on their initial interest and join up. Contrary to the expectations of staff and researcher only six girls signed up and the remaining 14 were all boys. Memos were given to all teaching staff in the school inviting their participation also (Appendix 5). No teachers signed up. Two teaching assistants however did join the group. There followed some fluctuations in participant numbers.<sup>4</sup>

The intention was to have a control group of equal size and age as the AML group. However, due to an administrative error the control group in October 2007 (time a) were a different group of students to those in March 2008 (time b). They should ideally have been the same students. However, both control groups are year 8 students and neither group completed the programme. In the final analysis control group at

time a, were students who left the programme early after it started. Those at time b were randomly chosen from a class who answered the questionnaire in March 2008 and had not participated in the programme at all.

## **2.4 ETHICAL PROCEDURES**

As the research was to be conducted with school students, ethical approval from the university was first sought. Forms EC1, EC4 and EC6 were submitted along with relevant paperwork. A detailed lesson plan was created and sent to the ethics department along with a list of all questionnaires to be administered. (appendices 6,7 & 8 show papers submitted). Ethical consent was given for a period of five years.

The research was conducted within the ethical guidelines provided by the British Psychological Society with strict confidentiality maintained. This was crucial for all members of the group as the nature of the work carried out was deeply personal and emotive in nature. All interviews, artwork and other data collection methods were labelled with initials only and each student was informed of the aims and conditions of participation as well as their rights to leave at any time (Appendix 9).

All of the students took home letters regarding Informed Consent to parents (Appendix 10). All were duly signed and returned.

The school also requested a CRB check to be carried out on the researcher and her assistant, who had to be cleared before being allowed to work in school. There was also a meeting between researcher and head of pastoral care at the school to ensure the researcher was aware of all possible child protection issues.

Two approaches to validation of qualitative data were used. Firstly, interview transcriptions were given to the participants to read and they confirmed that the content was accurate. Secondly, a word portrait for each participant was written in the form of poems (Appendix 2), which were returned to the students for verification and approval. This method of verification was chosen and agreed by the participants themselves. The facilitator read out the poems and the students elected to guess which of them the poem was about. They were correct about each poem. The participants were also each given a copy of their own poem printed on a picture that represented an aspect of their personality, as interpreted by the researcher.

## **2.5 DELIVERY OF THE AMAZING LYF PROJECT (AML)**

At the beginning of the project during the initial interviews and again in the first sharing circle, each participant was invited to choose three things about themselves that they would like to work on during the programme. They were invited to write these goals in their journals, and to use what they were learning to assist them in attaining the targets they set for themselves. Some examples of goals include “to be less moody” (MD); “not to talk as much” (KN); “to be stronger, like personally, sort of be proud of myself and be more energetic” (HL); more “self-esteem, confident ... I would like to be able to control my emotions” (MW). Other goals included reducing anger and stubbornness (MS); Short-temperedness and keeping emotions inside (NS), and “erm I don’t know. Err nothing” (GA).

The AML project consisted of one weekly teaching class or tutorial, on a Wednesday morning, daily meditation practice during the lunch hour, and one hour a week of sharing circle during Friday lunchtimes. The topic for the tutorial would be given in a handout (Appendix 11), designed like a comic, its contents were discussed and exercises were used to experience related techniques. The sharing circles provided time for feedback on the course content and also any emotional issues that might come up, and finally to discuss any changes, worries or difficulties with the practice and skills learnt.

I found very quickly that my intuition was an important part of the process of working during the tutorials and the daily sessions. Although there was a detailed lesson plan, it was intended to be a flexible guide open to interpretation in the moment. Therefore I was free to be guided by intuition as to which particular practices to do and also to follow cues from the participants’ needs and preferences. The classes also needed to relate to the goals set by the participants. Many ideas for practices, and indeed all parts of the way the project was put together, came by intuition and in dreams, such as the tool bag, the use of gardening metaphors (used in the presentation to the school), the beauty spot (see handouts) and three aspects of relational self (used in interviews).

The project met with several challenges such as having two thirds of the lessons cut, having to move rooms and work with extreme noise and interruptions. I worked creatively with these challenges as best

as I could, choosing to see them positively, as opportunities. I thus incorporated them into the project in several ways, such as using the shorter teaching time to reduce the curriculum to its essentials, thereby simplifying the course; incorporating noise and interruptions into visualisations and using them to improve concentration, and finally using the moving between rooms as a way to teach all of the members of the project how we had built up energy in the space and how quickly we could create that energy again. However, these challenges were the main source of worry that the participants had, other than members leaving the group. They did not like the noise, moving rooms or being made fun of. It was very difficult on some days for them to concentrate, when outside the door boisterous students were shouting and banging. Overall though, the facilitator trusted the process and surrendered to the experience fully, which meant that the students also saw a living example of the tools, skills and theory being taught to them.

I found myself heavily involved in acts of creativity in a way that I had hoped to encourage in the participants. As developer and facilitator of the AML I found that I needed to make learning resources to support the curriculum.<sup>3</sup> Firstly, in order for the participants to learn each others' names I made badges with the LYF symbol in two colour schemes (one cool, one warm) with their names on them. In order for the group to become familiar with different emotions and how they felt within the body, I created a game for them, using A4 laminated cards and beanbags. I really enjoyed making the game, and we all enjoyed playing it.

Once the students became accustomed to relating emotions to energy centres in the body, they wanted reminders of what the feelings were alerting them to, so I made posters for them to put in their journals or on the wall at home. This information was based on Yoga theory, personal experience and Zukav (2001). They soon asked for a small pocket sized version to carry in their blazers (Appendix 19), which I also made and laminated for them. Then as Christmas approached, the students worried about practicing on their own for three weeks, so I decided as a Christmas present to make each of them a CD with the meditations, chants and relaxations we had done so far (Appendix 22 art work).

The students were all invited to create personal portraits at the start of the programme. Only two participants decided to do this. Later they were all invited to create a personal beauty spot, in order to turn their awareness to all the beauty that surrounded them. A few were created and photographed (Appendix 22). At the end of the project I brought multicoloured card in to school, which we all cut into petals together. I took them home and stuck them down into a lotus mandala, which the participants then wrote their experiences upon – one word on each petal (Appendix 22). This was displayed in the school, along with the poems that I wrote for each participant. Each of the students finally wrote a piece about their

experiences (Appendix 13), which they read out to their year group during an assembly after the project was over.

