From Nurture Group to Nurturing Community: Exploring Processes and Evaluating Outcomes when Nurturing Principles are Consistent between Nurture Group, Home and School.

Submitted by Roosje Rautenbach, to the University of Exeter as a thesis for the Doctorate in Child, Educational and Community Psychology in May 2010.

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I certify that all material in this dissertation which is not my own work has been identified and that no material has previously been submitted and approved for the award of a degree by this or any other University.

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Abbreviations and Definitions

Blue Book	Home/school/NG communication book
Blue Room	Room at the NG where children try to regulate their negative emotions
C1	Child 1 (Experimental Group)
C2	Child 2 (Experimental Group)
C3	Child 3 (Experimental Group)
C4	Child 4 (Experimental Group)
C7	Child 7 (Control Group)
C8	Child 8 (Control Group)
C9	Child 9 (Control Group)
C10	Child 10 (Control Group)
Emergent theme	Themes that emerged in the qualitative data analysis
EP	Educational Psychologist
EPS	Educational Psychology Service
Impact Scores	Difference between pre- and post-Boxall measures
IPA	Interpretative Phenomenological Analysis
NG	Nurture Group where research was based
NG1	Nurture Group Teacher
NG 2	Nurture Group Teaching Assistant
NG 3	Nurture Group Teaching Assistant
P1	Parent 1
P2	Parent 2
P3	Parent 3
P4	Parent 4
RQ	Research Questions
SC	School Teacher (for C3)
SDQ	Strengths and Difficulties Questionnaire
SEBD	Social, emotional and behavioural difficulties
SSI	Semi-Structured Interview
Super-ordinate theme	Term used to describe a cluster of related emergent themes
TA	Teaching Assistant
TAC meetings	Team around the child meetings
TEP	Trainee Educational Psychologist
Thrive assessments	Assessment and planning tool of children's social and emotional development
VIG	Video Interactive Guidance

Overview of Thesis

From Nurture Group to Nurturing Community: Exploring Processes and Evaluating Outcomes when Nurturing Principles are Consistent between Nurture Group, Home and School Nurture Group.

SECTION 1: Introduction for Paper 1 and Paper 2

SECTION 2: Paper 1
Exploring the processes of partnership working when developing consistent nurturing approaches between Nurture Group, home and school.

SECTION 3: Paper 2
Evaluating outcomes when nurturing principles are consistent between Nurture Group, home and school.

Introduction and Literature Review
Research Questions:
1. How can consistency in nurturing principles at home be effectively developed?
2. How can consistency in nurturing principles at school be effectively developed?
3. What is the best practice for developing and maintaining effective partnerships with parents?

Introduction and Literature Review
Research Questions:
1. What differences does partnership working have on social and emotional outcomes for an experimental group in comparison to a control group?
2. What implications does partnership working have on social and emotional outcomes for individual children?

Design and Method
Informed from an interpretative paradigm. Qualitative data is collected via semi-structured interviews, consultation meetings and a reflective diary.

Design and Method
Uses a mixed methodology design from interpretative and scientific paradigms. Qualitative data (semi-structured interviews & consultation meetings) is employed in addition to Boxall Profiles, Strengths & Difficulties Questionnaires (SDQs), observations and Video Interactive Guidance (VIG) clips.

Continued overleaf…

Analysis and Interpretation
Interpretative Phenomenological Analysis was used to analyse the above data.
Emergent themes are presented descriptively and emphasised with conceptual maps.

Analysis and Interpretation
Interpretative Phenomenological Analysis was used to analyse semi-structured interviews and consultation meetings.
Boxall Profiles, SDQs, VIG clips and observations were analysed descriptively.
Results for the experimental and control group are compared.
Results for the experimental group are then presented case by case.

Findings
See main body of text for presented findings for Paper 1.

Findings
See main body of text for presented findings for Paper 2.

Discussion
Findings from Paper 1 are discussed.

Discussion
Findings from Paper 2 are discussed.

Conclusion
Final conclusions, limitations of the study and future directions for practice are presented.

References
References for Paper 1 and 2 are combined.

SECTION 4: Appendices
Appendices for Paper 1 and 2 are combined.

SECTION 5: Literature Review
N.B. The literature review has been marked and examined separately from the examination of this thesis. It is appended here for completeness and to give coherence to the whole thesis.

SECTION 1

Introduction: Paper 1 and Paper 2

The notion of educational inclusion aims to ensure that all pupils have access to equal opportunities within education. The Code of Practice (DfES, 2001) and the Special Educational Needs and Disability Act (DfES, 2001) reflect this, as does the United Nations (1994) 'education for all' strategy. However, Bennathan (1997) identified that while there was some success in the inclusion of children with sensory or physical difficulties, the same success was not apparent for children with social, emotional and behavioural difficulties (SEBD) (ILEA, 1995). This supported the insight I have gained through my experience as a teacher, Special Educational Needs Co-ordinator and Trainee Educational Psychologist (TEP).

My ability to reflect on psychological theory was invaluable to my role as a TEP. As a result, I found Attachment theory (Bowlby, 1969, 1973, 1980) provided a framework to help me understand the confusing behaviour exhibited by some children with SEBD. On my quest for a pragmatic solution, I was drawn to Nurture Groups (NGs) whose fundamental philosophy is to support children's social and emotional development.

NGs were established in the 1970's by Marion Bennathan (2004) as an inclusive educational provision for children with SEBD after she identified a category of children who were withdrawn, unable to access learning and displayed poorly developed skills in listening, understanding others and communicating. Bennathan (2004) hypothesised that they felt overwhelmed by classroom demands and that this led to feelings of anger and fear. Their emotional turmoil was subsequently displayed in their challenging behaviour which tested the boundaries of the inclusion agenda.

In my experience with NGs, I was impressed with the commitment to developing the skills and early learning experiences of children so that

they could function at an emotionally and socially developmentally appropriate level. Excellence for all Children (DfEE, 1997) also responded positively, citing NGs as a promising form of educational intervention (for further information on NG philosophy and NGs, refer to sections 2.2 and 2.3 in Section 5 pg 195-198).

Concurrently, recognition on the importance of parental involvement increased. This commitment was reflected by the Government through the Education Acts (1988, 1992 & 1993), Excellence for all Children (DfEE, 1997), the SEN Code of Practice (DfES, 2001) in addition to the recent Every Child Matters (DfES, 2004) and Care Matters (DfES, 2006) documents. This is synonymous with the views of Bennathan and Boxall (1996), who emphasise the need to encourage parental involvement within NGs. Evidence (Cooper, 2004b) suggests that when NGs collaborate with parents as respected partners, there are positive social and emotional outcomes for children and parents.

However, in my experience, partnership working in NGs was not completely successful, despite the theoretical promise and political support. Inconsistencies in environments remained and staff reported how it could be challenging engaging with some parents, particularly when contentious issues required addressing. A possible accounting factor could be that when a pupil's behaviour is perceived as challenging, the rhetoric of blame and accountability can point to parents, as well as the child. This can lead to an implicit power imbalance and contribute to tension in the relationships between parents and staff. This deficit view of parents seemed to serve as a barrier towards collaborative working in addition to other factors such as the difference in constructs, responsibility for action and communication.

In an attempt to find a practical solution, key areas for improvement need to be identified and potential outcomes need to be measured in an evidence-based context. Paper 1 therefore explores how

partnership relationships can be fostered to ensure that nurturing practices are more consistent across settings (for the purpose of these papers, the term 'settings' relates to home, school and NG). Paper 2 evaluates social and emotional outcomes for children when these partnerships are established. This thesis is organised into these respective sections.

When conducting this type of research, it is important to position myself as personal experiences and constructs can implicitly affect the understood perceptions and portrayal of information. I am a white, middle class female who has worked in education for the past 7 years.

SECTION 2: Paper 1

From Nurture Group to Nurturing Community: Exploring the Processes of Partnership Working when Developing Consistent Nurturing Approaches between Nurture Group, Home and School.

Abstract

Evidence suggests that Nurture Groups (NGs) are effective in helping children with social, emotional and behavioural difficulties. NGs recognise the importance of parental involvement and research reveals positive social and emotional outcomes for children when NGs collaborate with parents as respected partners. An implicit power imbalance between NG staff and parents can challenge parental collaboration.

This aim of this paper is to explore processes when consistent nurturing principles are being developed between a NG, schools and home.

This qualitative study was conducted in a NG in the south west of England and included 3 NG staff, 4 parents, 4 children and a school teacher. An action-research model enabled consultation meetings and VIG to be introduced as an intervention to develop consistent practices. Semi-structured interviews, consultation meetings and a research diary collected data and an interpretative approach was adopted to explore processes, experiences and perceptions shared by participants. Interpretative Phenomenological Analysis was used to analyse and interpret the data and produce a set of themes.

The importance of effective communication, building of relationships and sharing of practice/ collaboration were identified as significant themes when developing partnership working between settings. VIG enhanced parents' and the teacher's communication skills and concurred with a partnership model based on empowerment, solutions and respect.

Recommendations for practice include the development of personalised, informal and formal communication systems between settings. VIG can also be used effectively within NGs to develop consistent nurturing practices between settings. In addition,

consideration is given to how VIG can be applied to practice more globally and how local authorities can support this process.

Chapter 1

Introduction and Literature Review

1.1 Introduction

This is the first of two papers which together explore the processes and evaluate the outcomes when nurturing principles are consistent between settings. This first paper aims to explore the processes of partnership working when establishing consistency in nurturing approaches between settings.

The introduction in Section 1 (pg 11-13) outlined how educational inclusion is a human right that all children should access and that the inclusion of children with SEBD can be challenging. NGs were introduced as an educational provision to meet the needs of these children. While it was recognised that parental involvement was fundamental, concerns about this process were raised. Few studies have discussed the importance of parental involvement in the context of NG success and provided guidelines on how to establish this collaboration. In order to develop greater clarity on the topic and to define my research focus, a literature review was completed and is presented in the following section.

1.2 Literature Review

The literature has been sourced through a number of EBSCO and Pschinfo searches, Google scholar online searches and personal books. To ensure that the research was viewed from a variety of perspectives, a number of differing search terms were used. For example, when exploring the literature around partnership working with parents, terms such as 'parent partnerships in nurture groups' and 'partnership working with parents in education' were used. When reading this literature, further relevant research was identified and found directly on the same search engines detailed above.

This section intends to provide an overview of the literature rather than an in-depth exploration (please refer to Section 5, pg 193 for the full literature review of the research).

1.2.1 Research into NG Effectiveness

Small-scale and large-scale studies suggest children benefit from social and emotional gains following NG provision (Bennathan, 1997; Binnie and Allen, 2008; Bishop & Swain, 2000b; Cooper, Arnold and Boyd, 2001; Cooper and Whitebread, 2007; Iszatt and Wasilewska, 1997; O'Connor and Colwell, 2002; Philips, 2008; Sanders, 2007). However, a smaller body of conflicting evidence has identified that not all children make the same progress (Cooper and Tiknaz, 2005; Gerrard, 2006; Sanders, 2007). I question why these differences exist and plan to provide some explanations through the subsequent literature review.

One possible explanation could be that individual NG features vary and that some of these features are more effective than others. Cooper and Tiknaz (2005) revealed variables on an interactional level, such as the peer relations in the group, communication between staff (e.g. teachers and NG staff) and how the quality of interactions between NG staff and pupils contribute to NG success.

They also highlight how involving parents can be a challenge and that this can affect potential outcomes. This is apparent in the following NG teacher's comment;

> "There is a huge gap between the attitude at school and attitudes at home… obviously, the school has no importance and the people at school are useless… he is being told off at home which (means) he is very confused…there is a huge amount of confusion in the child's mind." (Cooper and Tiknaz, 2005, pg 216)

Interestingly, the challenge of partnership working is echoed in the following statement by a parent of a child attending a NG;

"… I don't see his nurture group teacher. I feel I don't know what goes on in the group. I need to understand what he is doing a bit more." (Cooper, 2004b, pg 43)

A possible explanation is proposed by Miller (2003) who identifies that challenging behaviour can produce highly emotive situations which can generate a context whereby collaborative working can be difficult to establish. O'Connor and Colwell (2002) and Bomber (2007) argue that a child's school and home life are intrinsically linked and that the success of any intervention depends on collaboration from both areas. In congruence with the research aims, Bomber (2007) emphasises how inconsistencies between home and school need to be addressed.

Parental involvement has been identified and is understood to be a barrier to the effectiveness of NG provision. Even with this insight, evidence (Cooper, 2004b; Cooper and Tiknaz, 2005) suggests that it is a difficult obstacle to overcome. Factors that challenge this collaboration are discussed below.

1.2.2 Barriers to Collaboration

In agreement with Miller (2003), Cooper (2004b) suggests that parents may feel criticised about their ability to nurture and provide valuable early experiences. In an attempt to counteract this, NG staff are trained to be non- judgmental, positive and to develop empathy for both children and parents. Bennathan and Boxall (2000) emphasise that through collaborative work with teachers, parents and children, difficulties can be overcome. However, Bennathan and Boxall (2000) and subsequent research (Binne and Allen, 2008) does not detail how to translate this theory into practice.

Another factor could be that parental involvement is not prioritised. Research (Binnie and Allen, 2008; Cooper and Lovey, 1999; Gerrard, 2006) highlights how a minority of staff noted how involvement of parents had been valuable.

Communication styles might also account for the difficulties associated with collaborative working. Bishop and Swain (2000a; 2000b) identify that the nurturing of parental involvement is inherently problematic. In their case study (2000b), they identify how professional viewpoints on 'partnership' working were perceived as training parents through modeling, expert advice and sharing the difficulties the NGs experienced. This communication tended to occur in the form of 'feeding back' rather than 'feeding forward' and occurred when the NG deemed it to be necessary. This suggests that in practice, communication tended to be unbalanced and less weighted towards parental input.

This form of communication would fit under Cunningham and Davis' (1985) 'transplant model' of partnership working, whereby skills and expertise are passed on to parents. They are critical of the transplant model as settings retain control. Dale (1996) concurs with this view point, explaining it dismisses differences in parenting related to culture, relationships, values and family resources. In contrast, Cunningham and Davis (1985) propose that a 'consumer model' allows for a more equal partnership. Models synonymous with this are explored further below.

1.2.3 Models of Partnership Working

Pinkus (2005) identifies difficulties associated with converting partnership theory into practice. From her experience, she concluded that four features in particular were identified by parents as being essential to combating this state of 'partnership paralysis'. These were:

- Consensus about the purpose of the partnership

- Clarity as to who is in the partnership and why

- Enabling equal power distribution between the partners

- Implementing transparency and accountability mechanisms for monitoring the partnership

Pinkus (2005) stresses that objectives need to be agreed upon and that an accessible, ongoing sharing and planning process needs to be established with professionals adapting to parental needs. Similarly, Roffey's (2004) definition focuses on shared power, understandings, strengths and expertise, responsibility and participation. The above provides some insight into the structure of partnership working.

I became drawn to Video Interactive Guidance (VIG) as it corresponds to the models of working described above. It also provides a structured approach to working and its theoretical foundation parallels with NG philosophy. The subsequent text describes VIG in more detail.

1.2.4 A Tool for Collaborative Working

The theoretical core of VIG was developed by Trevarthen (1979; 2001). Associations with primary and secondary intersubjectivity in addition to Mediated Learning (Feuerstein et al., 2004) are central to the approach. Contact principles (Trevarthen 1979, 2001) of communication are employed as a framework to develop attunement between an adult and child.

Wels (2004) explains that VIG promotes empowerment as it accepts parents as they are. It also strengthens their skills rather than identifying their weaknesses. Most importantly, parents are empowered by discovering these skills themselves, instead of being advised by professionals. Simpson, Forsyth and Kennedy (1995) found that families changed positively in their own unique way. This implies that VIG parallels with a consumer model of working as it is capable of collaborating with families in ways that are specific to their situation and which they can control.

Considering the existing research literature, pragmatic tools like VIG need to revealed to facilitate effective partnerships between staff and

parents in NGs. This research intends to explore this through the following research questions:

1.3 Research Questions

1) How can consistency in nurturing principles at home be effectively developed (RQ1)?

2) How can consistency in nurturing principles at school be effectively developed (RQ2)?

3) What is the best practice for developing and maintaining effective partnerships with parents (RQ3)?

Chapter 2

Design and Method

This chapter details how the research was undertaken and how the information obtained was analysed. It commences with the methodology before identifying sampling procedures. This is followed by data collection methods, the intervention, ethical considerations and procedures for analysis.