## RESULTS and PRESENTATION OF DATA

### 3.1 QUANTITATIVE RESULTS

#### Strategy for analyses

SPSS was employed to analyse the data from the five scales used to measure well being and self concept. Two types of analysis were run; Firstly, a within groups analysis using five paired sample t-tests was run assessing the differences between the AML group at time a, and time b. Due to the administrative error with the control data the analysis was compromised. This meant that a within groups analysis for the control between times a, and b would not be useful. However, a further between groups analysis evaluating the differences between the AML and the Control at time b was conducted. Secondly, two between groups analyses were run using two MANOVAS (one at time a, and one at time b), evaluating the differences in scores between the AML group and the Control group for the five dependent variables before (time a) and after the programme (time b).

#### Paired sample t-tests

Five individual paired sample t-tests were conducted with the five dependent variables (the total scores from the scales). These tests were run comparing results between AML and Control at time a, and then again at b. Several significant results were apparent. Parametric paired sample t-test scores show significance in three areas; a rise in trait affect by 6 points, and drops in self-efficacy and self-esteem by 6 points each. There were significant differences between the AML and Control at time a. AML were significantly more satisfied at the start of the programme and also has higher trait and state affect. There was no difference in self-esteem. The scores for self-efficacy were also significant in that Control had a higher level of self-efficacy than AML. The significant results from the tests for time b suggested that trait and state affect and SWLS were still significantly higher in AML and self-efficacy were still lower at the end of the programme. (Appendix 24 for SPSS output)

*Table 4. Paired Samples Test showing levels of significance*

	t	Df	Sig. (2-tailed)
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Pair 1 totalswlsa – totalswlsb	- .629	7	.549
Pair 2 totaltraita – totaltraitb	-2.616	7	.035
Pair 3 totalstatea – totalstateb	-1.356	6	.224
Pair 4 totalselfesta – totalselfestb	2.869	7	.024
Pair 5 totalselfeffa – totalselfeffb	2.455	7	.024

Table 5. Measures of central tendency and dispersion for self-report measure at times a and b..

		Mean	Standard deviation	F-value (univariate)
Satisfaction with life Before	AML	26	3	5.12 *
	Control	21	6	
Satisfaction with life After	AML	28	7	3.63
	Control	23	3	
Trait affect Before	AML	73	8	11.86 **
	Control	55	9	
Trait affect After	AML	81	8	24.94 ***
	Control	52	14	
State affect Before	AML	79	10	30.21 ***
	Control	49	11	
State affect After	AML	84	6	66.3 ***
	Control	43	12	
Self-esteem Before	AML	25	3	0.67
	Control	26	5	
Self-esteem After	AML	19	6	11.04 **
	Control	28	5	
Self-efficacy Before	AML	26	5	18.35***
	Control	37	5	
Self-efficacy After	AML	20	6	22.38 ***
	Control	39	9	
Wilks Lambda = .17 F = 7.69** (before)				
Wilks Lambda = .12 F = 13.69*** (after)				

\* p < .05 \*\* p < .01 \*\*\* p < .001

Table 5 shows the mean and standard deviation for each of the measured scores. It also shows the p-values obtained from the MANOVA analyses in order to show the level of significance of the scores.

As presented in table 5 the trait and state affect of both groups before the programme were within similar ranges to their ranges after the interventions (around 70 for AML, around 50 for control). After the programme the range of scores in the control group is much greater than that of the AML in trait affect, state affect and self-efficacy. The scores cluster a little higher, around 80, for AML and the mean scores are still lower, around 50 for control. However, the data also show that the control groups at time a, and time b have inconsistent scores in state and trait affect; i.e. there is a wide variation in scores, indicated by the high deviation from standard shown below. Interestingly, the AML trait scores have improved somewhat between times a, and b, but more significantly the variation in scores between times a, and b for state affect has reduced by almost 50%, from 29 to 15. This implies that affective states across the group have become more consistently adaptive as a result of the intervention.

An initial MANOVA, the Wilks' Lambda multivariate test, run with the control and AML data at time a for all five variables (the totals of the five scales) showed significant differences between the groups. Then a univariate test was run showing that all four tests showed statistically significant differences except for the self esteem scale. A second MANOVA was run with the data from time b and found significant differences again. This suggested that the AML group had significantly improved scores in state and trait affect. The univariate test showed significant changes in all scales except the SWLS. Each MANOVA included a Box's M test for equality of covariance matrices. Both test were significant and therefore violate the assumptions of covariance matrices. This gives us reason to view the results with caution, especially in extrapolation of results to other samples. (Appendix 24 – SPSS output).

As is evident from the figures in Table 5 there are significant differences between the control group and the AML at the start. Particularly significant are the differences in trait and state affect between the groups. This is mirrored, somewhat surprisingly (due to the two different control groups), in the scores after the program also. Table 6 illustrates these findings below.

*Table 6. Trait affect scores for both groups before and after intervention*

	AML	CONTROL		AML	CONTROL
Trait affect before	73	55	State affect before	79	49
Trait affect after	81	52	State affect after	84	43

This clearly shows that levels of wellbeing, as measured by state and trait affect, were higher in the AML at the start of the program than those of Control, and increased further during the six months. Control scores after the program are quite a lot lower for both state and trait affect than the other control group at time a.

AML have a much higher level of trait affect at the start, 73 compared to the control's score of 55, whereas at the end AML's score has gone up to 81, the second control group's score is just a little lower at 52. The difference is even greater with the scores for state affect, with AML scoring 79 at the start rising to 84 and control at 49 falling to 43. Satisfaction with life (SWLS) has risen slightly for both groups, but not significantly.

Data in Table 5 also suggest that there are also significant differences in self-esteem and self-efficacy between the groups before and after the programme. In the Control group the scores increase a little, which is not significant. In the AML group there is a reduction in self-esteem and self-efficacy after the programme rather than an increase, which is the opposite of the direction of the hypothesis. Specifically the AML scores for self- efficacy go down from 26 to 20; the self-esteem scores go down from 25 to 19. In both of these areas a drop of 6 points is statistically significant. This is illustrated in table 7. It should be pointed out however, that during the data analysis the Shapiro-Wilk and the Kolmogoror-Smirnov tests for normality suggested that the control group scores for self-efficacy and self-esteem were not normally distributed, which could add additional weight to the idea that perhaps the scales were inappropriate for the entire body of students.

*Table 7. Self-efficacy and Self-esteem scores for both groups before and after intervention*

	AML	CONTROL		AML	CONTROL
Self-efficacy before	26	37	Self-esteem before	25	26
Self-efficacy after	20	39	Self-esteem after	19	28

From the ten tests presented in table 5, eight were statistically significant. Five were at a level of  $p < .001$ . Two were at  $p < .01$  level and only one had a  $p < .01$  level. A cautionary approach would set the error rate more stringently and therefore the latter value would be forfeited to allow the possibility of a type 1 error. The Wilks Lambda multivariate test demonstrated differences between AML and Control pervasive across the measure before and after intervention. However, some measure elicited more pronounced differences. These are ranked by the strength of the f-values, the most significant being State Affect (after) at 66.3, State Affect (before) at 30.21, Trait Affect, (after) at 24.94 and Self Efficacy (after) at 22.38.

### **3.2 QUALITATIVE RESULTS**

Two types of qualitative data were elicited. Firstly, I was looking for themes within the interviews, feedback sessions and feedback forms. Secondly, I was looking to see how the experiences of the participants would relate to the anticipated outcomes, based on the literature search.

I wanted to know how participants felt about their experiences and if they felt differently about themselves before and after the programme. The qualitative aspects of the research were designed to address this question in relation to the initial hypothesis and research questions. As the participants were not trained to evaluate their own experiences and their own views would not necessarily provide sufficient information, lack of supporting data was addressed by second and third person corroboration - data from parents and teachers were elicited in the form of feedback reports. These were intended to provide more detail and increase depth of understanding as to the efficacy of the interventions.

With the parent and self reports 26 qualities were addressed with the question: *Has there been any change for you/in your child in the areas listed below?* The reports scored as below in Table 8:

*Table 8. Excerpt from feedback report showing scoring method*

	<b>big negat- ive Change</b>	<b>small negative change</b>	<b>no change</b>	<b>small positive Change</b>	<b>Big pos- itive change</b>
	<b>1 point</b>	<b>2 points</b>	<b>3 points</b>	<b>4 points</b>	<b>5 points</b>
General attitude					
Relating to family members					
School marks					

#### **3.21 SELF AND PARENT FORMS**

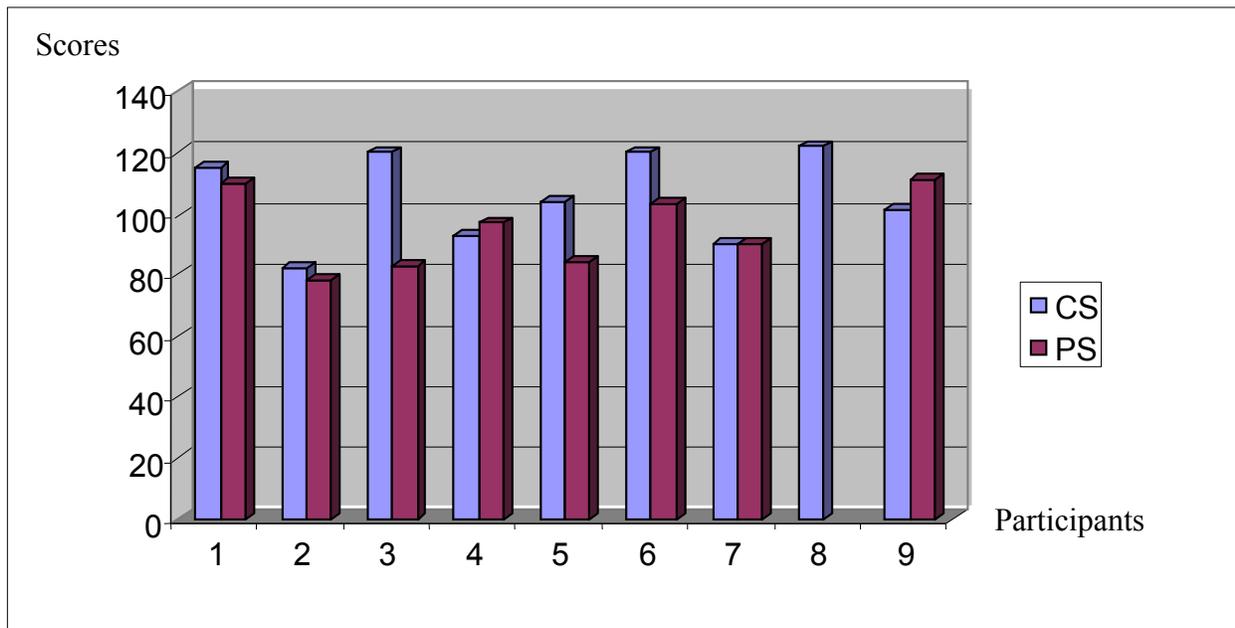
Data from the participant feedback forms (Appendix 14) show that all the students, apart from GS, felt that their level of wellbeing had improved. Interestingly this manifested itself in different ways with each participant. For example ASM ticked big positive change (b+c) in self-esteem and confidence, whilst MS ticked b+c for sleep and positivity. Despite acknowledging no positive change in some areas, participants

felt that they experienced no negative changes in wellbeing. The ticking of no change suggests that the participants were comfortable enough to be honest in their remarks.<sup>3</sup>

Parent feedback forms were similar to participant forms in that they were asked to respond to the same 26 qualities, so their responses can be compared.

Figure 1 shows the comparison of the scores from the self (CS) and parent (PS) reports.

Figure 1. Histogram comparing parent and participant (child) scores



CS = child score    PS = parent score

A score of 78 would show no change. Parents of participants 2, (score 78) 3 (score 83) and 5 (score 84) have seen little change in their children. Half of the scores, those for participants 1, 2, 4 and 7 are very similar in their scoring, showing correspondence between the parents' and participants views of change during the program.

However, there were also some differences between scores, such as the parents of participant 9, who scored 111, 10 points above the participant's self score. These parents felt there were more positive changes than the participant themselves had reported. In contrast, participant 3 reported much greater change than the parent suggests, 120 from self compared to 83 from parent. The parent saw little positive

change. However, this student's teacher told me that he had seen a very positive change; he felt that she had transformed during the programme from being a "hyper-manic student to being calm and well behaved". Certain changes may be evident in school but not at home, or vice versa. Therefore I feel it is important to include parents' and teachers' feedback. There is only a participant score for number 8, as this parent report was not returned.

Although these are subjective reports, parents' views of their children's wellbeing must be taken into account in the overall picture.<sup>5</sup> If, for example all the students felt there were huge changes and parents felt there were none, I would suspect that demand characteristics were affecting the data and that the interventions were not supporting wellbeing and formation of positive self concept.