2.1 Methodology

The following factors impacted upon the methodology. Firstly, as the research was going to be grounded in Educational Psychology Practice, the methodology had to allow common NG practice to be examined. Secondly, as I was delivering the intervention, the methodology had to allow me to engage in a 'psychologist-in-action' role. Thirdly, it needed to be in-depth so that it could capture the views, experiences and beliefs of those involved. In addition, the design had to allow for participants to successfully engage and participate with the research process.

As the research sought to gain an insider perspective on participants' individual lived experiences and their views on collaborative nurturing practices, it had a phenomenological orientation. Phenomenological inquiry attends to what is experienced in the consciousness of participants (Giorgi and Giorgi, 2009; Smith, Flowers and Larkin, 2009) and can be accessed through language and meaning making employed in accounts and stories. As this approach focuses on conscious experiences, there is an 'intentional' (Giorgi and Giorgi, 2009) aspect to phenomenology. This describes how the process occurs in the consciousness of participants and how their attention needs to be directed towards this process.

The research was also influenced by hermeneutics (Smith, Flowers and Larkin, 2009), the theory of interpretation. The design employed an interpretative paradigm as it aimed to make meanings of the

dynamics and intricacies of partnership working in a specific NG setting. Interpretative research paradigms (Ernest, 1994; Smith, Flowers and Larkin, 2009) aim to understand and interpret a particular concept or topic.

Two levels of interpretation are implicated in this study. Firstly, participants offer their interpretations of the research phenomena. The second level of interpretation is completed by the researcher who attempts to interpret the comments made by participants. So while the participants are trying to make sense of their world, the researcher is trying to make sense of the participants' interpretations. However, it is important to consider that interpretation is influenced by the participants' abilities to understand, verbalise and articulate their thoughts and experiences. Likewise, interpretation is affected by the researcher's ability to interpret and analyse this information. Furthermore, it is important to not bias data by interpreting data further than what was provided by participants.

It could also be argued that the research design overlaps with constructivist theories. Constructivist approaches are founded on the premise that participants construct their understanding of the world by reflecting on their experiences (McGhee, 2001). It argues that people actively construct their own understanding of concepts, phenomena and ideas from their experiences.

These theoretical foundations contributed to the selection of Interpretative Phenomenological Analysis (IPA) as a qualitative approach. IPA enabled a phenomenon to be understood from the participants' perspective. This was particularly important in this current study as the intention was to reveal illuminating and unexpected perspectives on complex working processes and relationships in a research field where minimal evidence exists. This approach aims to attend to voices that may have previously been over-looked. These perspectives could be gained by situating participants in particular contexts and exploring their individual

perspectives in detail. As a result, it is only possible to involve a small sample size. This concurs with IPA's idiographic underpinning which emphasises that learning at this micro level can influence theory and practice at a macro level (Smith, Flowers and Larkin, 2009).

In addition, IPA accepts the active role of the researcher in the research process. My involvement in the NG was fundamental to the implementation of the intervention. Moreover, this involvement provided a wider perspective into the participants' experiences. IPA embraces the interpretative aspect of the study; it acknowledges the researcher's personal beliefs and viewpoints and accepts that understanding requires interpretation.

The cognitive aspect of IPA appreciates the layers of reflection and interpretation. This reflection is a 'sense making' activity for participants aimed to help them understand their relationship with the world. IPA enables cultural positions of participants to be explored. To understand these claims competently, it is important for the researcher to be knowledgeable of this culture.

Furthermore, the research sought to reveal an unlimited amount of emergent descriptions instead of confirming pre-determined hypotheses or choices. IPA's inductive underpinnings are strongly supportive of this approach. Overall, this 'bottom- up', inductive qualitative design allowed for an open and holistic insight into working practices and the effectiveness of the intervention.

Finally, this research design allowed for multiple sources of viewpoints to be employed to generate a broad view of effective partnership working. This data could be triangulated to minimise bias of subjectivity.

2.2 Participants and Sampling

The research was based in an area NG targeting Key Stage Two children. Although the NG was based on a primary school site,

children from surrounding primary schools also attended. The NG lies within a town in the south west of England with an approximate population of 15,000. The average number of children attending the NG throughout the research was nine. All but one of the children attended the NG in the morning and then returned to their mainstream primary school in the afternoon.

This NG was selected for the research project for a number of reasons. It conformed closely to the classic Boxall model (Bennathan and Boxall, 2000; Boxall, 2002) of NGs and had been established for over two years. Pragmatic factors also impacted on the selection of the NG. For example, in this rural county there are only three area NGs maintained by the local authority's Education out of School Service. As a result, the choice of NGs for the research was limited. Furthermore, as the research was conducted as part of the Educational Psychology Service (EPS) development plan, it was completed within the EPS locality.

After meeting the NG teacher and providing her with research information (see Appendix 1, pg 124-126), she met with parents and introduced the research project. From these meetings, 4 mothers expressed interest in participating with their children (3 boys and 1 girl with a mean age of 8 years and 8 months) and were recruited to the study. Three staff members from the NG also volunteered to participate.

2.3 Data Collection

The next section describes the tools employed to collect data and how this was achieved.

2.3.1 Semi-Structured Interviews

Semi-structured interviews (SSIs) were chosen because the meanings people attribute to the situation are important (Radnor, 1994; Robson, 2002). The open-ended questions supported interactive conversations whereby personal behaviours, interactions and

experiences could be explored flexibly through means that were not easily reduced to measurement. Individual SSIs with NG staff, parents and children were conducted to explore existing practices. These interviews explored similar aspects but were adapted for the target audience (parent, child or staff interviews). The initial interviews gathered information around concerns, strengths, successes, areas for development and particular difficulties.

Subsequent SSIs were completed with the same participants at the end of the intervention. The interviews sought to evaluate the overall effectiveness of the intervention, establish which elements were particularly successful, which elements were less successful and to see whether their views had changed following the intervention. (See Appendix 2, pg 127-128 for an example of the children's interviews and Appendix 7, pg 137-144 for a completed interview with parent).

2.3.2 Consultation Meetings

Consultation meetings were completed with parents. For one of the participants, there were additional meetings with the mainstream school class teacher. These meetings reflected on information gathered from the observations, video recordings and their experiences.

The initial consultation meeting (see Appendix 3, pg 129-130) aimed to establish relevant background information, expected outcomes of the intervention, current successes, their current concerns and level of concern. An action plan was then devised.

Follow up consultation meetings (see Appendix 4, pg 131-133) identified successful aspects of the intervention, additional aspects of home and school life that were working well, reviewed concerns and devised an updated action plan. In some cases, these meetings occurred telephonically.

The consultation meetings were video recorded with participant's consent. Videoing these meetings was an essential requirement for

my training as a VIG guider. Notes were then made to record progress and were distributed to the NG, parents and class teacher.

2.3.3 Research Diary

Throughout the research project, I updated a research diary. This included information on successes, concerns, how obstacles had been overcome and ideas for overcoming further potential difficulties (see Appendix 5, 134-135 for extracts).

2.4 The Intervention

The main aim was to facilitate consistency in nurturing principles between settings. During the first consultation meeting with each parent, I explained how I could work with the parents to support this.

It is important to note that the work with the participants varied according to their context and needs. For example, through discussion with the NG teacher and one of the parent participants, it was agreed that the intervention would be most effective if conducted between the teacher and child instead of the parent and child. This was tailored due to his social and emotional difficulties associated with the relationship with the class teacher, not his parents.

Through regular consultation meetings, I helped parents and the class teacher to plan ways of working through challenges. I also used Video Interactive Guidance (VIG) as a versatile tool for aiding and enhancing positive communication and interaction between people.

VIG (Kennedy and Sked, 2008) was developed in the Netherlands to support communication in families whose children were in residential care. It is based on the notion that everyone has a desire to communicate, that this can be done in a number of ways and that everyone can develop their communication skills and relationships.

VIG involved cycles of filming, analysis and discussion of filmed interactions (e.g. between teacher or parent and child). The method began with the recording of a short piece of film (approximately 10

minutes) taken of the participants interacting.   Participants were encouraged to choose their activity for the film; however, adults generally chose to follow the child's lead.   The films involving the parents were all recorded at the NG and the films involving the school teacher were recorded in the teacher's classroom.

After micro-analysing the video, I met again with the parents or teacher and encouraged them to observe and analyse the positive interaction strategies, the subsequent emotional responses and to consider how these more attuned responses could be applied to other less successful interactions.   It explicitly linked communication to emotional meanings in a solution-focused approach.

Figure 1: Flowchart depicting the joint consultation meeting, videoing, supervision and feedback process
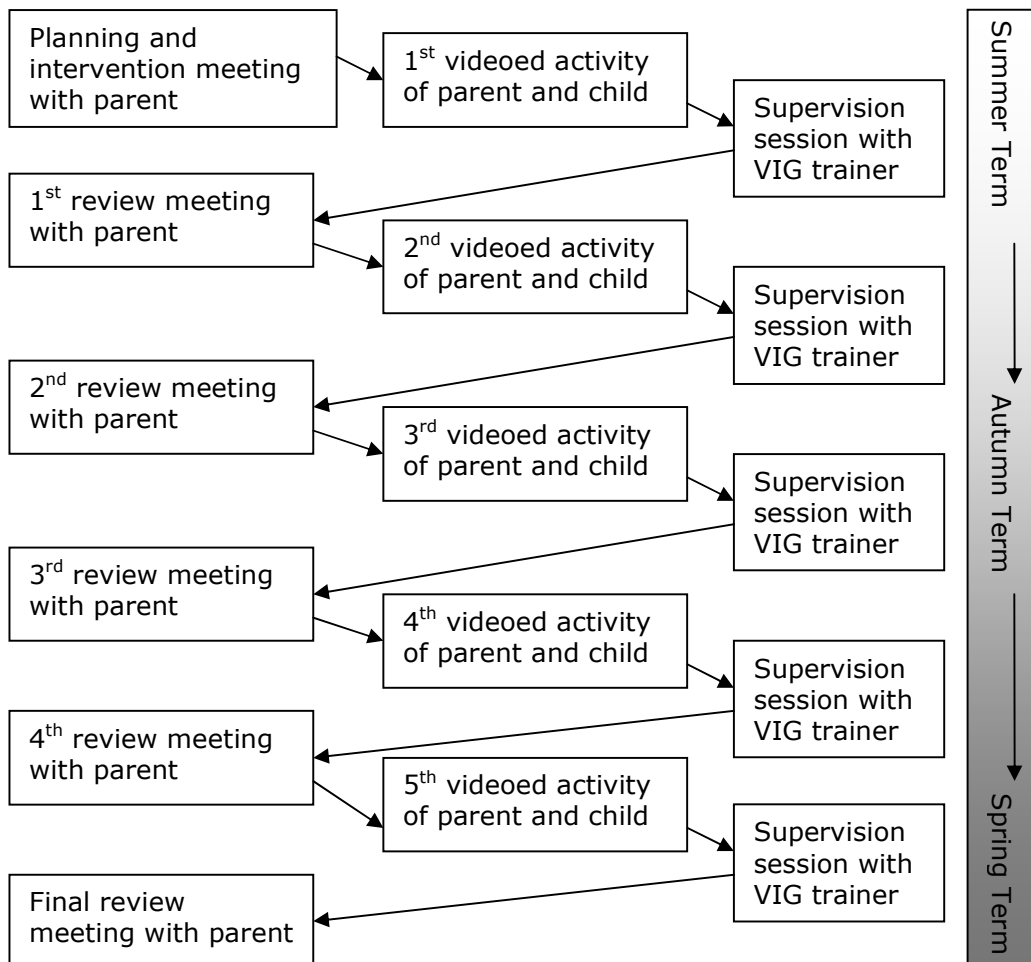
I planned to complete 3-5 cycles of VIG with the participants combining the review consultations meetings with video feedback sessions. I completed phase 1 and part of phase 2 of my VIG training while working with the families. Figure 1 (pg 29) shows how the VIG intervention was structured with one of the families.

2.5 Ethical Considerations

The British Psychological Society (BPS, 2009) Code of Ethics and Conduct details guidelines on issues regarding respect, confidentiality, informed consent and safe guarding which were carefully considered and adhered to during the research. They are discussed in more detail in Appendix 6, pg 136 and Appendix 30, pg 181-184.

2.6 Analysis Procedure

I employed Interpretive Phenomenological Analysis (IPA) (Smith, Flowers and Larkin, 2009) to analyse and interpret data from the SSIs and consultation meetings. The first step in this analysis was to actively engage with the data. This involved listening and reading every data source openly several times, while endeavouring to bracket any pre-conceived views.

Exploratory notes about words, phrases and explanations in the data were then recorded. Descriptive analysis reflected on the participants' experiences and on my understanding of their contexts. Participants' use of language was examined alongside the descriptive analysis. For example, use of emphasis, laughter and pauses were noted. With deeper engagement and with personal reflection of the participants' experiences, interpretative abstract concepts arose to aid the understanding of meanings. This interpretation was facilitated by considering comments made elsewhere in the SSIs and consultation meetings. These descriptive, linguistic, and conceptual comments were colour coded and recorded under the heading of

'exploratory comments' (see Appendix 7, pg 137-144 for an example of an analysed SSI).

The next phase in the analysis process was to produce a succinct summary of the important themes that arose in the data. The exploratory notes aided the development of emergent themes which linked relationships, connections and patterns. It is important to highlight that assumptions and hypotheses about the data were bracketed to ensure that the analysis process was consistent with IPA's commitment to an inductive approach. Similar emergent themes were then grouped into clusters of super-ordinate themes through the process of 'abstraction' (see Appendix 9, pg 152).

This procedure was repeated for every SSI and consultation meeting. Similarities and differences between pre- and post-measures and between participants became apparent. The summary of themes were subsequently re-organised with the new emergent themes. As the analysis involved a relatively large sample for IPA, there was an emphasis on key emergent themes for the group. Some of the emergent themes were not relevant to the research questions so were not analysed further.

SSIs and consultation meeting data was uploaded onto NVivo 8 software (QSR International) which stored and aided the organisation of emergent theme coding. The process of 'numeration' was also used to reflect the frequency of emergent themes and to indicate importance of the themes (see Appendix 9, pg 152 & Appendix 11, pg 157).

Chapter 3

Results

In this chapter, I will answer the research questions outlined in Section 1.3, pg 22.

Findings from the SSIs, consultation meetings and research diary are presented in relation to the research questions. Conceptual maps are displayed to clarify the findings. Charts were also developed to display the number of references for the super-ordinate themes that emerged from the SSIs and consultation meetings. These charts indicate which themes were most prevalent and therefore provide further validation of the discussed findings.

In order to ensure that anonymity is maintained, participants are referred to with a corresponding participant number. A pre-fix has been added before the numeral to identify whether the participant is a child (C), parent (P), NG staff (NG) or school teacher (SC). In the case of children and parents, the numbers correspond to represent related children and parents, for example child 1 (C1) is the child of parent 1 (P1).

3.1 How can consistency in nurturing principles at home be effectively developed (RQ1)?

Important factors that emerged from the data were related to the super-ordinate themes of Communication, Sharing Practice, Relationships and Outcomes (see Appendices 9, pg 152 and 11, pg 157 and the conceptual map in Figure 2, pg 33). The text below outlines these findings.

3.1.1 Communication

It was evident that communication was a strong theme that threaded through many of the findings. Furthermore, there appeared to be two main aspects of it. One aspect was about parents and staff having an open, understanding and supportive dialogue as described

below (in section 3.3, pg 43).   The second aspect of their communication was about sharing practices. This is reflected with the references to 'sharing' (Figure 3 pg 34) and 'sharing practices (home and NG)' (Figure 4, pg 34).

Figure 2: Conceptual Map showing linked themes when developing consistency in nurturing principles between home and the NG

Sharing Practice

Sharing practice allowed management strategies to be shared and improved an understanding of perspectives. Both improved outcomes.

Parents valued personalised and flexible approaches when communicating and sharing practice.

Positive Outcomes

Open, understanding and supportive communication improved relationships and vice versa.

Relationships

Communication

At a micro level, the analysis of communication through VIG improved the relationship between parents and children.

Parental perceptions of the communication between home and NG were positive. As is evident from Figure 3, formality of meetings arose as a theme through the SSIs.

Figure 3: No. references from emergent communication themes from SSIs

Bar chart with y-axis labelled "No. of references" ranging from 0 to 70, and x-axis labelled "Communication themes". Values approximately: Formality 40, Resistance 25, Sharing 63, Co-operating 13, Collaborating 13, Confusion 10.
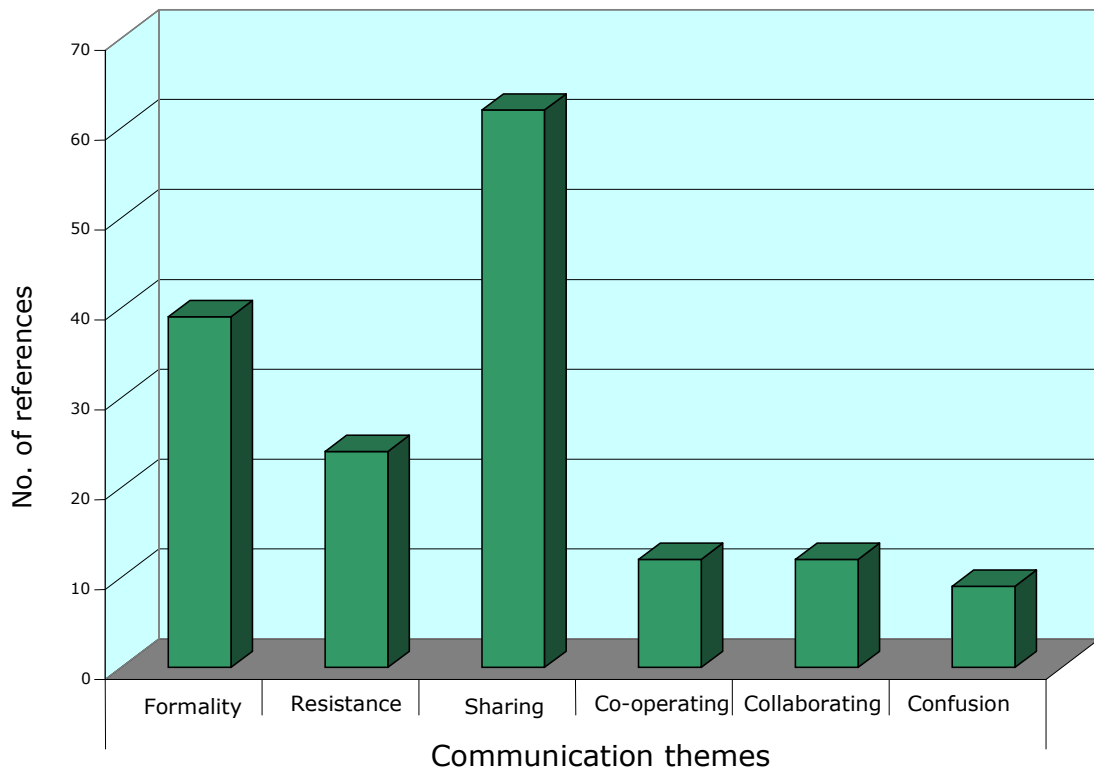
Figure 4: No. of references from emergent joint working themes from the consultation meetings

Bar chart with y-axis labelled "No. of references" ranging from 0 to 12. Values approximately: Sharing practice (home and NG) 11, Sharing practice (NG and school) 5, Sharing practice (home and school) 4, Multi agency 5.
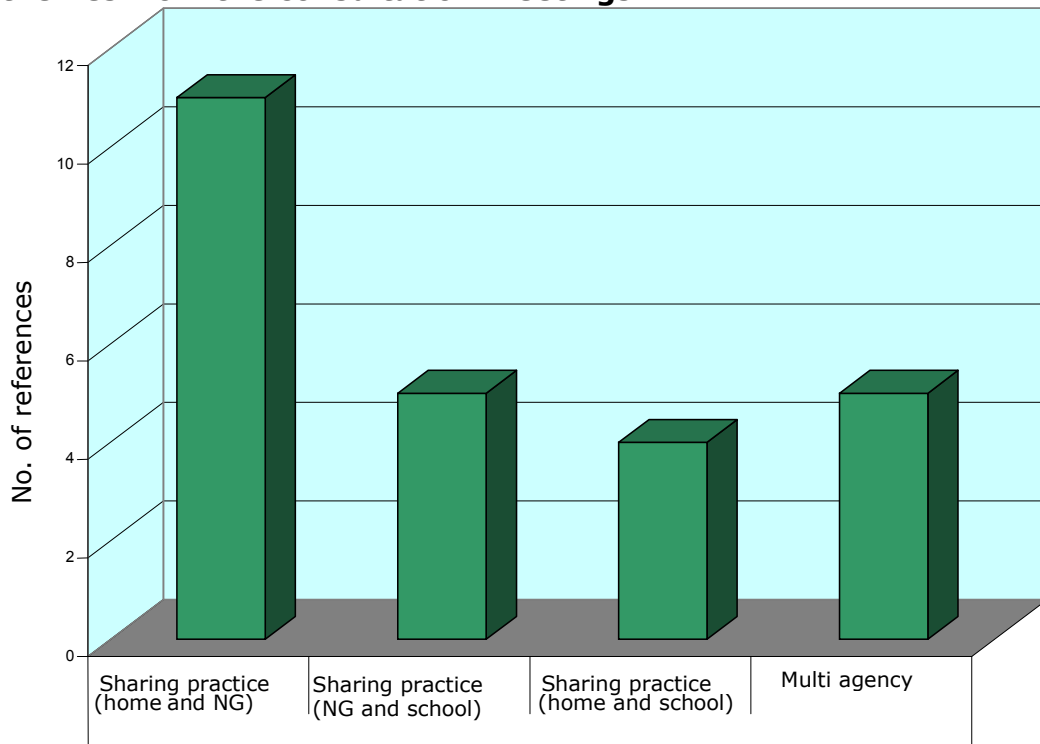
Parents expressed how they valued spending informal time in the NG and 'catching up' when they collected or dropped off their child;

> "We can always have a chat then or afterwards, or if I need to have a chat I can speak to NG1, I can just phone her or she can phone me." (P1, post SSI)

The NG teacher also had a system whereby she arranged termly meetings. This enabled them to discuss concerns, solutions and share strategies. Different parents seemed to prefer different methods of communication. Most of them mentioned that they liked the Blue Book (home–school book).

> "He now receives positive affirmations at the NG; he enjoys reading his comments to me (from the blue book)." (P3, meeting 1)

> "The blue book is good as you always know what is happening." (P2, meeting 3)

However, three of the parents also liked to meet in person or talk over the phone. That allowed them to add humour, provide greater detail and in the case of the phone, provided privacy when this was more appropriate;

> "It comes better verbally and sometimes I could write a book about it! Verbally I can include humour and they can read things in my voice. Or if I can't talk in front of C1, I'll phone later and speak to NG1." (P1, post SSI)

3.1.2 The Impact of Sharing Practice on Outcomes

All the parents appreciated the specific parenting strategies that the NG shared and felt more confident in the strategies that they used to manage their child's behaviour. This is evident in Figure 5 (pg 36) with the references to changed outcomes with relation to 'parenting skills', 'changes at home' and 'behavioural'.

Figure 5: No. of references for emergent outcome themes from the consultation meetings
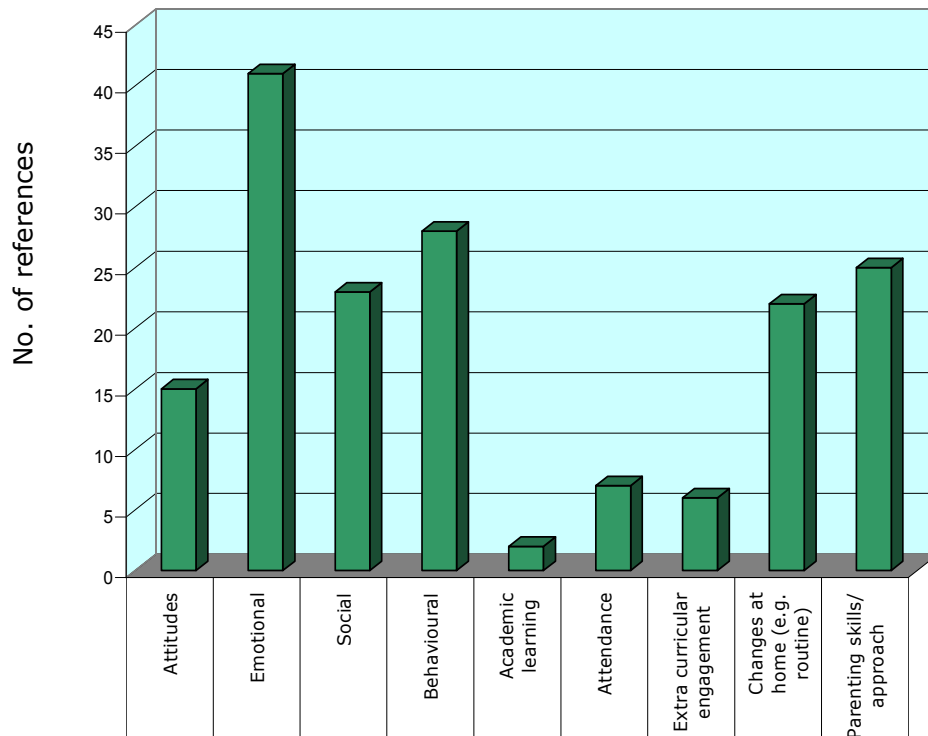
For instance, one parent explained that she was getting better at giving her child choices and controlling her own anger.

> "The NG teachers are able to show C2 how to deal with things and tell me about things." (P2, meeting 3)

The sharing of information increased their capacity of understanding how their child might be feeling;

> "C1 is very sensitive and there is a particular way of understanding and communicating with him; he needs to be listened to very carefully, have things made very clear and you need to be consistent." (P1, meeting 6)

For example, at the start of the intervention a parent explained how she was, "…trying to get a routine going at home…" Post-intervention, she described how she was more realistic in her approach to boundary setting.

There also seemed to be an implicit sharing of information. For one of the parents whereby the distance posed a problem of visiting the NG, it was evident that she was employing some of the NG approaches;

> "I can say to him now, 'You need to think about your blue room C3', and that helps him deal with it (his anger)." (P3, post SSI)

Different parents sought support in different formats and it was important to personalise resources to their needs;

> "The book you leant me (Hughes, 2006) was very good- I learnt a lot from it but it is 4 years too late for our situation. I wish that I had had the book 4 years ago when we were calling out for help with our parenting." (P4, post SSI)

In collaboration with the NG, I invited parents in for a coffee afternoon. The parents and NG staff were positive about the event. The findings revealed various benefits; it allowed parents to, "Overcome the barrier that the NG is part of a school and that we are scary…" (NG1, post SSI). It also enabled parents to meet each other informally. As a result, parents swapped useful information and learned about each other's situations. Parents also used the opportunity to talk to me or the NG staff directly about concerns.

> "It was lovely, really nice. When you see others you don't think they have problems like you but everyone has a problem!" (P2, post SSI)

> "If they have another coffee morning I would always come…it was nice to meet other parents, one of them told me about the family fund which I have now applied for. It's a good way of swapping information… It shows the kids that you are interested and that you care." (P1, post SSI)

Although children enjoyed their parents visiting the NG to share their environment and work achievements, two children expressed anxiety about their parents sharing information with NG staff.

3.1.3. VIG: A Tool to Share Practice

Nurturing practices were celebrated through the VIG intervention (see the communication references in Figure 6, pg 38).

Figure 6: No. of references for emergent communication themes from the consultation meetings
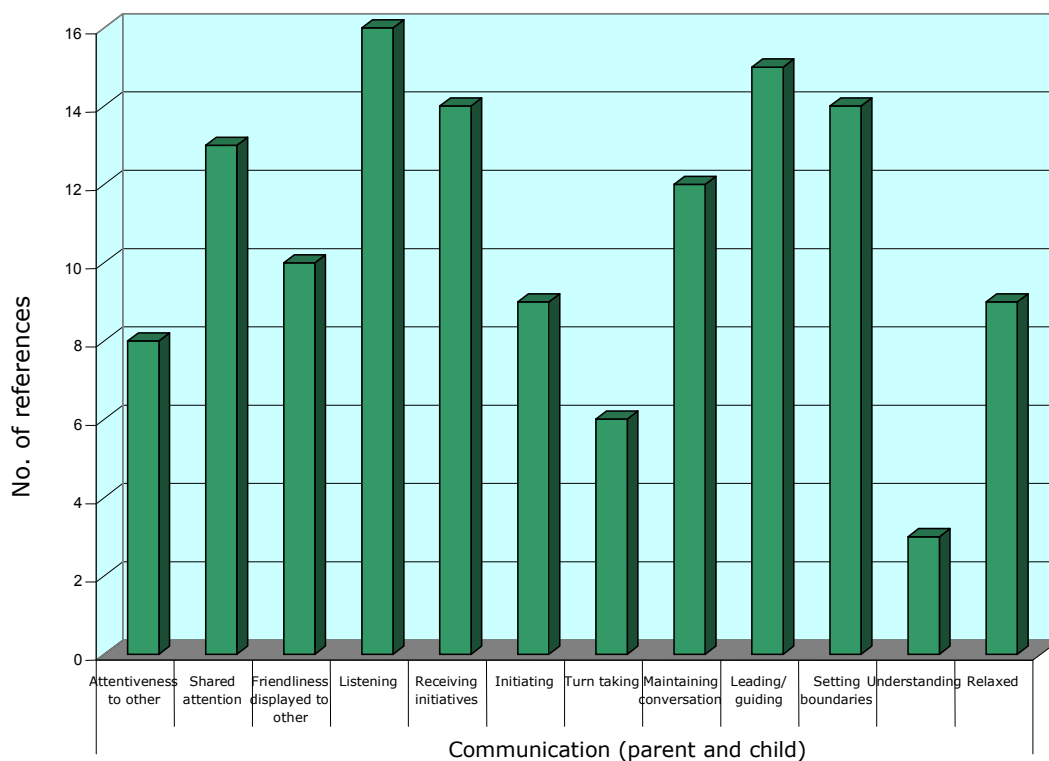
Relationships between parents and children developed. At the end of the intervention, one parent commented that she was more attuned to his emotional needs and would use her mood to regulate his. Their respect for each other was as obvious as her appreciation of the program;

"…seeing where we were and where we are today is amazing in a relatively short space of time really. How all this has come together and is helping him so much, and me, I have had to

change my whole way of parenting. Like with the eye contact and waiting for him to answer me and trying to get conversations going again." (P1, meeting 6)

The NG teacher and another parent also showed their appreciation of VIG and valued the solution focussed underpinning of the approach;

"It helps you to pick things out that you sort of realise you are doing." (P2, post SSI)

"It is really powerful to work from the positives. It has built that confidence and belief in their ability as a parent. In the case of P1 and P2, they felt very judged by the way their child behaves… In terms of confidence and their perception of themselves as parents it has done them the world of good. It has been brilliant. It is something that I wish we could continue." (NG1, post SSI)

3.2 How can consistency in nurturing principles at school be effectively developed (RQ2)?

Significant factors that emerged in the data were related to the super-ordinate themes of Sharing Practice, Communication, Relationships, NG Practice and Outcomes (see Appendices 9, pg 152 and 11, pg 157 and the conceptual map in Figure 7, pg 40). These themes are presented in the subsequent sections.

3.2.1 The Impact of Communication and Sharing Practice on Outcomes

It was clear that NG staff valued the communication between them and school (see Figure 4, pg 34, 'sharing practices (NG and school)'). However, more structured methods were employed to facilitate this:

- The NG TAs spent an afternoon a week in a pupil's mainstream school

- School teachers and TAs were invited into the NG to observe practice

- A key worker at the mainstream school was assigned as a point of   contact

- Gradual, planned transitions were shared with class teachers

- The NG teacher attended Team Around the Child (TAC) meetings

- The Blue Book shared information.

Figure 7: Conceptual Map showing linked themes when developing consistency in nurturing principles between school and the NG

Key NG practices aimed to share practice

Sharing Practice

NG Practices

A more structured approach was employed when communicating and sharing practice.