### **3.22 PARENTS' FEEDBACK**

The parent form (Appendix 16), in addition to the table on the self report, contained questions regarding different aspects of the programme, such as "*Do you think your child has benefited from the project?*" All of the parents, except one, felt that their child had benefited from the programme. The one parent who felt that there was no benefit for their child was that of the student who did not engage in the exercises. I believe that this supports the robustness of the rest of the data, and any other response would have been unexpected and inconsistent.

Data from these forms show that only 3 out of 8 sets of parents became involved in their child's experience of the project, and the same number would like to be more involved themselves if it were run again. Two of the parents expressed a desire to learn the tools for themselves. Half of the parents wanted their child to continue with the programme, however 6 out of 8 felt their child wanted to continue and had benefited from taking part. One of the participants who had benefited most from hard work and commitment to the project did not return a parent form.

The parent feedback form also contained space for comments, so that parents had a chance to have their say. Some parents did not give additional comments, but examples of comments I did receive are shown below:

The parents of one of the student's split up during the course of the programme. Here is what the participant's father had to say;

*"I think this course has helped [him] to handle things with the situation. His school work has improved over the period as well". He also stated that "He seems much more happier with himself".*

Another parent wrote; *"Thank you ... for giving [her] this positive experience and the opportunity to experience something new".*

Additional comments include;

*"[He] has been able to help me in the house and feelings" and "It does help [him] to see things in a different light".*

*"[She] appears more comfortable now, spending time alone, i.e. she finds her own sources of entertainment rather than relying on other people. She has been reading a lot more, listening to music. [She] seems to have enjoyed the project and will often share her experiences with her mum and dad. Would hope with time that [she] would adopt more positive aspects from list overleaf".*

### **3.23 TEACHERS' REPORT DATA**

The teacher reports contained 15 qualities to be assessed, some different from the parent/participant forms. Therefore they could not really be compared meaningfully to the other reports. However, they show various improvements in the participants. The greatest are in school marks (with 10 small positive changes and one big positive change) and in focus/concentration (8 small positive changes).

Further data (appendix 15) show that 12 out of the 14 teachers approached felt that students benefited from taking part, the other two did not know. 10 of them were open to the possibility of learning the tools themselves, three wishing to learn, seven unsure. When asked if they felt the students would benefit from more time in the programme 6 said yes, 8 did not know. All 14 teachers wanted other pupils to have the opportunity to participate in the programme.

There was also room on the forms for further comments from the teacher. One teacher wrote;

*“I think that many members of staff would benefit from the project as well, and would like to have the opportunity to learn these tools myself”.*

One teacher commented about her student who took part, saying;

*“She has become more confident with the other girls in the class”.*

This teacher also stated that she felt she would have liked more information about the programme in advance, so that she could;

*“pay more attention to the changes, as they appear to be very important issues”.*

The teacher was given that information in advance. In fact every staff member was given a memo (Appendix 5), informing them about the programme and its contents and inviting their participation in any capacity they would like. No teaching staff contacted the researcher or took part. It is believed that this may be due to huge amounts of memo's being received by staff and their very busy schedules. They may not have had time to consider deeply what they were actually invited to take part in. This is supported by the comment above.

One student faced a very difficult time during the programme, dealing with his family breaking up and facing personal health issues. Despite these challenges his teacher writes;

*“ [he] has always been very positive, calm and helpful. However, he did appear a little sad sometimes and that seems to have been resolved”.*

One would perhaps expect his wellbeing to worsen during such stressful times, but his teacher/parent and self reports all show improvements. These areas include attitude, ability to relate to others, emotional awareness, motivation, lovingness and school marks.

One student is described as being *“more focussed and calm”*. Another teacher ticked big positive change in all but four out of 15 variables and the remaining four were still marked as small positive changes. Attitude, marks, emotional awareness/regulation and focus/attention were the most common improvements. The only comments made by teachers were positive.

### **3.3 FEEDBACK FROM SHARING CIRCLE – the story of how the programme ran**

Initial responses by the students to the newly learned techniques were similar – the participants found they felt more relaxed and calm but encountered difficulty in practicing at home. They also felt that they needed the support of the group and the daily practice. Within five weeks of regular meditation people around them began to notice changes in their behaviour. One student told me that people were noticing that he was more relaxed, and he found he was “more easy going in tests and at school too” (MD). Another felt that his memory was improving (OB). By this time some students were finding the deepening relaxation had led to less aggression (RT and AM) but others began to find their concentration begin to wander after the initial improvement. Other comments from the first two months include “more confident and strong” (HL); “concentrating better, moves around less, listens more”, (OB). At this point numbers began to fall as the novelty was wearing off and those who would not go the distance began to leave.

Some challenges and teething difficulties began to emerge at this point, with students having to decide between meditating or eating lunch. This was the start of the exodus. The researcher, upon hearing that by the time meditation was over the food was all but gone in the dinner hall, requested lunch passes for the remaining participants, so that they could get food first and then join the group. The meditation session was put back until a little later to ensure no-one went hungry. As the practice began to deepen and the participants became more serious about what they were doing, some members of the group began to feel that they were not adequately supported by their families in finding quiet time and space to practice meditation at home.

By December sufficient work had been achieved in the class for some notable effects to manifest. One student claimed that she would still “get moody but handles it better and changes her own mood” (AM). Another that he found he was “standing up for himself, expresses himself better, is able to listen, focus and remember” (RD). Reductions in negative affect reported include less bossiness (MD), less anger (MW), less aggression (MS). MD found that the more he used the techniques the easier it became and the easier life became.

After the Christmas break all focus and cohesion were lost, due to several reasons. Firstly, the time we spent apart during the holiday, resulting in little practice for several weeks. Secondly, I was away in India for a few additional days, which extended the time apart. Finally, we were moved to a new room. The participants didn't like the new space, did not like being moved, could not concentrate, focus, nor relax. It seemed at this point that the whole project was falling apart. No one was happy with the new room and we all felt disconnected and out of sorts. It was February before some of the group were able to get back to the deeper levels of meditation they had previously reached and others still could not settle.

Feedback since Christmas is full of complaints for the first time. I began to lose heart at this point too. I decided the only way to empower the students and use these problems as a challenge to increase learning was to turn it over to the students to solve, with my support if necessary. We had a pep talk, and brain storming session, during which I asked them how they felt about the situation and whether they wanted to continue with the programme. They all said yes. Ok, I asked, so how did they feel they could turn things around then? In response to this they seemed to find reserves of commitment to carry on and find the sense of cohesion and connection that had been lost. With renewed vigour they used the force of their collective will to refocus on the task. I felt immensely proud and moved by the participants' reaction to these difficulties. In the last session before February half term ASM asked for another pep talk, which we had.

The result of the challenges and the brainstorming was that the participants began to feel emancipated, empowered to work through this together. So that when I was away due to illness for a couple of days the students carried on meditating without me and KN began to lead the meditations. The group was really strong and focussed by the end of the spring term and none of us wanted to stop when the programme ended. The end seemed to come very suddenly and I felt unprepared for the sense of loss that took hold of me. I had bonded with the participants and did not want to end the project. I felt it was valuable to the participants and to the school as a whole and ardently wished to continue with this work, which I felt I had really just begun. The participants also wanted to continue.

### **3.4 THEMES THAT AROSE FROM INTERVIEWS, SHARING CIRCLE, PERSONAL SUMMARIES AND SELF REPORTS**

*“Mindfulness promotes attunement, connection and closeness in relationships” (Brown et al., 2007)*

There were several particular themes that came up regarding the experiences of the participants, based on the interviews and feedback. These themes include relationships, confidence and self esteem, greater awareness of, comfort with, and understanding of emotions, a heightened sense of meaning or purpose, and enjoyment. All of the participants, except one, (the student GA who was not able to engage with the programme), felt they had achieved partly or fully the goals they set out to attain in the first week of the project, one even felt he had accomplished more than he had anticipated. All students (except GA) felt more aware of their own or others’ feelings. Most of the students also felt more relaxed and trusting about their lives (5/9) and all felt calmer (even GA). Several found they coped better with painful emotions or suffered less from them and 6 out of 9 felt they were more amazing than they had previously thought and 6 out of 9 felt that the world was more amazing than before. Weekly feedback includes the comments of some of the participants who left before the end, such as MD.

#### **RELATIONSHIPS**

With regard to relationships outside of the circle, despite two participants finding their relationship with their mothers somewhat strained during and after the course of the programme, the overall feedback concerning relationships supported the mindfulness quote above. One student who was dealing with family troubles at home still found that during the programme his general feeling about relationships improved.

He wrote;

*“I feel that my self esteem and my trusting attitude towards others has improved a lot”.*

Another student said;

*“I’ll be more confident with my friends and ... my brother, he’s getting to annoy me less...I’m more close to my ... mum and my dad than I was ... I try to come closer to them more, so we’re a more close family.”*

She also says about her friendships; *“We’ve sort of been really close and its sort of more strong”*.

Three students found they were able to speak up more (MS, RD and OB). Two found they were less able to get on with their mothers (HL and NS).

The most difficult aspect of relationships during the course of the programme was, as mentioned previously, group members leaving, particularly if after they left they teased those who remained in the programme. This came up often during the six months. Members sometimes felt hurt by those who were now behaving unkindly, but had earlier been part of the close knit circle. Levels of trust were built up during the sessions, especially ones where we worked on emotional awareness and used role playing to get in touch with painful emotions. This takes great trust and courage to do and when people leave and are no longer open and intimate with members it can damage the sense of safety that is created. However, all of the students handled this situation well.

Here is a clip taken directly from one interview transcript about participants leaving:

*Q.9. And what did you like least? (about the project)*

*I don’t know. Nothing. The fact that some people left for very silly and immature things like, like some of them left because they wanted to hang out with their friends and then they started teasing other people who still do it. (ASM) (Red text is researcher’s voice.)*

Another clip about relationships from the interviews says:

*Q.13. Have your relationships with family changed? Well, my brother is still a bit mean to me. But I understand to like cope with it and why he does it- probably you know. And what about your parents? Is that different? It's different because I've learned that some things I really don't want to do I just do them 'cause it will make everything better. Like, Erm, I usually don't bother to walk the dog or anything like that but yeah, I have started to realize that it's good for the dog and it's like not up to me. So that's quite a big change in you, isn't it? Yes. It's like I know I have freedom but I have the choice to do the right thing. (OB)*

RD also claimed that his family relationships changed because;

*“They understand what I’m doing and I think they respect it ... They understand like the change in me and stuff and they like it ... I’m more happy, I do things that I say, and I’m on time and I’ve got everything sorted out.”*

## **TRUST**

AM, KN, MS, HL, MW, NS and OB all felt more trusting after the programme. HL said that

*“Usually I wouldn’t tell people stuff, but now I can ...and my trust in myself is changed as well”.*

For clarification on that point I asked *“So you trust yourself more and you trust others more, is that what you’re saying?”* The answer was *“yes!”*

## **CONFIDENCE**

Five out of nine students felt more confident (AM, HL, NS, OB, RD).

*“Amazing Lyf has changed me. I feel better about myself.”* MD from weekly feedback.

## **EMOTIONAL AWARENESS**

Eight out of nine participants (MS, AM, MW, HL, NS, OB, RD, KN) felt more comfortable with their emotions and understood them better. I felt that more time was needed for further development in this area, however, as we had not had sufficient time to fully develop the work we were doing. Despite this - OB said,

*“ I think I express myself more and stuff like that, you know. I am kinder, I express myself more, and I'm not as worried when things happen. Usually I'd just not be able to talk. You know like getting things mixed up.”*

*“I am no longer as irritable.”* MW in written feedback

RD said his relationships had changed because in the past he liked his friends because he just liked everyone, but now he likes his friends “*because now I know who they are inside*” he also stated in his written feedback that “*I can talk and make friends and can understand my feelings and others*”.

## **ACHIEVING GOALS**

Seven out of the nine participants felt that they had achieved the goals they set out to achieve. One felt he was two thirds of the way there. The ninth participant had had no goal.

## **MEANING AND PURPOSE**

One student summed up the effects of this aspect of the programme in the following way;

*“I feel better now than I did before because I didn’t know anything. I thought we were here just to go to school and go to work, but now I know that there’s things there which we can do ... When I started it I thought all we did was just to go to school and then when we are older just go to work, and that was it. But now I know that we can do more than just do that. We can help others and we can help the world and stuff.”* RD

Another participant said

*“I really want to have the best life I can... and that is always up to me”.* OB

HL felt the meaning of life was to bring joy, AM to teach and to try new things, KN felt there is meaning but she wasn’t sure what that was and NS felt it was to “*do the best I can for everyone*”.

## **RELAXATION/CALMNESS**

All of the students felt that meditation helped them feel calmer, more relaxed and that it helped them to focus and concentrate better. For example:

*“After I do meditation I begin to feel really calm, less jumpy and a lot less talkative”* MS

## ENJOYMENT

Most of the participants expressed their enjoyment of the project in their written feedback. Here are some examples of their experiences.