Improved consistency

Positive Outcomes

Communication

Relationships

Some staff adopted a more 'expert' role, another employed a more reciprocal 'consumer' approach.
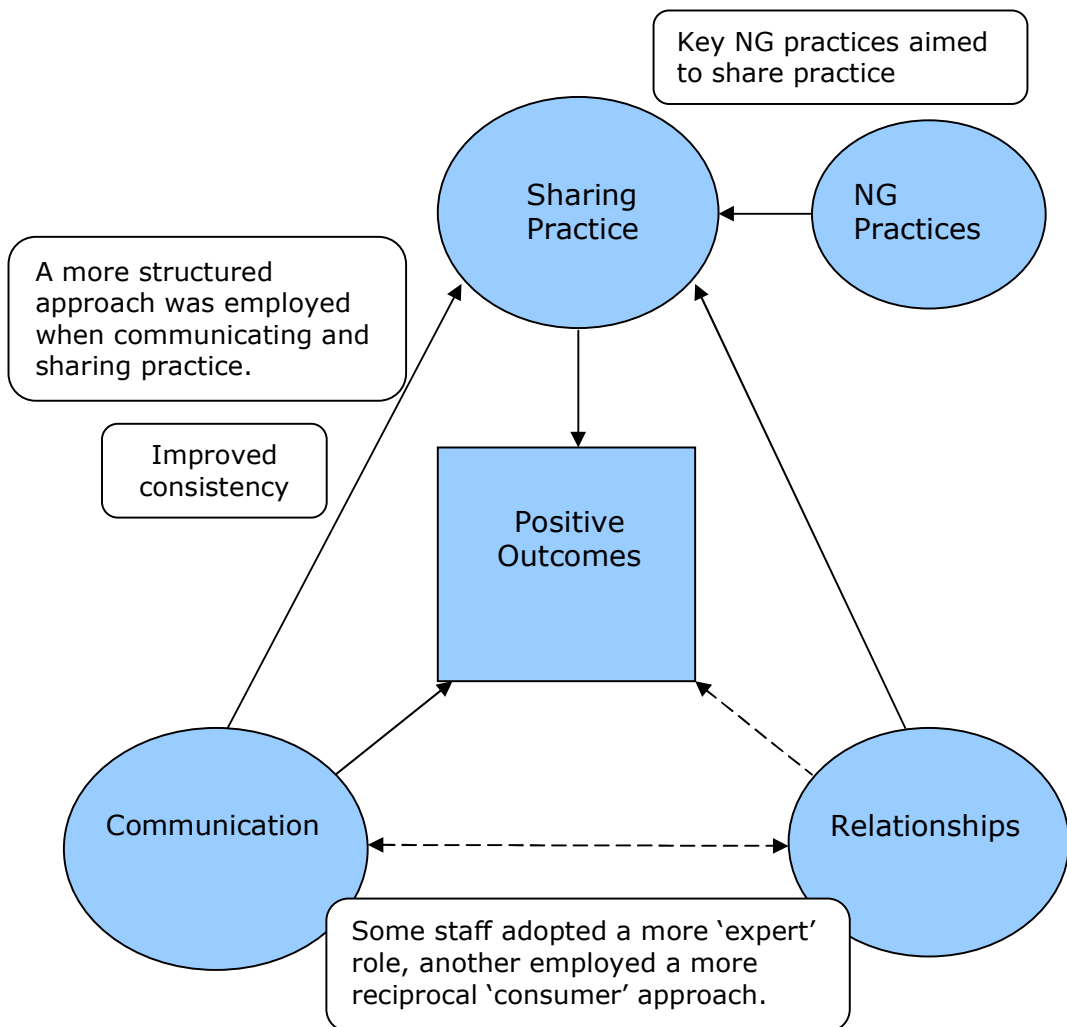
The NG was praised for its systems to facilitate communication with children's mainstream schools. Class Teachers coming into the NG

and the TA's outreach work were noted as being very helpful in establishing consistency. A parent commented how she was pleased with the outreach work as this ensured some consistency. As a result, she felt that problems at school had reduced which subsequently decreased her child's frustrations and made the atmosphere at home calmer.

Staff recognised how sharing the Thrive assessments (assessment tool which aims to measure children's social and emotional development and suggests support strategies) with class teachers helped to ensure that they understood children's needs. They were aware that schools sometimes viewed the NG as a 'behaviour unit' and felt this needed to be clarified to ensure consistency between settings.

The school teacher involved described how beneficial it had been to visit the NG. As a result, the school were able to incorporate the same reward and time out systems which she felt improved his behaviour. The same sentiments were not shared by the pupil. Although his behaviour had improved, he was frustrated that he was not able to follow his own agenda;

> "It has actually got worse. The teacher (at school) uses the token thing now. Usually I am naughty to get out of the class and now that I have tokens she just takes the tokens away and I stay in class." (C3, post SSI)

In situations where TAC meetings were ongoing, it was important to include all staff involved with the child. The class teacher expressed that she felt disempowered that the head attended the TAC meetings without her. In addition, she felt that this contributed to parents holding a more negative view of her as their perception might have been that she was not engaged in the joint approach.

The NG teacher could see the benefits of outreach work at schools and aspired to increase this model of working. The TAs used different

models of working for their outreach work; some openly shared their knowledge and appreciated it when this was incorporated into the school's approach;

> "They come here as well so they see what we do and we go out. They ask us questions and we pass on our knowledge. It seems to help them great. … C9's teacher has really taken it on board. I wish all classrooms could be like this. It's like us; we have stolen lots of ideas from other NGs. That's what you do." (NG3, post SSI)

3.2.2 Sharing Practice through Relationships

Another TA prioritised building a relationship with the class teacher and assumed that school staff would learn implicitly from her approach;

> "I just let them watch me. I never inflict it on them. We need to respect them. I like to build a relationship with them first and see what kind of a teacher they are." (NG2, post SSI)

Once this reciprocal relationship had been established the class teacher was ready to learn and felt more confident that schools would be open to ideas and incorporate them into their practice;

> "I listen and try and change that way rather than tell them. That is the key for me… Sometimes they ask my advice … she (class teacher) sees how I communicate with C4 and I might explain that maybe she is upset about something and that is why she is behaving in such a way. I have learnt things off them as well." (NG2, post SSI)

3.2.3 Sharing Practices as an Inherent Feature of NG Practices

NG staff were pleased with the transition process back to mainstream school. To facilitate pupil's understanding of the process they hold 'graduations'. In addition, they share information with key staff at the school which includes a brief history, their progress and successful strategies. The transition process is usually gradual with

some mornings spent at the NG and some at the school. However, this was adapted to the needs of individual children. The NG staff continued their outreach work during the transition phase and pupils were occasionally invited back for follow up work.

3.3 What is the best practice for developing and maintaining effective partnerships with parents (RQ3)?

Relationship, Communication and Sharing Practices themes emerged when addressing this question (see Appendices 9, pg 152 and 11, pg 157 and conceptual map in Figure 8, pg 43). These are discussed further below.

Figure 8: Conceptual Map showing linked themes when developing and maintaining partnerships with parents
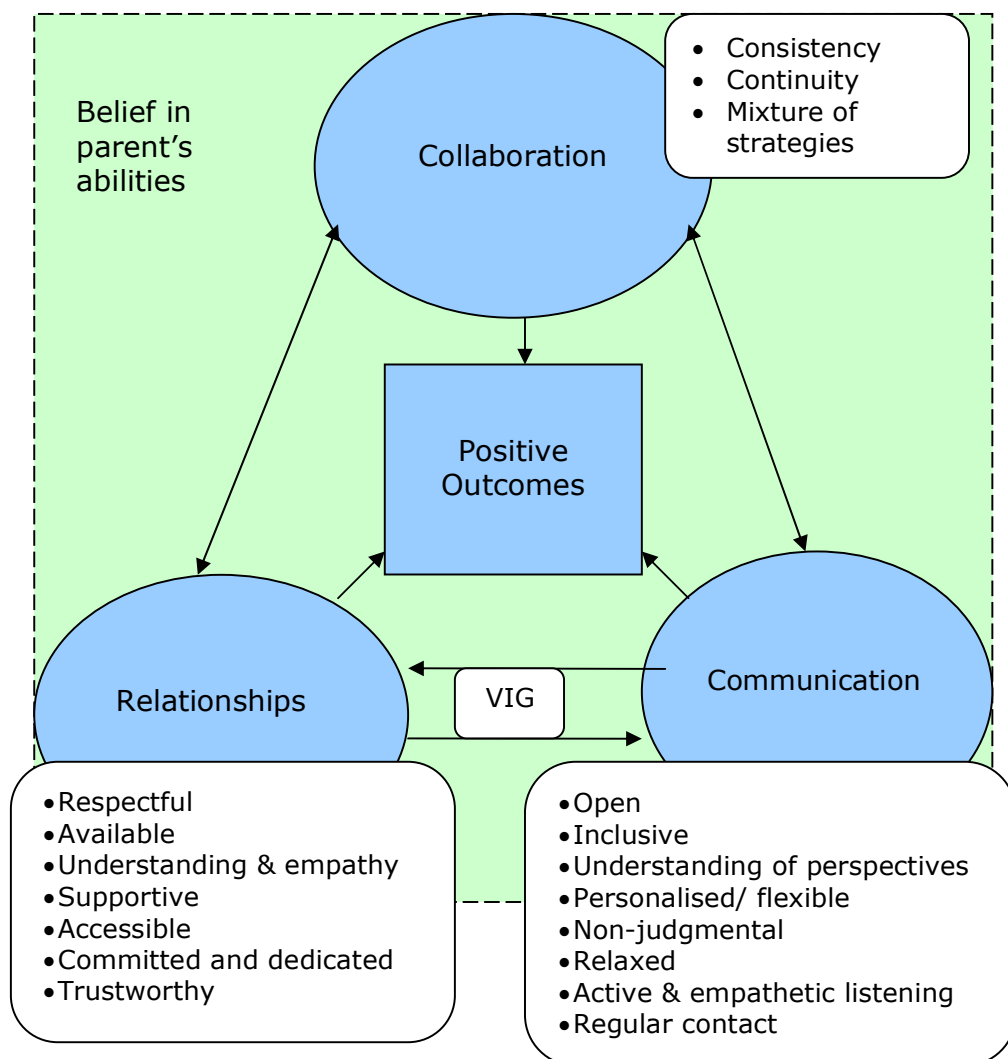
3.3.1 Building Relationships

On reflection, it was apparent how I displayed perseverance and commitment throughout the interventions. A recurring theme in my reflective diary was the difficulty in arranging meetings with parents and inevitable frustrations caused by forgotten or postponed sessions. I pro-actively maintained regular contact with parents through telephone conversations, text messages and meetings.

Similarly, the commitment and dedication of NG staff also emerged as a theme through the SSIs (see references to dedication in Figure 9, pg 44). They were dedicated to their work and the well being of the children. For example, the SSIs revealed that staff would phone parents later in the day to reassure them when there had been difficulties dropping off children in the morning.

Figure 9: Chart showing no. of references from emergent relationship themes from SSIs
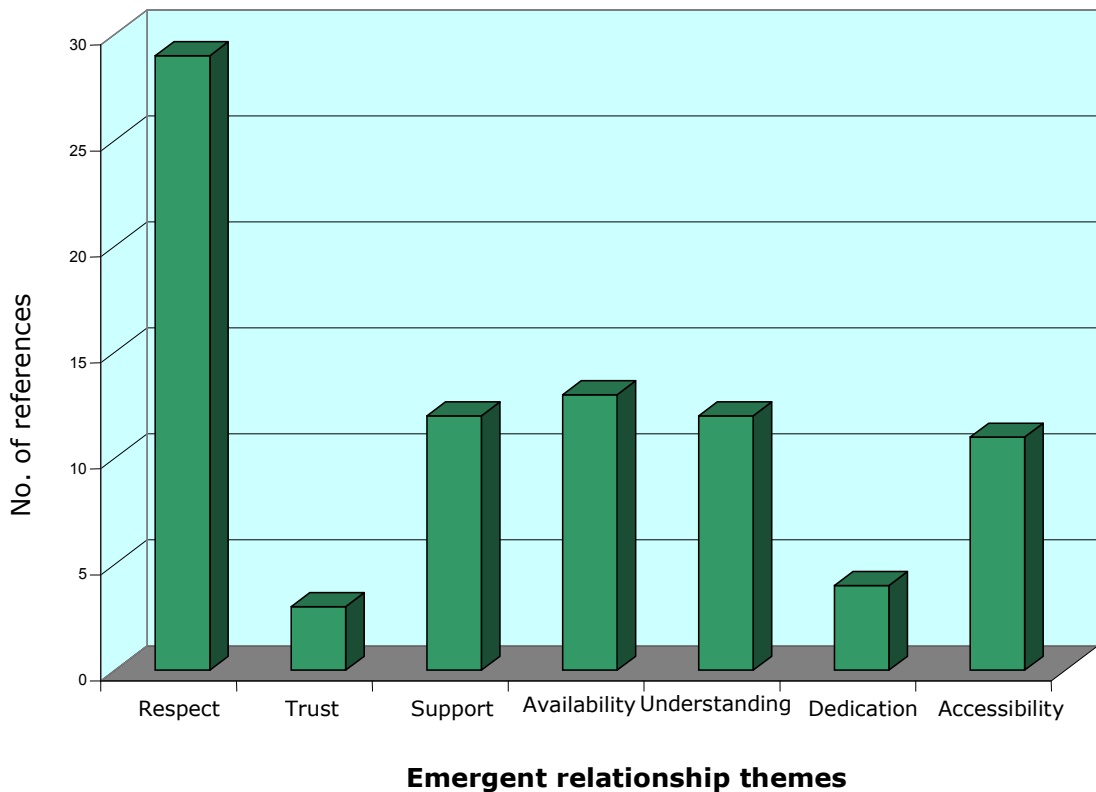
The NG teacher identified how the role had expanded and that families were relying on the NG for support. Despite issues around her workload, she felt that they were the best placed organisation to do the work. In the SSIs, parents commented on how supportive the NG staff had been, particularly in comparison to other agencies.

Parents also expressed how they were fully aware that the NG teacher would always set aside time to speak to them. There was agreement that NG staff were accessible and reliable. This is supported with references to 'availability' and 'accessibility' in Figure 9, pg 44.

3.3.2 Understanding and Support Fostering Relationships

It was clear that all parents appreciated being understood (see Figure 9, pg 44). This commitment to parental well being was reflected by parents who all spoke highly of the staff and valued their support;

> "They are brilliant, such good support. They are the only support in a big ocean! … NG1 and NG2 are amazing, they are the most professional people and they empathise so well." (P4, post SSI)

> "They are friendly, they are compassionate. If I am upset, they know!" (P1, post SSI)

One parent described how they listened and then included her son in a discussion openly to help resolve the situation;

> "They are really supportive, even to the parents. I mean, if I am upset in the morning, they take time out to listen and to talk about it and then get the children involved… It's all dealt with and no-one gets hurt like in other schools." (P2, post SSI)

NG staff did not adopt a specific strategy or technique when working with parents to develop their relationships. Key factors were their understanding and empathy they offered.

This was reflected in my own approach to working with the families. The narrative in my reflective diary addresses how it was important to prioritise parents' emotional well being and my relationship with them so that they could develop trust in me;

> I decided that the best course of action would be for her to 'offload' her concerns and for me to be supportive and to empathise with her …I have learnt that it is important to not prioritise my own agenda, but to run with their needs at that time. (Reflective Diary, 06.10.09)

> I suggested that we just have a discussion, instead of VIG. She sounded very relieved to hear this as perhaps this is what she needs at this moment in time. (Reflective Diary, 11.11.09)

> The crux of this conversation was about recognising how difficult the situation was for her and providing her with some emotional support. (Reflective Diary, 01.12.09)

3.3.3 Respect Leading to Collaboration

A profound finding was the amount of references to the 'respect' theme (see Figure 9, pg 44). This was demonstrated in numerous ways. Staff were aware of the importance of parental involvement, trusted parents and appreciated their circumstances.

In order to make sustainable changes, the NG teacher valued parental involvement;

> "It's the relationships that we have developed with the child and then the parents. Ultimately everything we do hinges on that and if we don't get that relationship right, then we are not able to change anything." (NG1, post SSI)

With this recognition, there seemed to be a pro-active drive towards engaging with families. This was reflected by parents. It was apparent how parents viewed themselves as working on the same team with the NG;

"He understands that we want to help him… We (NG teacher and P1) are on the same wave length." (P1, post SSI)

Interestingly, there seemed to be a positive shift following the intervention in staff's views and approaches when working with families, suggesting that the development of their non-judgmental, relaxed and empathetic relationship with parents might have encouraged parents to engage;

"We need to do it around their needs too. I think that sometimes the parents can have more of the NG needs than the children. They need to be nurtured more because they can't give what they didn't receive… It's a generation of children bringing up children. It was them that was let down in the first place, not them letting their children down." (NG2, post SSI)

"It's quite informal; it's just like speaking to friends. That takes a lot of stress away, it's relaxed." (NG3, post SSI)

"You've got to throw out all of your personal judgement out the window; everyone has a bit there, and be 100% open and diplomatic. I find that I am. I have a good relationship with all of them. The key is to listen because it is not what you see." (NG2, post SSI)

This respect was apparent to parents;

"They don't patronise me- people can patronise you when you have a difficult child." (P1, pre SSI)

NG staff valued engaging with parents to help build their confidence and strongly believed in parent's abilities;

"Parents are empowered that they have the belief that there is something that they can do and that they aren't bad parents, they maybe have not been doing it the right way but there are lots of things that they are doing right..." (NG1, post SSI)

To summarise, this chapter has identified how participants were committed to achieving positive outcomes. Communication, sharing of practice and the building of relationships were all pertinent themes that contributed to the attainment of these objectives. These are discussed further in the next chapter.