*“I would definitely come back to have a great time with you and everyone.”* MD

*“I enjoy it because I can relax and feel calm. And I enjoy finding out about other cultures.”* MW

*“The amazing life project is about making the life easier and fun.”* OB

The data also shows that the one student who did not set goals and did not engage in the programme did not show any improvements in any area. This was confirmed by self-report, teachers and parents. The researcher/facilitator confirms that this was evident throughout the six months and the outcome was expected. Another additional piece of data comes from the student who joined in for the last four weeks. He was totally unable to create any experience during the visualisation exercise that he took part in, which suggests that the initial foundational skills that were built up over the first few weeks were necessary to develop the imagination and inner vision in order to use the techniques later on for skills such as problem solving.

## **DISCUSSION**

### **4.1 AN OVERVIEW OF FINDINGS - QUANTATIVE versus QUALITATIVE DATA**

The qualitative and quantitative data suggest that the AML has been effective in improving wellbeing and self concept for the participants to an extent and in certain areas. The general feeling from the school involved in the project exemplifies this overview. Various members of staff at the school have commented that the programme was more effective than they had anticipated, and further collaboration has been agreed as a result. One teacher who had several students in the program was particularly impressed with the results. Additionally, she told me three months after the project, that the behaviour of one of her students, who had shown much improvement during the AML, had begun to deteriorate since the AML had finished and she would liked to have seen the program run for longer. This supports the theory of Goleman and others, whose findings suggested that a minimum of six months was necessary to establish long term changes at the level of trait, rather than state.

### **4.2 QUANTITATIVE DATA**

The hypothesis for this study was that there would be a difference, i.e. an improvement in wellbeing and self concept between the AML and control groups, due to the intervention of the project and its practices.

In this study wellbeing was measured quantitatively in terms of self-esteem and self efficacy, trait and state affect and satisfaction with life. If this programme is to be researched again, it would not be conducted using the same quantitative measures. This is due to the following problems: Firstly, in retrospect the satisfaction with life scale does not seem well chosen to assess the well being of adolescents as they are too young for this measure to be fully relevant. Secondly, the scales may not have been properly understood by the participants. Despite the pilot study to assess the utility of the scales, the students that took part in the actual programme had not understood much of the wording in the questionnaires they were given. This was not discovered until the nearly the end of the project, when

during the second delivery of the questionnaire students asked questions like “What does sacred/hostile/jittery/attentive/irritable mean? At this point the researcher began to realise that perhaps the scales used were inappropriate for this particular group of 12 year olds.

As mentioned earlier the questionnaire was delivered the first time to pairs of children who filled them out in a corridor outside the interview rooms. This meant, essentially that most of the students did not ask for help if they had trouble understanding any of the words. This implies that the scales used were not particularly useful in acquiring wholly accurate data, perhaps due to the vocabulary of the students and therefore the results should be read with caution.

Because of doubts with the quantitative measures, the new Self/Teacher/Parent report was constructed in order to gather more qualitative data. It was also determined that using reports from Teachers and Parents would give a much clearer picture and stronger evidence of the efficacy of the interventions.

The quantitative data seem to support the fact that this type of questionnaire is not the most appropriate way to assess the effectiveness of the AML project. In addition to the vocabulary problems it was found during the data analysis that two of the sets of results from the control group were outside of the normal range. As mentioned earlier the Shapiro-Wilk and the Kolmogorov-Smirnov tests for normality suggest that the control group scores for self-efficacy and self-esteem were not normally distributed. This also implies that the data is not necessarily a reliable indication of the effectiveness, or not, of the programme.

Whilst the above clearly means that considerable caution should be exercised in interpreting the data, a number of suggestive observations may be made. As mentioned in the results section, the range of state and trait affect was considerably smaller in the AML compared to the control group after the programme. This suggests that trait and state affect were more stable as a result of the interventions used. Not only were the ranges notably smaller (AML 15 for state compared to 40 for Control and AML 21 for trait compared to 39 for control), but the lowest score for the AML group for state affect (78) were higher than the highest scores for the control group (63). Similarly the scores for the AML for trait affect were considerably higher in the AML (69-90) than the control (34-73). This suggests that the AML had significantly higher and more consistent levels of wellbeing than the control at the end of the six months.

In addition to this the higher levels of self-efficacy in control group a, before the programme (which consisted of the members of the programme who dropped out early) may go some way to explain why they left the programme.

With regards to the other significant findings from the scales it would seem that trait affect is significantly improved after the programme. However, self-efficacy and self-esteem have significantly lowered. This may, in fact, be due to more self-aware and thoughtful responses during the second administration of the tests. This could perhaps be a result of the fact that before joining the programme participants did not really think about these issues and were therefore not particularly cognisant regarding their own inner states. Awareness of these would evidently improve as a direct result of the programme as this was the main direction in which the participants were drawn.

The data showing the control group scores being outside of the normal range could be due to the group being handed questionnaires out of context, not taking the questions seriously, or that they were not self-aware enough to be honest and accurate in their answers.

In conclusion I would suggest that all quantitative data, including significant positive and negative results be viewed cautiously, due to possible lack of understanding of the vocabulary used in the scales. In order to obtain an improved level of data regarding the outcomes of the AML; to evaluate the programme itself more accurately and to assess the participants' levels of improvement with more precision, I would propose that further trials are conducted with more appropriate age-related scales.

### **4.3 QUALITATIVE DATA**

#### **Interviews**

During the second set of interviews, in March 2008, I had for the first time a deep level of face to face, individual feedback from the participants, regarding the full effects of the programme on their lives. This was a more intimate way of understanding the participants' experiences and it was enlightening for me - I had some profound emotional responses to what some of the students told me. I had not anticipated so many important and valuable effects would occur in such a short time.

The interviews told a powerful story of the emergence of new ways of thinking and feeling in some participants; the students felt that they had gained new perspectives and experiences. The themes that emerged show several areas of improvement in wellbeing and self concept, but I feel that they are still only preliminary effects. Almost all of the students wanted to continue to develop further with the AML and their continued presence day after day sends a powerful message. I feel that much more could

potentially be achieved with a longer and larger study. This suggests to me that further research in this area is essential.

### **Parent/participant/teacher reports**

The questions in the self/teacher/parent reports were put together in several ways. Firstly, intuitively, secondly, basing them on changes noted by participants during feedback sessions, and thirdly in relation to anticipated outcomes that were written in the initial draft proposal for the AML project. These potential outcomes were based on research published on the effects of mindfulness/ meditation and positive psychology, as well as personal experience and from previous work and studying in this area.