Chapter 4

Discussion

This chapter explores, discusses and further defines Paper 1's findings. It is organised by research questions for clarity. Recommendations for practice and reflections on the research process for this paper are amalgamated with Paper 2 in the concluding section in Chapter 9, pg 102. It is important to identify that the discussed results are relevant to the specific context of this study.

4.1 How can consistency in nurturing principles between home and the NG be effectively developed (RQ1)?

In this setting, the analysis of SSIs and consultation meetings showed that effective communication, development of strong relationships and the pro-active sharing of practice were intricately linked. This promoted positive outcomes and consistency between the NG and home. I am going to explore these further and relate these findings to existing research evidence.

The SSIs revealed that involving the parents who participated in this study was not a challenge for this NG. This contrasts with some of the findings by Cooper and Tiknaz (2005) and Cooper (2004b). However, it is important to consider that the parents who participated in this study volunteered, perhaps making parental partnerships less challenging as parents demonstrated their commitment to this model of working through volunteering.

From the SSIs and consultation meetings, it was clear that various forms of formal and informal communication systems were adopted to enable NG staff to share practices. This conforms to one of Pinkus' (2005) ideals of partnership working. She identified that clear mechanisms had to be established to enable transparency between partners. As expected, the results revealed that this communication facilitated positive outcomes such as the incorporation of similar

practices at home, in addition to increasing a parent's capacity to understand their child.

Within the communication theme, it was apparent that parents received advice from NG staff rather than shared their own knowledge. This finding corresponds with Bishop and Swain's (2000b) observations on how parents tend to be trained through NG staff's expert advice and modelling instead of parents and staff planning together collaboratively. To a degree, it also corresponds with Cunningham and Davis' (1985) 'transplant model' of partnership working, whereby skills and expertise are passed onto parents. Despite this, parents in this study were grateful for the advice and this conformed to their expectations of informed NG staff supporting them.

Parents were positive about being able to seek support when they felt it was necessary, suggesting that they possessed some control in the partnership. Subsequently, elements of a more collaborative and reciprocal 'consumer' model (Cunningham and Davis, 1985) were also adopted. Through SSIs with NG staff, there was also evidence of staff working towards Dale's (1996) ideal of acknowledging parental differences in culture, relationships, values and family resources.

A further finding was that the transparent communication systems between parents and the NG helped to 'scaffold' (Bruner, 1996) parents' understanding of NG practices. This enabled them to apply these approaches outside of the NG. For example, NG staff recorded information about one child who was learning to manage his emotions and behaviour by using the NG's 'Blue Room'. Due to this communication, the parent was able to use a similar method at home by suggesting that he should reflect on the notion of going to his own, metaphorical 'Blue Room'. From this example, it is evident that the communication implicitly impacted upon shared practices.

Evidence from the SSIs revealed that parents valued structured events (such as the coffee afternoon) to share their experiences and

knowledge with other parents. This provided some social support for parents and helped them to realise that they were not isolated in their situations. Parents new to NG provision or parents who may have previously had a negative experience of school, may particularly benefit from these events. If conducted with the same friendly and non-judgmental style, they convey a message that NGs are a relaxed and accessible provision where parents and their opinions are valued. This may then serve as a springboard for further communication, relationships and subsequent partnership working.

On reflection of my own practice, I found it important to have a flexible approach to my work. For example, meetings would be arranged via text messages, phone calls, in meetings or through the NG, depending on parental preferences. It was clear that parents appreciated support in various formats (e.g. face to face or telephonic) and resources being personalised to their families needs.

VIG was used as a tool to aid consistency of approaches between the home and NG. Discussion around the process and outcome of the intervention is discussed collectively with the findings of the other research question for Paper 1 and Paper 2 in section 9.2, pg 103.

4.2 How can we effectively develop consistency in nurturing principles between school and the NG (RQ2)?

In this study, significant emergent themes related to sharing practice, communication, relationships and NG practice. The conceptual map in Figure 7 (pg 40) demonstrated how these themes were interlinked and all contributed to consistent approaches which were perceived to improve outcomes. These themes are explored further with reference to previous research.

In the context studied, communication between the school and NG tended to occur in a more formal and structured manner when compared to the NG and home. School staff, NG staff and parents valued this communication and it was recognised as being a factor

that contributed towards positive outcomes for children. For example, one parent commented on how the NG outreach work had improved practices at the mainstream school. As a result, the school teacher changed his management style which improved her child's behaviour. This decreased the pupil's involvement in undesirable incidents. As his school life became more settled, she explained that he had become less frustrated and that his behaviour at home had improved.

NG staff were eager to share their views of NG philosophy to school staff and were disappointed when schools did not understand, or seem interested in the NG approach. They believed this understanding was essential as NG approaches were built on these psychological foundations. They therefore viewed this as a barrier to collaborative working which led to negative implications for the pupils involved. This is supported by Sanders (2007), who concludes how it was important for all staff to be briefed about NG principles to ensure positive outcomes for children. NG staff highlighted how sharing Thrive assessments helped teachers to empathise with children.

Although this study did not aim to collect a representative sample of school teachers' views, the school teacher involved expressed frustrations about not being involved in joint work in the form of TAC meetings. This corresponds with Gerrard (2006) and Binnie and Allen (2008) who highlight how liaison between the school and NG can be challenging. Ensuring that all relevant professionals are involved and that information is shared is a key focus of Every Child Matters (DfES, 2004). The involvement of school staff is therefore a fundamental element of collaborative working.

Once again, there was evidence of a 'transplant model' (Cunningham and Davis, 1985) of partnership working being adopted between NG staff and school staff. NG staff were perceived as the 'experts' by school staff, whereby specialist knowledge was shared. However, this view was not held by all the NG staff; One NG TA expressed how she

preferred to learn about the school context and school teachers experience before passing on information specifically adapted to the situation. This demonstrates a more reciprocal approach.

An important point to note is that pupils did not always value collaboration between school staff and the NG, particularly when relationships between school teachers and the pupil were strained. Reasons for collaboration therefore need to be made very explicit to pupils at the start of NG provision.

4.3 What is the best practice for developing and maintaining effective partnerships with parents (RQ3)?

Crucially, themes around the importance of the development of relationships, the significance of communication and collaboration emerged. These factors seemed to be related to, and impacted on each other. Findings for this research question are compared to existing research evidence and explored further.

Post-intervention, NG staff appeared to place greater emphasis on the importance of their relationship with parents. There was a strong belief that engagement with parents facilitated children's progress at the NG. As a result, parents felt valued and did not feel their involvement was tokenistic.

It was evident that professionals had to demonstrate commitment and dedication to their work and to their relationship with parents, through their engagement and participation. The majority of parents explained how they had been disappointed with other agencies that had not understood their situation and showed minimal engagement. What became apparent was that the families I was working with often faced multiple and complex challenges which I had previously not encountered in my casework. Despite these challenges, it was important to demonstrate professional perseverance and commitment, particularly with families who had previously been disappointed with the service they had received. Once these families

realised this dedication, it was clear how they then felt safe to invest their time, energy and faith in the relationship and the subsequent interventions.

The commitment of staff was also displayed through their compassionate understanding. I observed NG staff communicating to parents with genuine empathy. NG staff applied their knowledge of attachment theory (Bowlby, 1969; 1973; 1980) and the fundamental NG principles (Bennathan and Boxall, 2000) to their communication with parents. For example, they were adept at finding gaps in parents' early life experiences and understood the importance of nurture in the development of parents' self esteem. This was reflected by parents, who described how NG staff understood their situation, how they were emotionally attuned and insightful in the tailored support. I can identify parallels with the approach of Rogers (1967) who endeavoured to display genuineness and empathy towards his clients while going to great lengths to understand and accept them. This finding contrasts concerns expressed by Cooper (2004b) who highlights that parental responses are a key issue for NGs as parents can feel judged or criticised.

Another important factor to discuss is the availability and accessibility of NG staff. The ratio of staff to children improved their availability and parents were clear on how to make contact with the staff. Similarly, I was able to invest a day a week to support parents which also made my support accessible. In the literature review, Pinkus (2005) revealed important aspects of partnerships working. With reference to these findings, it was evident that parents were clear about the consensus of partnership working, about who was involved and why this involvement was important. This appeared to facilitate engagement with parents.

I also realised how it was important to follow parents at their pace and to work within their 'Zone of Proximal Development' (Vygotsky, 1978). Even though I was eager to pursue VIG with parents as I felt

that it conformed to the principles of a consumer model of working, I learnt that I had to re-evaluate my support to conform to parents' readiness. Without this re-evaluation, it became apparent how I would be working against the principles of collaborative partnership working. This parallels with the views of Lambert (1992) who suggests that sensitivity and responsiveness are responsible for developing a relationship and any potential change, rather than a specific programme. Furthermore, Hovarth and Greenberg (1994) imply that a good alliance is a good predictor for good outcomes. This development of my communication parallels with Egan (2002), who identifies how competencies in communication are critical for helping.

The discussion has revealed successful areas of working in addition to areas that could be developed. These have implications for policy, practice and for my own personal work as an EP. Implications for this NG, in addition to other contexts are explored further in section 9.4 pg 109.

4.4 Assessing the validity of the study

When qualitative studies of this nature attempt to contribute to theory and practice, it is essential to analyse how the interpretations made correspond to the participants' construction of reality that is being studied. Yardley (2000) identifies four main principles when assessing the validity of qualitative research; sensitivity to context; commitment and rigour; transparency and coherence; and impact and importance. These are discussed in relation to this study.

As discussed in section 4.3 (pg 53) a commitment to partnership working with parents was emphasised. A similar commitment was employed when working with staff and children to ensure that all participants felt comfortable with the research process to aid the generation of valid data. This humanistic approach of attending to participants views, empathising, waiting and receiving their views

parallel with the contact principles (Trevarthen, 1979; 2001) I employed through the VIG intervention.

Further sensitivity to context was demonstrated by clarifying participants' views through open dialogue in the SSIs and consultation meetings. This 'checking out' of information minimised subjectivity of both parties' interpretations during data collection and analysis. In chapter 3 (pg 32), verbatim responses ensure that participants views are represented transparently. In addition, this allows the reader to verify interpretations and compare these with the research claims.

Transparency is aided further by detailing the method and design process in this paper. The appendices (pg 124-191) also allow the reader to 'trace' how interpretations have been made.

SECTION 3: Paper 2

From Nurture Group to Nurturing Community: Evaluating Outcomes when Nurturing Principles are Consistent between Nurture Group, Home and School.

Paper 2: Contents

Abstract

Evidence suggests that Nurture Groups (NGs) are effective in helping children with social, emotional and behavioural difficulties. The importance of parental involvement is recognised within NGs and research reveals positive social and emotional outcomes for children when NGs collaborate with parents as respected partners. An implicit power imbalance between NG staff and parents can challenge parental collaboration.

This aim of this paper is to evaluate outcomes when nurturing principles are consistent between a NG, schools and home.

A mixed methodology design with interpretative and scientific approaches was employed in an area NG in the south west of England. An action-research model enabled consultation meetings and Video Interactive Guidance (VIG) to be introduced as an intervention to develop consistent practices for the experimental group. Quantitative outcomes from Boxall Profiles and Strengths and Difficulties Questionnaires (SDQs) are compared pre- and post-intervention for an experimental group (4 children and 4 parents) and a control group (4 children). Three NG staff also volunteered as participants. Qualitative measures (observation records, semi-structured interviews (SSIs), consultation meetings and VIG clips) measured outcomes for the experimental group. Data from the Boxall Profiles, SDQs, VIG clips and observations was analysed descriptively. Interpretative Phenomenological Analysis was used to analyse emergent themes from the SSIs and consultation meetings.

The results revealed the experimental group made greater gains post-intervention as measured by the SDQ and the control group made greater gains post-intervention as measured by the Boxall Profile. The majority of results for individual experimental group children revealed positive social and emotional outcomes post-intervention.

It is difficult to draw conclusions when outcomes between the experimental and control group were compared. The majority of measures identified positive social, emotional and behavioural outcomes for experimental group children when parents and schools work collaboratively with NGs.   VIG and sharing of practices helped to modify how parents and teachers understood, managed, communicated and related to children.

Recommendations for practice discuss the development of personalised, informal and formal communication systems between settings while ensuring minimal anxiety for children. VIG can be used effectively within NGs to develop consistent nurturing practices between settings. Consideration is given to how VIG can be applied more broadly and how local authorities can support this process.

Chapter 5

Introduction and Literature Review

5.1 Introduction

This is the second of two papers which together explore the processes and evaluate the outcomes when nurturing principles are consistent between settings. This paper measures social and emotional outcomes for children when partnership working and nurturing principles are consistent between settings.

Section 1 (pg 11) outlined the importance of educational inclusion and suggested that the inclusion of children with SEBD can challenge the inclusion agenda. To meet the complex needs of these children, NGs were introduced as an educational provision. Parental involvement was considered as an essential component; however, concerns about the process were raised. Few studies have implemented practices that encourage parental involvement in a NG context and measured the subsequent outcomes for children. To develop a clearer understanding of the topic and to define the research focus, a literature review was completed and is presented below.

This section intends to provide an overview of the literature rather than an in-depth exploration (please refer to Section 5, pg 193 for the full literature review).

5.2 Literature review

The following literature has been sourced through EBSCO and Pschinfo searches, Google scholar online searches, and personal books. Different search terms were employed to ensure that research was viewed from a variety of perspectives. For example, the terms 'nurture group effectiveness', 'success of nurture groups' and 'difficulties with nurture groups' were used to evaluate NG success. To explore literature around partnership working with parents and NG effectiveness, terms such as 'parent partnerships in nurture groups'

were employed. When reading this literature, further relevant research was found directly on the same search engines detailed above.

This section continues by briefly outlining the outcomes of NGs. It then explores features that contribute to NG effectiveness. The factor of parental involvement is discussed in more depth before stating the research questions.

A large retrospective study carried out by Iszatt and Wasilewska (1997) identified significant positive outcomes for young people 11 years after NG provision. From 308 young people placed in six NGs since the 1980s, 87 percent were able to return to mainstream classrooms. This group was revisited 7 to 11 years later and revealed that 83 percent of the original cohort was still in mainstream schools, while only 4 percent required additional resources and expertise outside of the schools resources. Thirteen percent of the NG pupils required statements, of which 11 percent required placement in special schools. This was compared with a small control group of 20 children; Thirty five percent of these pupils were placed in special schools and only 55 percent managed to cope in mainstream schools without additional support.

A more recent, albeit small-scale study by Sanders (2007), incorporated a matched control group into the design and supported the above positive findings. As measured by the Boxall profile, children in the intervention group made statistically significant greater gains in comparison to the control group. This is supported by a subsequent small-scale study by Binnie and Allen (2008). They revealed that mean scores for all children improved on three measures including the Boxall profile and Strengths and Difficulties Questionnaire (SDQ). However, due to the size of the study and the lack of a control group, the results need to be interpreted with caution.

Cooper and Whitebread's (2007) robust, longitudinal and large-scale study recorded the progress of 546 pupils from 11 Local Authorities. Although there were differences, the difference in SDQ improvement rates between NG pupils and pupils with SEBD in a mainstream class was marginally non-statistically significant. However, as with the studies outlined above, repeated measures analysis of Boxall scores showed a statistically significant improvement for pupils after NG provision.

Cooper, Arnold and Boyd's (2001) large-scale study found a statistically significant difference in SDQ scores after a term when compared with 2 control groups. Boxall Profile scores also improved significantly. However, control group pupils also made improvements to a lesser degree. Therefore it is important to question whether the measured improvements were due to natural improvements made over time.

The following year, O'Connor and Colwell (2002) aimed to answer this question. Boxall scores were obtained for 68 pupils before NG provision, at the end of provision and 2 years after. In the short term, NGs were found to be effective (although there was relapse within 4 of the 20 sub strands of the Boxall Profile). In the long term, benefits were less clear as there was no significant improvement in 10 of the 20 sub strands. Although different measures were employed, the Boxall findings contrast with the positive long term findings by Iszatt and Wasilewska (1997) where 83 percent of pupils were able to reintegrate back into mainstream schools.

The literature review demonstrates that a significant number of children do make social and emotional gains following a placement within NGs. However, as highlighted, not all children make the same improvements. For example, Gerrard (2006) found that one of the thirteen schools he examined did not make statistically significant improvements on the Boxall Profile. Furthermore, four out of fifteen schools measured no significant difference on SDQ scores.

The research evidence is therefore not definitive; not all children appear to flourish with NG provision. Differences in the robustness of research designs and the validity of assessment tools may contribute to these inconsistencies, however, it is also important to question why some NGs are particularly successful. This is explored in the subsequent text.

A comprehensive analysis by Cooper and Whitebread (2007) identified variability in NG success. These factors were classified into school, structural, child-related and organisational factors (summarised in Table 1, pg 65). Variability in these factors may therefore partly explain why some children make more progress.

Table 1: Factors affecting the effectiveness of Nurture Groups

School Related Factors	Structural Issues	Child Related Factors	Organisational Factors
Replacement of staff during running of group (head, NG staff)	Age distribution of pupils within NG	NG pupils level of English fluency	Length of time NG had existed (+2yrs= greater improvement)
Quality of whole school teaching	Balance of male and female pupils	Pupils' National Curriculum attainment levels	Proportion of school week pupils spend with NG
	Balance of SEBD types represented in group		

Cooper and Tiknaz (2005) employed a case study approach and identified interactional factors, such as the balance of SEBD types in NGs, peer relations in NGs, communication between staff, individual staff skills and the quality of interactions among NG staff and between pupils, contribute to NG success.

The review has examined small-scale and large-scale studies which show potential social and emotional gains following NG provision (Binnie and Allen, 2008; Cooper, Arnold and Boyd, 2001; Cooper and Whitebread, 2007; Iszatt and Wasilewska, 1997; O'Connor and

Colwell, 2002; Sanders, 2007). However, a smaller body of conflicting evidence has identified that not all children make the same progress (Cooper and Tiknaz, 2005; Gerrard, 2006; Sanders, 2007). The subsequent research plans to provide some explanations for these differences.

A literature review by Desforges and Abouchaar (2003) concluded that parenting programmes had a positive long term impact on the well being of parents and on the behaviour of children. However, it did not outline the most effective methods of working with parents and the respective outcomes.

I am unaware of research that has investigated the outcomes of establishing consistent nurturing principles between settings when using VIG with NG parents and mainstream school teachers. Research that explores effective communication styles is particularly important when supporting the complex needs of children with their communications and relationships. This deficiency in the evidence base has contributed to the rationale for the research questions.

5.3 Research Questions

1) What differences does partnership working have on social and emotional outcomes for the experimental group in comparison to the control group (all Key Stage 2 at the NG) (RQ1)?

2) What implications does partnership working have on social and emotional outcomes for individual children in a Key Stage 2 Nurture Group (RQ2)?

Chapter 6

Design and Method

This chapter explains how the research was completed. The methodology is described before identifying sampling procedures. It then presents the data collection methods, the intervention, ethical considerations and the analysis procedure.

6.1 Methodology

The following factors were considered when designing the methodology for this paper. As the research was grounded in Educational Psychology Practice, the methodology had to agree to the studying of schools, a NG, parents and children. The methodology also had to allow me to adopt a 'psychologist in action' role and had to enable pro-active engagement of participants with the research process. In addition, the design had to allow for the intervention to be evaluated in detail so that the views and experiences of those involved were captured.

Paper 2 employed a mixed methodology design combining quantitative and qualitative data sources. In order to explore outcomes holistically, data from the semi-structured interviews and joint consultation meetings from Paper 1 was incorporated. This allowed inconsistencies to be explored through data triangulation.

This study has a scientific research paradigm (Robson, 2002) as it compared outcomes between an experimental and control group. As the research also sought to reveal individual perspectives on the intervention's effectiveness, it had an interpretative research paradigm (Ernest, 1994; Smith, Flowers and Larkin, 2009). This allowed the distinctiveness of participants' contexts and circumstances to be explored.

6.2 Participants and Sampling

The research was based in a Key Stage Two area NG within a large rural town in the south west of England with an approximate population of 15,000. The NG is based on a primary school site and caters for children from surrounding primary schools. The number of children attending the NG throughout the duration of my research was approximately nine. The children attended the NG in the morning and returned to their mainstream schools in the afternoon.

Different factors limited the choice of a research base. The NG was selected because it strived to conform to the classic Boxall model (Bennathan and Boxall, 2000; Boxall, 2002) of NGs. It had also been established for over two years which is a factor that has been revealed (Cooper and Whitebread, 2007) to influence NG success. As there were only three area NGs maintained by the local authorities Education out of School Service, additional pragmatic factors impacted on the choice. In addition, because the research was completed as part of the Educational Psychology Service (EPS) development plan, it was conducted within the EPS locality.

The NG teacher met with parents, introduced the research and provided information on the study (see Appendix 1, pg 124-126). I subsequently met with four mothers who expressed their interest in participating with their children (3 boys and 1 girl with a mean age of 8 years and 8 months). These 4 parents and children were recruited to the experimental group. Four other children (3 boys and 1 girl with a mean age of 8 years and 6 months) who were attending the group at the same time were subsequently assigned to the control group. Three staff members from the NG also volunteered to participate.

6.3 Data Collection

The next section describes which tools were employed to collect data and how this was achieved.

6.3.1 Boxall Profile

The NG teacher completed the Boxall Profile (Bennathan and Boxall, 1998) for children in the control and experimental group before, and immediately after the intervention. It is a normative diagnostic instrument (Bennathan & Boxall, 2000) designed to measure a child's level of emotional, social and behavioural functioning, as well as behaviour associated with educational engagement.

Information on standardisation and the development of the profile is detailed in the handbook (Bennathan and Boxall, 1998). See Appendix 12, pg 158 for further information on the profile.

6.3.2 Strengths and Difficulties Questionnaire (SDQ)

The SDQ (Goodman, 1999) was employed to measure levels of social, emotional and behavioural development for children in the control and experimental group. The teacher version was completed before the intervention and directly after the intervention. Standardisation data is provided by Goodman and Scott (1999). See Appendix 13, pg 159 for further information on the questionnaire.

6.3.3 Observations in NG setting

To assess social and emotional development for the children in the experimental group, systematic observations were conducted in the NG at the beginning of the research and repeated on a monthly basis. Observations were chosen as an additional instrument as I felt that children were more likely to display their behaviour, rather than discuss it. An observer-as-participant role (Robson, 2002) was adopted for the observations.

The thirty minute observation used event recording, engagement to task time sampling and allowed for general observations to be recorded in detail. To maximise validity, the observations were completed at the same time of day and on the same day of the week. In order to optimise inter-rater reliability, a second observer observed two observation sessions for each child alongside me. The

observation schedule was piloted prior to its use and necessary adaptations were made. See Appendix 14, pg 160-161 for a completed observation schedule alongside accompanying notes.

6.3.4 Video Interactive Guidance Clips

The length of the edited videos (see intervention in section 6.4, pg 71) provided another source of valuable information on the quality and quantity of positive interactions between children and parents/ class teacher.

6.3.5 Semi-Structured Interviews

Semi-structured interviews (SSIs) were selected as a tool because participants' interpretations of the social context are important (Radnor, 1994; Robson, 2002). They allowed behaviour, interactions and experiences to be explored through open ended questions which are often not easily reduced to measurement. Individual semi-structured interviews with NG staff, parents and children from the experimental group were completed before the intervention to explore existing practice. These interviews were adapted to suit the parents, children or staff but inquired about similar themes. The interviews sought to generate information around concerns, strengths, successful elements, areas for development and particular difficulties.

SSIs were repeated with the same participants at the end of the intervention to evaluate the overall effectiveness of the intervention, to identify which elements were particularly successful, which elements were less successful and to see whether their perspectives had changed. (See Appendix 2, pg 127-128 for an example of the children's interviews and Appendix 7, pg 137-144 for a completed parent interview).

6.3.6 Consultation Meetings

Consultation meetings were conducted between me and the parents in the experimental group and aimed to reflect on information

gathered from the observations, video recordings, diary notes and their experiences. Additional consultation meetings took place with the mainstream school class teacher for one of the participants.

Initial consultation meetings (Appendix 3, pg 129-130) aimed to find out relevant background information, clarify expected outcomes of the intervention, current successes for the participant and family, their current concerns and level of concern. An action plan with objectives was devised at the end of the meeting.

Subsequent consultation review meetings (see Appendix 4, pg 131-133) identified successful aspects of the intervention, additional successful aspects of home and school life, reviewed their concerns and devised a revised action plan. These consultation meetings occurred telephonically in some instances.

With parental consent, the consultation meetings were video recorded. Videoing these meetings was an essential requirement for my training as a VIG guider. Notes were then made to record progress and were distributed to the NG, parents and class teacher.

6.4 The Intervention

In the first consultation meetings with each parent, I explained how I could work with the parents to help support them with the aim of facilitating consistency in nurturing principles between settings.

It is important to note that my work varied depending on the participant's context. For example, through discussion with the NG teacher and one of the parent participants, it was agreed that the intervention would be most effective if it was conducted between the teacher and child instead of the parent and child. This was arranged because difficulties relating to his social and emotional well being were associated with the relationship he had with the class teacher, not with his parents.

Video Interactive Guidance (VIG, Kennedy and Sked, 2008) was used as a tool for aiding and enhancing positive communication and interaction between the parent/class teacher and child.

VIG was developed in the Netherlands in the early 1980's to support communication in families where children were in residential care. It has parallels with solution focused principles. It recognises how everyone has a desire to communicate, that this can be done in a number of ways and that everyone can develop their skills.

VIG involved cycles of filming, analysis and discussion of filmed interactions. A short 10 minute piece of film was taken of the participants (teacher or parents with child) in an interaction. This film was micro-analysed and edited before returning to meet with the parent or class teacher. In this consultation meeting, parents or the class teacher were helped to observe and analyse existing positive strategies, based on the contact principles of communication (Figure 10, pg 72) (Trevarthen, 1979; 2001).

Figure 10: The Contact Principles

Leading and guiding: choice giving, diverting, suggesting

Conflict management, restoring contact

Sharing and helping, discussion

Taking short turns in communication

Saying yes, responding to initiatives, receiving them by repeating

Using body and face, smiling, nodding, friendly posture

Attentiveness to other, eye contact, paying attention to language and feelings, looking towards, naming actions

Parents and the teacher were encouraged to extend their skills by moving up the hierarchy and by linking the contact principles of communication to emotional meanings. In addition, reflection time allowed them to consider how the more attuned responses could be applied to other less successful interactions.

I planned to complete 3-5 cycles of VIG with the participants combining the consultation review meetings with video feedback sessions. Figure 11 (pg 73) is an example of how the VIG intervention was structured for one family alongside the supervision process. Table 2 (pg 74) shows how the interventions transpired.

Figure 11: Flowchart depicting the joint consultation meeting, videoing, feedback and supervision process

Planning and intervention meeting with parent → 1st videoed activity of parent and child → Supervision session with VIG trainer

1st review meeting with parent → 2nd videoed activity of parent and child → Supervision session with VIG trainer

2nd review meeting with parent → 3rd videoed activity of parent and child → Supervision session with VIG trainer

3rd review meeting with parent → 4th videoed activity of parent and child → Supervision session with VIG trainer

4th review meeting with parent → 5th videoed activity of parent and child → Supervision session with VIG trainer

Final review meeting with parent

Summer Term → Autumn Term → Spring Term

Table 2: Overview of interventions with the participants

Participant	Intervention		Duration of intervention
	Cycles of VIG	**No. of mgs**	
Participant 1	5	6 with parent	May '09- Feb '10
Participant 2	2	5 with parent	June '09- Jan '10
Participant 3	2 (with class teacher)	3 with teacher 3 with parent	June '09- Jan '10
Participant 4	0	3 with parent	Sept '09- Jan '10

6.5 Ethical Considerations

The British Psychological Society (BPS, 2009) Code of Ethics and Conduct details guidelines on issues regarding respect, confidentiality, informed consent and safe guarding which were carefully considered and adhered to during the research. They are discussed further in Appendix 6 (pg 136) and Appendix 30 (pg 181-184).

6.6 Analysis Procedure

The quantitative data (Boxall profiles and SDQ scores) was entered onto an Excel dataset. This provided an overview of the descriptive statistics, including mean scores, standard deviations and the distribution of scores. Impact scores for the Boxall Profile were also calculated. Comparisons of outcomes between the control and experimental groups were made by comparing Boxall and SDQ data. Due to the small sample size, further statistical analyses were not employed. The length of the micro-analysed videos from the consultation meetings were also described descriptively.

On analysis of the observations, it became apparent that the event recording aspect of the schedule did not capture the behaviours and responses that I was observing and recording in the general comment section. Instead, a series of themes were identified (see Appendix 15, pg 162) in the observations. The written comments from the observations were coded against these themes so that a clearer

representation of the observation could be portrayed (see Appendix 16, pg 163-164). These were tallied for each observation and then analysed descriptively. Data from the first and second observers were entered onto a SPSS data sheet and were analysed with Kendalls Tau (Field, 2005) to evaluate inter-observer reliability (see Appendix 17, pg 165-168).

The data from SSIs and the consultation meetings was uploaded onto NVivo 8 (QSR International) which stored the data and aided the organisation and implementation of pre-determined codes.

I employed Interpretive Phenomenological Analysis (IPA) (Smith, 2008) to analyse and interpret the data to produce a set of themes. These themes identified similarities and differences of participant's accounts before and after the intervention. See Appendix 8, pg 145-151 and Appendix 10, pg 153-156 for coded data.

Chapter 7

Results

The two research questions detailed in Section 5.3 (pg 66) will be addressed in this chapter. The first research question is answered by evaluating and comparing outcomes from the Boxall Profile and SDQ for the control and experimental groups. The second research question is then attended to by explaining outcomes for each case using results from both the quantitative and qualitative measures (Boxall profile, SDQ, observations, length of VIG clips, SSIs and joint consultation meetings).

In order to ensure that anonymity is maintained, participants are referred to with a corresponding participant number. A pre-fix has been added before the numeral to identify whether the participant is a child (C), parent (P), NG staff (NG) or school teacher (SC). In the case of children and parents, the numbers correspond to represent related children and parents (for example child 1 (C1) is the child of parent (P1)).

7.1 What differences does partnership working have on social and emotional outcomes for the experimental group in comparison to the control group (RQ1)?

Social and emotional outcomes measured by the Boxall Profile and SDQ are detailed below under the corresponding headings.

7.1.1 Boxall Profile Data

Figure 12 (pg 77) shows that comparisons of the total means for the different Boxall strands in the experimental group, pre- and post-intervention improved for 13 out of the 20 strands. Means went down slightly in 5 strands and remained the same for 2 strands. However, total means for all the Boxall strands increased post-intervention for the control group showing that they made positive

changes in all of the 20 strands.   (See Appendix 18, pg 169 for the means and standard deviations for both groups).

Figure 12: Direction of changes in the Boxall Profiles for the groups

Experimental Group

Control group

Legend:
- Positive changes (orange)
- Negative changes (lavender)
- Neutral (green)

Experimental Group: 13 65%, 5 25%, 2 10%
Control group: 20 100%
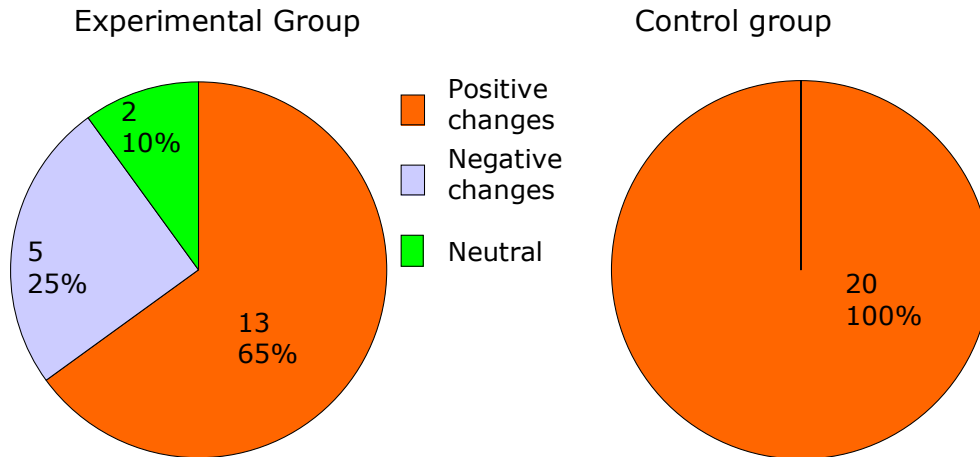
Comparisons of pre- and post-intervention means demonstrated that the control group made greater changes in the diagnostic strands in comparison to the experimental group. However, the groups made very similar positive gains in the developmental strands (Appendix 19, pg 170). On closer analysis, it was apparent that the standard deviation (SD) was high for both groups indicating a high level of variance (see Appendix 20, pg 171).