Evidence from these reports, as well as weekly feedback suggests improvement in several important areas of life including enhancements in interpersonal relationships; increased self-awareness, self-esteem (in contradiction to the quantitative results), confidence and positive affect; improved ability to cope with stress and emotional challenges; and improved attitudes and behaviour in and out of school.

One teacher, however, did not return the forms after several attempts from the students, so I decided finally to broach the subject with her myself. Immediately it became evident that this teacher did not really want to cooperate. She was polite but, as the students had said, unfriendly. The forms were returned, but in a rather peremptory manner it seemed to me, with neat rows of ticks in almost the same way for each child, almost all **No change** boxes were ticked. I knew from my experience as facilitator that this was not a thorough or appropriate response, as did the participants, who were upset, because it was obvious to them that this was not an accurate accounting of their progress. The scores this teacher gave contradicted the feedback from parents, other teachers, the participants and my own experiences of the students. Therefore additional evidence was sought from other teachers in order to seek further information about the data thus far.

I decided to approach another teacher for these students to see if we could get feedback from a more cooperative source. I assimilated both sets of answers and averaged the scores between the two staff. However, I still feel that this poorly reflected the hard work and changes that these students actually achieved. So I finally decided to use the scores from the English teachers, who, I was assured, spent more time with the participants than the original uncooperative form teacher. Other than this setback the teachers were on the whole very positive.

When one looks at the teacher reports it is clear that all students showed at least four areas of improvement, (apart from the difficult teacher). Most showed roughly half the variables with no change and half with a small positive change. This means that most students showed improvement in several or many areas. Two students in particular, OB and HL, made great improvements with HL showing big positive change in 11 variables and OB in 5. The most telling piece of information regarding the teacher reports is that most of the teachers felt the students had benefited and all said that they would like more students to attend the programme.

Interpersonal relationships between participants appeared to be strengthened as a result of the programme. Rice et al. (1993) studied the effects of meditation within classrooms and also found increased cohesion within the students. This also showed up as a theme from the qualitative data.

As mentioned previously, present interventions and therapies using mindfulness are based upon the premise that detachment fosters insight into one's own psychological and behavioural causes of suffering, thus allowing strategies to be created in order to enhance wellbeing. The evidence supports this hypothesis and further more supports the initial hypothesis that these techniques would create a more positive self concept.

## **THE POSSIBILITY OF BIAS IN THE DATA**

1. The researcher was aware that having bonded with the students there may be an issue of bias in the self-reports and interviews in the form of demand characteristics.
2. The researcher was also aware that being the creator and facilitator of the project, as well as the researcher into its effects could introduce a further level of bias, in herself. This also had to be taken into account.

Both points further justify the need for corroborative feedback from Teachers and Parents.

#### **4.4 CRITIQUE OF CURRENT STUDY AND SUGGESTIONS FOR FURTHER RESEARCH**

##### **Environment**

In order for the participants to get the most out of the Project it would be valuable to have consistency of location, and one which is quiet and not disturbed by other school members. As mentioned it was very difficult to maintain the level of concentration, relaxation and focus when the venue was changed and the students were distracted by noise, insults, or even students/staff entering the space. This will only be made a priority if and when the education system (or individual schools) recognises the value of imparting these skills and techniques to society as part of a more rounded education.

The nature of the challenges encountered implies that the effects may well have been greater had the environment been more appropriate and supportive of the programme. It is evidently extremely difficult for the school to find a conducive environment, as they are limited in the time and space available within the highly demanding curriculum that they must by law adhere to. There is presently insufficient space within the normal school day for these activities due to academic education being prioritised. Due to the difficulties involved, I feel that that the school was both pioneering and open minded in approving the trial of such a programme within their working day. This appears to be typical of the extremely high level of pastoral care that the school is now known for and I feel that the school should be commended for this initiative.

##### **Data Collection**

I feel that new scales more appropriate to children and younger adolescents need to be created in order to facilitate collection of data regarding the efficacy of interventions related to cognitive and affective wellbeing. The Trait and State PANAS scales contain words that are outside the range of the participants' vocabularies and as such did not prove entirely useful in collecting accurate data. In retrospect using a scale to assess satisfaction with life also seems inappropriate and ineffective when considering the wellbeing of anyone who has not yet reached maturity.

In addition to different scales I would improve the semi-structured interview questions (Appendix 23 contains transcriptions), focussing them more towards exploring the development of experiences of safety, connection and value in relation to self concept and wellbeing.

I would also create a separate section within the participant/parent/teacher feedback forms with identical variables so as to be able to more accurately compare feedback.

Furthermore, it would be useful to either link the AML more with topics being covered in art classes, or to drop some of the exploratory art work, as very few of the participants were interested in producing creative expressions of their experiences outside of our allotted class time.

### **Study size and length**

Another weakness of the study was that the group was really too small to obtain robust results. Further studies have been arranged with a wider age group (from age 7 to 18), larger samples and located within two to four different schools. This is intended to be a longitudinal study, which can follow up on the further effects of these interventions, ideally following the students throughout their school careers. One primary and one secondary school have signed up so far. More studies such as with local grammar schools would be useful to see if there are any differences in single sex facilities and with children within a higher academic level. It is hoped that once staff and pupils become familiar with the AML uptake of the programme will significantly increase so that sample sizes will be larger.

Brown et al (2007) express the need for further long term studies into mindfulness and its effects. One reason for this is shown in a study by Maguire et al. (2000), who found that taxi drivers took around six months for new connections to form within the brain enabling them to navigate around the city. They said that *“It seems that there is a capacity for local plastic change in the structure of the healthy adult human brain in response to environmental demands”*. This suggests that in adults it takes some extended period of time for the changes to occur at the structural level of the brain. For example, it will take time for calmness to become an aspect of temperament, rather than a mood. In younger, more plastic brains it may take less time, however, it still suggests that longitudinal practice is necessary for changes to become a part of who we are, not just a temporary mood, and this can happen at a neurophysiological level.

### **Working with adults**

In my opinion this type of education should be more widely available, with two precautions. Firstly, only certain types of people, students, parents and teachers are likely to want to engage with mindfulness and emotional awareness. Therefore, in order to reach the maximum amount of the population ideally it should begin during primary or even nursery education, at first learning of emotional regulation. Secondly, these practices are not to be used with highly emotionally unstable or vulnerable participants, such as borderline psychotics or those with other serious psychopathologies, as they can put them in touch with deep unresolved traumas etc. that are not within the remit of the school to deal with.