Appendix 20 (pg 171) and Figure 13 (pg 78) show how the entire control group made gains with their individual impact scores (difference between pre- and post-measures) in comparison to the experimental group (where one participant did not).

Figure 13: Boxall outcomes for both groups
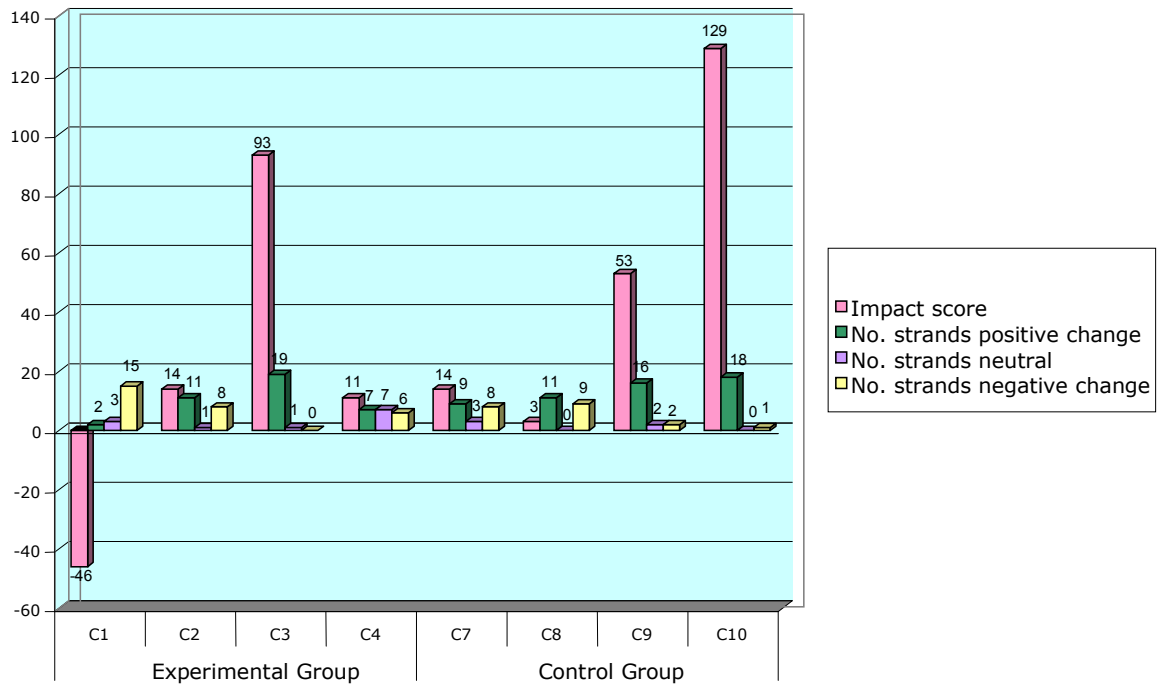
7.1.2 SDQ Data

Figure 14 (pg 79) and Appendix 21 (pg 172) show that means for both the experimental and control groups decreased post-intervention for the difficulty scales, and increased for the strength scale.

On closer analysis, the experimental group displayed greater progress post-intervention in comparison to the control group. This is demonstrated in Figure 15 (pg 79) where the mean differences, in all but one of the scales, are greater for the experimental group. Furthermore, Table 3 (pg 80) displays how post-intervention, experimental group children's total difficulties scores were either within the 'close to average' or 'slightly raised' categories.

Figure 14: Pre- and post-means for the control and experimental group

X-axis: SDQ Difficulty Scales — Total difficulties, Emotional symptoms, Conduct problems, Hyperactivity, Peer relationship difficulties; SDQ Strength Scale — Pro-social behaviour

Y-axis: Scores

Legend: experimental pre, experimental post, control pre, control post
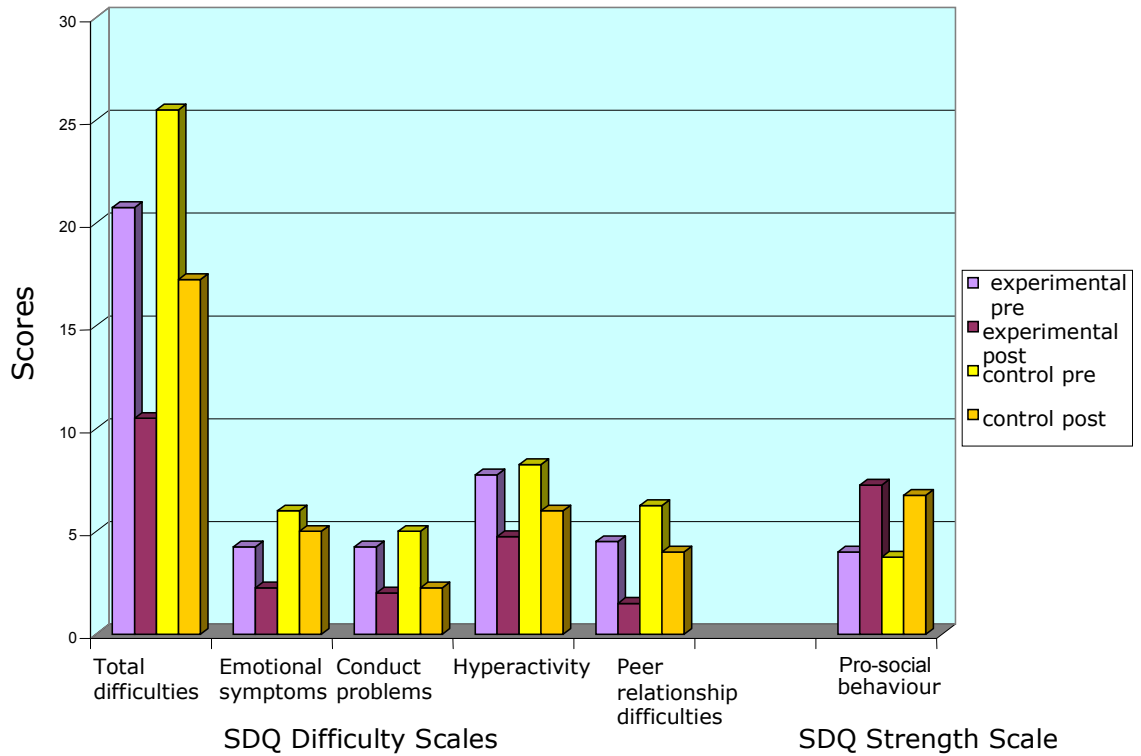
Figure 15: Difference between pre- and post-means for the experimental and control group

X-axis: SDQ Difficulty Scales — Total difficulties, Emotional symptoms, Conduct problems, Hyperactivity, Peer relationship difficulties; SDQ Strength Scale — Pro-social behaviour

Y-axis: Scores

Legend: Difference pre & post experimental, Difference pre & post control
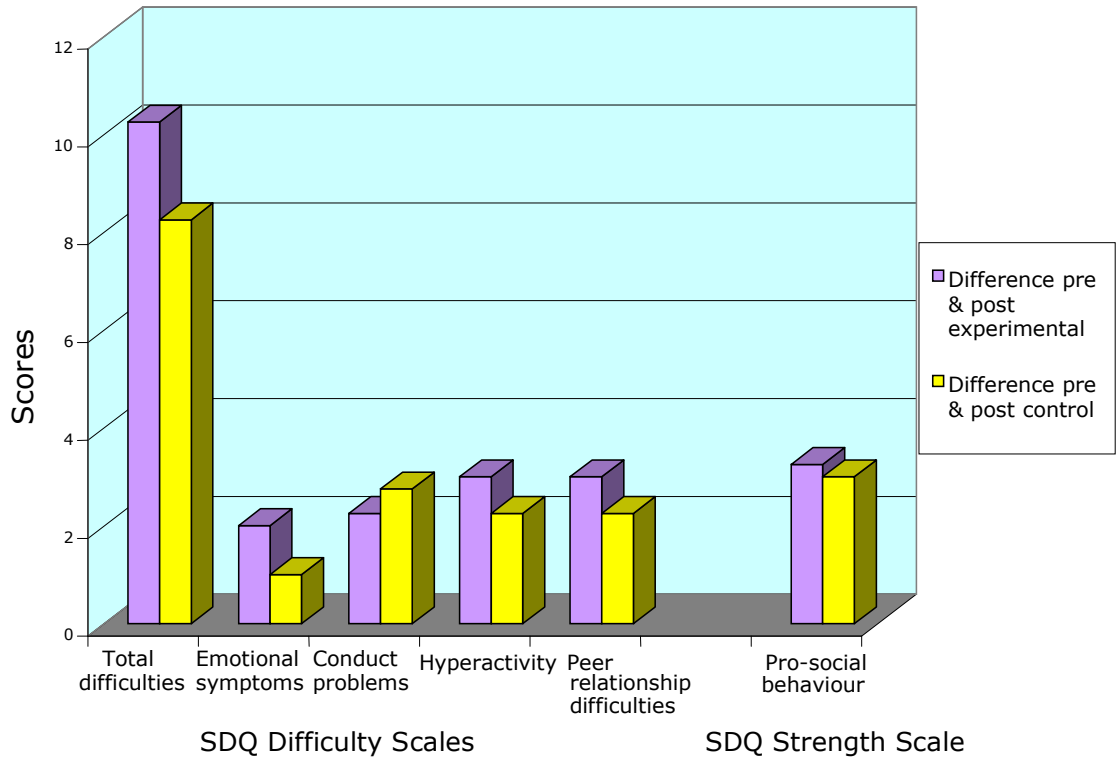
Table 3: Total Difficulty categories as measured by the SDQ pre- and post-intervention for both groups

	Pupil	Pre	Post
Experimental Group	C1	Very high	Close to average
	C2	Very high	Slightly raised
	C3	Very high	Close to average
	C4	Slightly raised	Slightly raised
Control Group	C7	Very high	High
	C8	Very high	High
	C9	Very high	Very high
	C10	Very high	Close to average

7.2 What implications does partnership working have on social and emotional outcomes for individual children in a Key Stage 2 Nurture Group (RQ2)?

The following section describes the results for each child in the experimental group.

7.2.1 Case 1(C1 and P1)
Boxall Profile

Figure 13 (pg 78) and Appendix 20 (pg 171) show that the Impact Score for C1 was -46, suggesting a decline in his emotional, social and behavioural functioning post-intervention. He improved on 2 strands, remained the same for 3 strands and decreased on 15 strands. See Appendix 28, pg 179 for detailed pre- and post-scores.

SDQ

Figure 16 (pg 81) and Appendix 29 (pg 180) show that C1's total difficulties score decreased post-intervention, suggesting an improvement in his emotional, social and behavioural development. He improved in 3 of the difficulty scales, stayed the same for one of these scales and improved in the pro-social scale.

Figure 16: SDQ Scores for C1 pre- and post-intervention
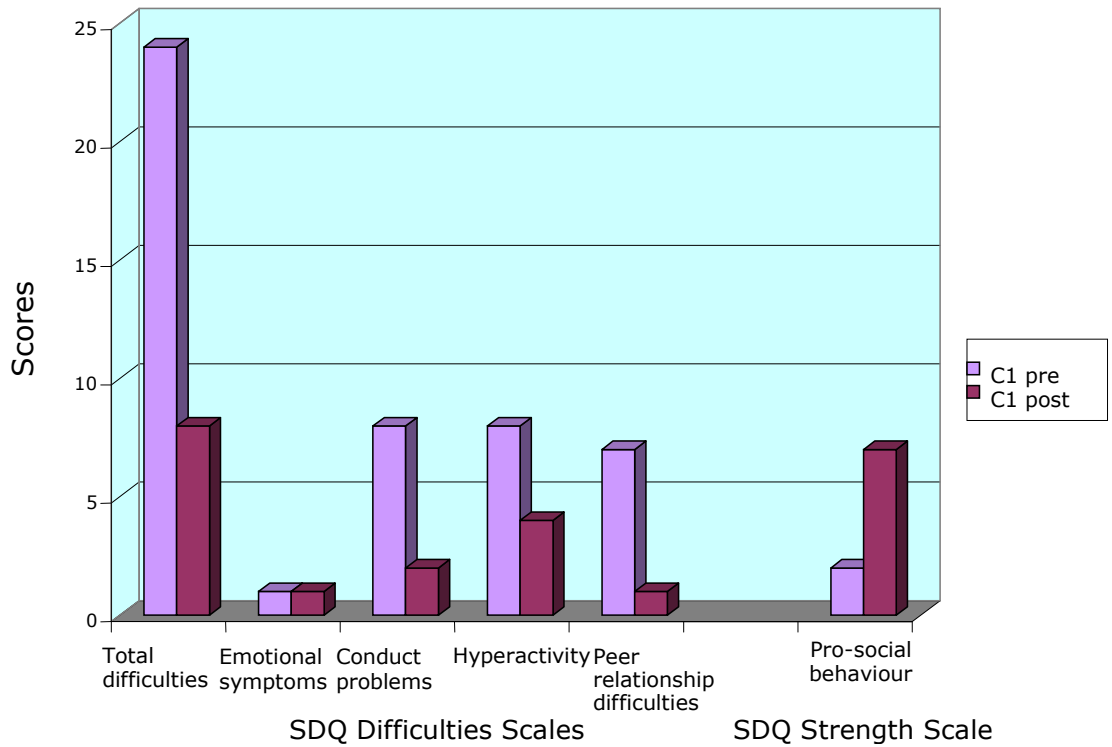
Observation Records

Engagement to task increased from 8 minutes in the first observation to 20 minutes in the final observation (total 30mins) (see Appendix 22, pg 173). Table 4 (pg 81) shows the areas where C1 improved most significantly during the monthly observations. Appendix 23 (pg 174) summarises the recorded events from the observations.

Table 4: Areas of most improvement for C1 from the observations records

Areas of significant improvement from Event Recording	No. occurrences in first observation	No. occurrences in final observation
Contentedness	0	3
Self regulation of emotions	1	3
Pursuit of own agenda decreased	2	0 (decrease denotes positive movement)

VIG Micro-Analysis

The edited video recordings trebled in length showing a significant improvement in the duration of positive interactions (see Appendix 27, pg 178).

Consultation Meetings and Semi Structured Interviews

In the first consultation meeting, Parent 1's (P1) level of concern on a scale of 1-10 (with 10 being most concerned and 1 being least concerned) was 9. Her aim was to decrease her concern to 4 or 5. At this point, she envisaged Child 1 (C1) respecting and complying with rules, going out together and doing 'normal' things without worrying about what C1 would do. By the end of the intervention, P1 identified that her level of concern was a 5 or 6 (see Figure 17, pg 82). Specific progress is discussed in more detail below.