Additionally I feel that it would be extremely beneficial to society to also expose parents and teachers to this type of curriculum. Recently Hilbre High School and others, have joined an initiative within which they have committed to become an extended school. This means working in partnership with local people to offer activities and services within local schools and organisations to build a stronger community by meeting the needs and interests of pupils, their families and wider society. It is this type of initiative that could offer holistic education to parents and teachers who have expressed a desire to learn these skills for themselves. As Assagioli said, more members of the community would benefit from this than just children.

*“The study and elimination of ... conflicts and the establishment of harmonious and constructive relations between the members of the family group is an important part of psychosynthetic education. May we emphasize that this includes the education of the parents no less than the education of the sons and -\*/daughters”.* (Assagioli)

## SUMMARY AND CONCLUSION

### 5.1 IMPLICATIONS AND PRACTICAL APPLICATIONS

Although there were some problems with the quantitative data, overall the data suggest that the programme was successful in improving the wellbeing and self concept of the participants. The fact that one participant did not engage with the curricula only strengthens this case. Attending the programme is not enough. Doing the work is essential. This is why only certain students will volunteer or show an interest and even then, they may (like GA) come for other unknown reasons.

Despite some challenges and the curricula being cut by two thirds, much seems to have been gained by those participants who engaged with the programme. Judging by the feedback from parents and teachers, as well as the participants, the programme was definitely worthwhile. More research in this area should be done in order to ascertain as to whether it is possible to embrace a more holistic type of education within the school system and find time for it within the school day. The data suggest that children do feel happier in many areas of life if they are supported in learning about and working with their emotions and are given tools to enable them to make changes that they wish to see in themselves.

Giving the participants a safe, quiet space and permission to accept all of who they are; in order to find their own voices and to express themselves authentically; and providing a space to be listened to and heard when using that voice, may be at the core of the success of the interventions used. It is difficult to ascertain which specific parts of the programme were most successful, but as a whole it seems to have been of great benefit to the participants. As facilitator I felt it a great privilege to assist the participants in

deepening their experiences and becoming more self-aware. It was an honour to have supported them in their quest to learn how to be honest, real and vulnerable, with themselves, each other and me.

I hope that this school and many others focus more attention on providing this type of space and education so that the personal, interpersonal and transpersonal aspects of their students' personalities may be encouraged to blossom and fruit. It is in all our interests to make sure that this happens.

## **NOTES**

### **Note 1 - the PATHS curriculum.**

PATHS has been run in several schools in the UK with great success. For example five schools in Hampshire ran the programme for all key stage 1 and 2 students and found;

*“... from both the statistical data and the interviews suggest that PATHS has had a positive impact within these five schools. In particular, it appears to have provided the children with an effective method of self-control, and a thorough knowledge about the emotions of themselves and others. This has helped to encourage both positive emotional and behavioural development.”*

The programme ran in seven schools West Lothian, Scotland between 2002 and 2005 in primary schools with similar results. Additionally they found that;

*“... children participating in the PATHS curriculum demonstrated significant gains in their literacy attainments. Concentrating on the language of emotion and developing self-awareness and reflection, all impinge on other aspects of the formal curriculum”. (Gajjar & Davids, 2005)*

### **Note 2 – Demand Characteristics.**

Demand Characteristics, may have been an issue within this research with regards to participant feedback. Therefore this potential for bias was anticipated as a possible pitfall of combining researcher and facilitator, as this meant working closely with the participants and building a relationship with them. Demand Characteristics is a term which describes a situation where “the results of an experiment are biased because the experimenter’s expectancies regarding the performance of the participants on a

particular task create an implicit demand for the participants to perform as expected” (Soegarrd, 2008). However, despite the participants’ feedback being generally more positive than that of either parents or teachers it is nonetheless supported by their data, when one allows for the exaggeration potentially imbedded in the students’ responses.

### **Note 3 - List of tools and resources created for project**

Emotions game – laminated A4 cards with bean bags

Emotions poster

Emotions pocket sized chart

CD of meditations and relaxations

Badges

Weekly handouts

### **Note 4 - Comings and Goings - Explanations for participants leaving and arriving**

At the start of the programme there were 22 participants. Two of these were teaching assistants, one of whom worked largely with another participant, a boy with Asperger’s Syndrome. This assistant had medical problems during the programme and was in considerable pain. She eventually missed so many sessions due to illness that she left. Another participant left due to hospitalisation. One further student claimed that he was being badly bullied for attending and another boy told his friends the programme was rubbish and a third was bored – none returned. Three more left giving no reasons during the second month. After two months the group was settled and those for left were fully committed and attended each session, including every lunch hour, apart from lunch club clashes on Wednesdays for a couple of the girls.

Two students who really enjoyed the programme opted out at the start of the second term, after Christmas, as they were offered the opportunity to join a Capital of Culture event, which meant every lunch hour was needed to practice. They told the researcher that they felt torn, but the chance to perform was just too great to miss. Due to staff problems the second teaching assistant also had to leave at this time. With her

went the student with Asberger's. A further student who had appeared to love and benefit from the programme for months suddenly left a few weeks before the end of the course, she said it wasn't working for her. A couple of weeks before the end another dropped out giving no reason.

Several students attempted to join the programme at different times. It was decided that once the initial foundational skills had been taught, after approximately five tutorial classes, no more students would be allowed to join. Also, by that time there was a high level of cohesion in the group and any changes were met with some dismay. In fact, during the final interviews and in weekly feedback sessions the one cause of distress or disharmony was said to be participants leaving; "some of them left because they wanted to hang out with their friends and then they started teasing other people who still do it" (ASM from interview). It was expected from the start that participants would leave the group; in fact a drop out rate of at least 60% was anticipated by the researcher, based on her experience of that number being common in adult personal development groups.

During the last four weeks of the programme one boy, who had been hanging around outside the door for weeks begging to come in, was allowed to join us for the meditation. This student's persistence and single-mindedness, plus the fact that everyone was used to him being there every day so that he almost felt like one of the group, contributed to the group decision that he should be invited in.

#### **Note 5 - Use of Parent Report**

In Australia in 2007, preventive mental health programmes for schools, targeted at preventing depression and anxiety, were tested for efficacy and effectiveness. Included in their data were the outcomes of seven randomised controlled trials of one programme called FRIENDS. To assess the effects of the FRIENDS programme psychometrically sound outcome measures, as well as parent and clinician ratings were used. Similarly, I felt that the use of parent and teacher ratings would support the evaluation of the AML programme.

## **HUMCT006 Hara Willow - References**

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