Figure 17: Scaling exercise showing level of concern for P1
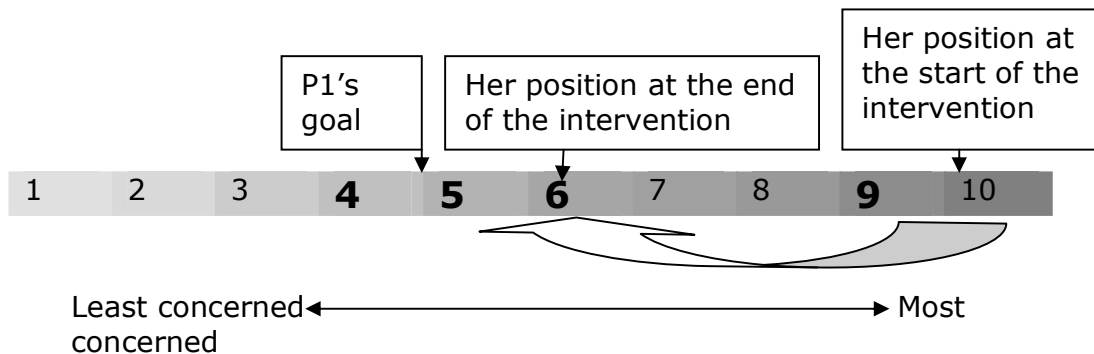
P1 was impressed with the noticeable difference in C1 emotions and behaviour. She noticed how he was less egocentric, better at understanding and regulating his emotions, considering consequences, avoiding 'sticky' one way situations and calming himself down. This corresponds with C1's view, who explained how he was able to regulate his emotions by going to the blue room. Furthermore, he shared how his behaviour had changed;

"It's changed my behaviour a bit; I don't chuck tables. I still do it a bit, but not as much… I don't fight, I only play fight, I'm not rough." (C1, post SSI)

From reviewing the VIG and discussing the outcomes, it was apparent how C1 and P1 listened to each other more, increased their initiations and received initiations more in interactions towards the end of the intervention. P1 also guided, supported, distracted and improved her skills in maintaining their interaction in later meetings. These outcomes are illustrated in Figure 18 (pg 83).

Figure 18: P1's employment of contact principles in videoed interactions
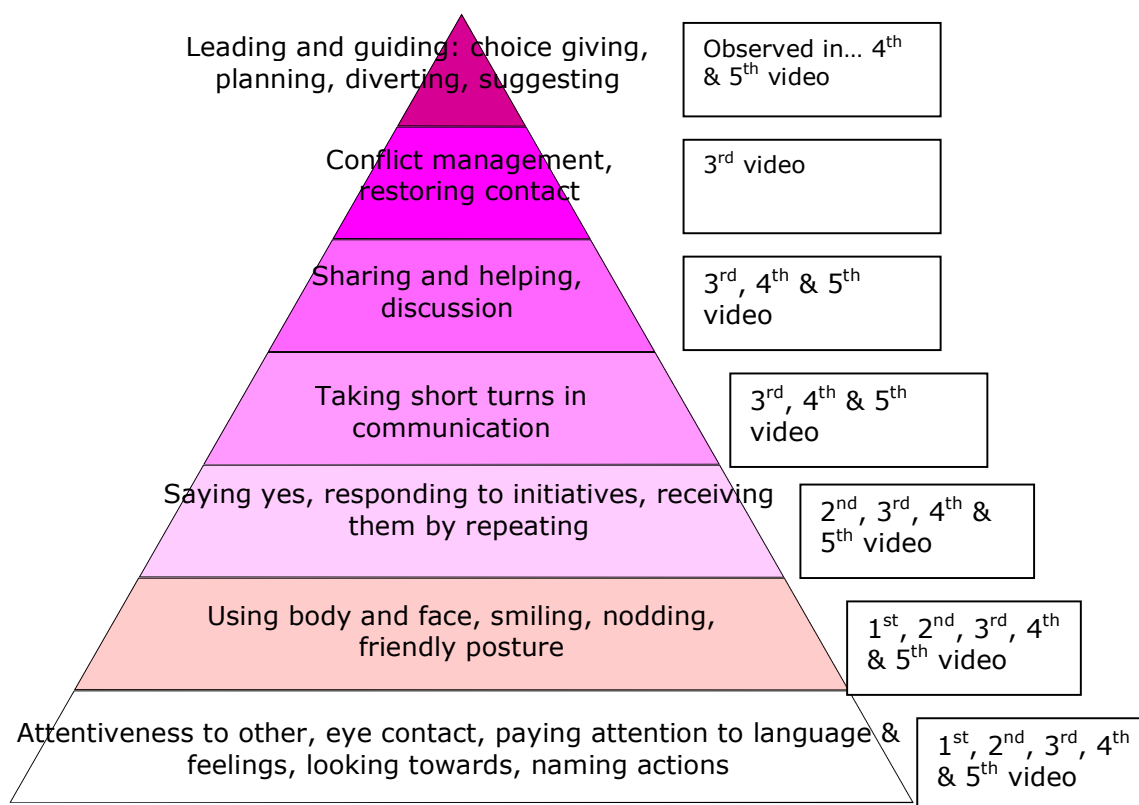
At the start of the intervention, P1 described C1 as being egocentric. She expressed how she wanted them to have a closer, more affectionate relationship. In the last three meetings, she described how affectionate he was towards her, how they were closer and

spending more enjoyable time together. In the final review meeting, P1 described C1 as, "a lovely little lad". C1 asked P1 to stay all day in their last videoed interaction which demonstrated how he enjoyed her company.

Simultaneously, there was less conflict in their relationship. By the fifth meeting, she described how she felt calmer, confident and assertive in her parenting strategies which enabled her to remain firm. The growth in respect was reflected in the VIG videos. In the final 3 videos, C1 accepted P1's firm statements, listened to her and accepted consequences.

It was evident that alterations made to P1's approach through VIG had facilitated positive outcomes;

> "I have had to change my whole way of parenting; Like with the eye contact, waiting for him to answer me and trying to get conversations going again. Sometimes now he will start them and want to talk to me about something which is great... he goes on and on! It's not often that he walks out of the room now...We'll sit together for ages. There is a lot more going on between the two of us now..." (P1 post SSI)

This was echoed by NG staff;

> "...there has been a huge difference in the relationship that he has with his mum, rebuilding that relationship has been really powerful". (NG1, post SSI)

From the videos, there were also noticeable improvements in C1's attitude. He became more amenable and compliant. This coincided with a reduction in risk taking and undesirable behaviour. For example, by meeting 6, he would come back at specified times, stay in when asked to and stay within P1's sight. This contrasts to the start of the intervention when he was running away. There was also evidence of them doing more 'normal things' like shopping and going

to the cinema together. This was a goal that P1 had identified in our initial meeting.

7.2.2 Case 2 (C2 and P2)

Boxall Profile

C2 had a positive impact score of 14 indicating that there were some improvements in his social, emotional and behavioural functioning post-intervention. He improved in 11 strands, remained the same in 1 strand and declined in 8 strands (see Figure 13, pg 78, Appendix 20, pg 171 and Appendix 28, pg 179).

SDQ

Figure 19 (pg 85) and Appendix 29 (pg 180) show that C2's total difficulties score decreased post-intervention, suggesting an improvement in his emotional, social and behavioural development. He improved on all the difficulty and pro-social scales.

Figure 19: SDQ Scores for C2 pre- and post-intervention
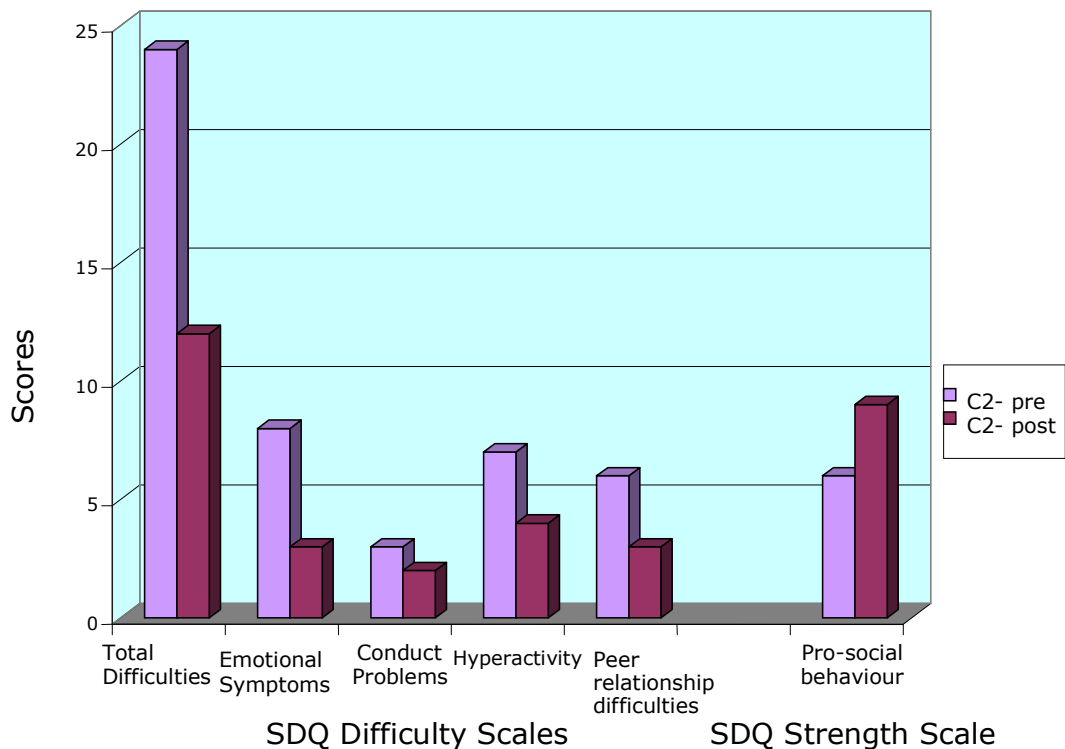
Observation Records

Engagement to task decreased from 28 minutes in the first observation to 25 minutes in the final observation (total 30mins) (see Appendix 22, pg 173). Table 5 (pg 86) shows the areas where C2 improved most significantly during the monthly observations (see Appendix 24 (pg 175) for a summary of the recorded events from the observations).

Table 5: Areas of most improvement for C2 from the observations records

Areas of significant improvement from event recording	No. occurrences in first observation	No. occurrences in final observation
Co-operating with adults	0	4
Engagement	1	4
Self regulating emotions	0	4

VIG Micro-Analysis

The length of edited videos decreased by approximately 40% from the first to the second video showing that the quantity of positive interactions declined (see Appendix 27, pg 178).

Consultation meetings and Semi structured interviews

In the first consultation meeting, Parent 2's (P2) level of concern was a 9 for when he was at school and a 4 for when he was at home. She identified that she wanted to move to a 5. At this point, she felt that he would feel more confident about coming to school, have developed his self esteem and be kind and helpful. She also worried that he struggled socially and that he didn't show her any respect. By the end of the intervention, she identified that her level of concern had moved to a 1 (home and school) (see Figure 20, pg 87). Detailed progress is discussed below.

Figure 20: Scaling exercise showing level of concern for P2
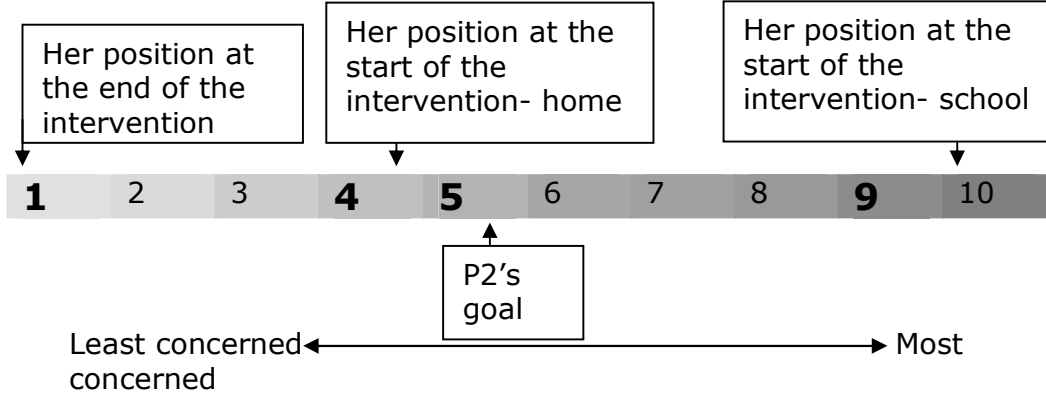
Through reviewing the VIG intervention, it was apparent that P2 was helping, re-directing and encouraging C2 sensitively when he encountered a problem in their interactions. P2 demonstrated that she listened, received his initiatives, explained things clearly and that she was effective at maintaining their interaction (Figure 21, pg 87 shows how P2 developed her interaction skills).

Figure 21: P2's employment of contact principles in videoed interactions
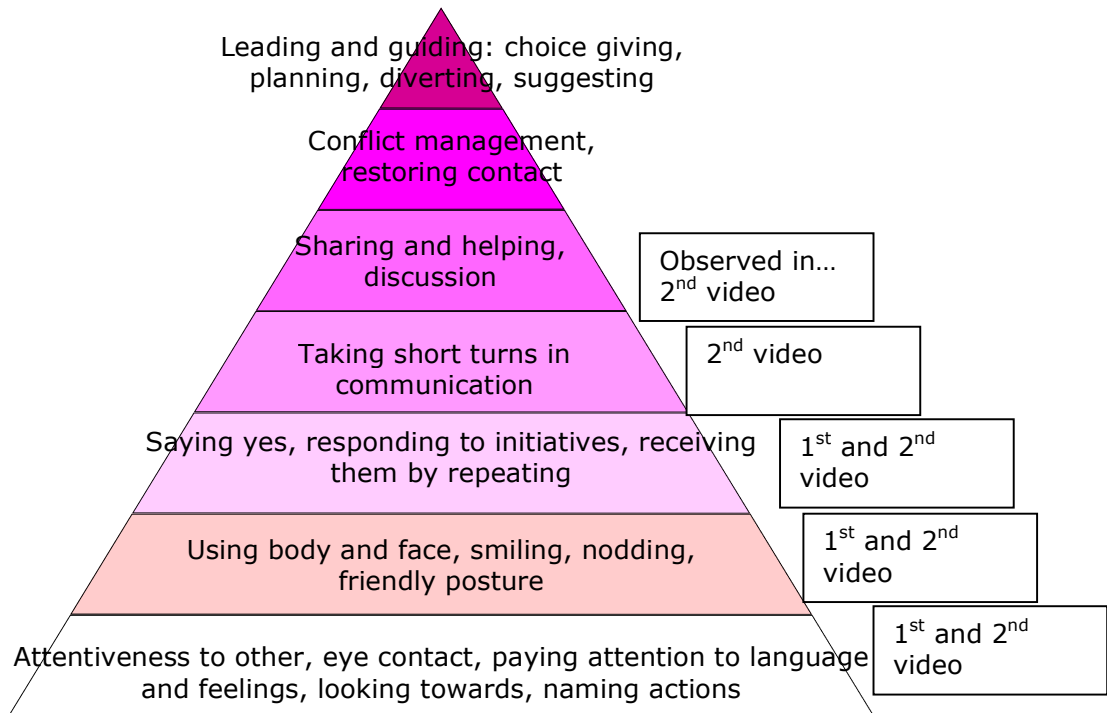
Coincidently, there was a change in C2's behaviour; P2 described how he became more settled, independent and responsible and that he was able to follow instructions by the third meeting (e.g. about going to bed and routines). This was reverberated by C2, before the intervention he described his behaviour as "bad". Following the intervention, he said his behaviour had changed and that he wouldn't hit people anymore.

In terms of their relationship, there was a noticeable development in the area of respect. By the 2nd VIG review meeting, he was starting to show her respect and by the 3rd meeting, there was evidence of them both being respectful to each other in the VIG. Outside of the NG, P2 recognised an improvement with his manners. This was also identified by C2;

> "I've stopped calling mum names… I don't swear at adults". (C2, post SSI)

By the third meeting, there were examples of P2 developing C2's confidence in the videos. Outside of the NG she noticed that he was more confident and assertive;

> "Like with children, he'll have it in him to speak to them or say if there is something that he is not happy with, whereas before he would just clam up and sit back". (P2, post SSI)

Towards the end of the intervention, it was evident how she was more attuned to his needs and more adept at following his lead. Furthermore, she noticed that his communication and social skills had improved;

> "He does have a conversation better; his eye contact is different". (P2, post SSI)

This corresponds with C2 who acknowledged that school was "scary and lonely" before the intervention but that it was "fun" after the intervention as he had more friends then. The NG teacher also

identified the difference in P2's parenting approach as a result of the joint working.

7.2.3 Case 3 (C3, P3 and SC)

Boxall Profile,

C3 had a very high positive impact score of 93 suggesting that there were significant improvements in his social, emotional and behavioural functioning post-intervention. He improved in 19 strands and remained the same in 1 strand (see Figure 13, pg 78, Appendix 20, pg 171 and Appendix 28, pg 179).

SDQ

Figure 22 (pg 89) and Appendix 29 (pg 180) show that C3's total difficulties score decreased post-intervention. He improved on all the difficulty scales and improved slightly on the pro-social scale.

Figure 22: SDQ Scores for C3 pre- and post-intervention
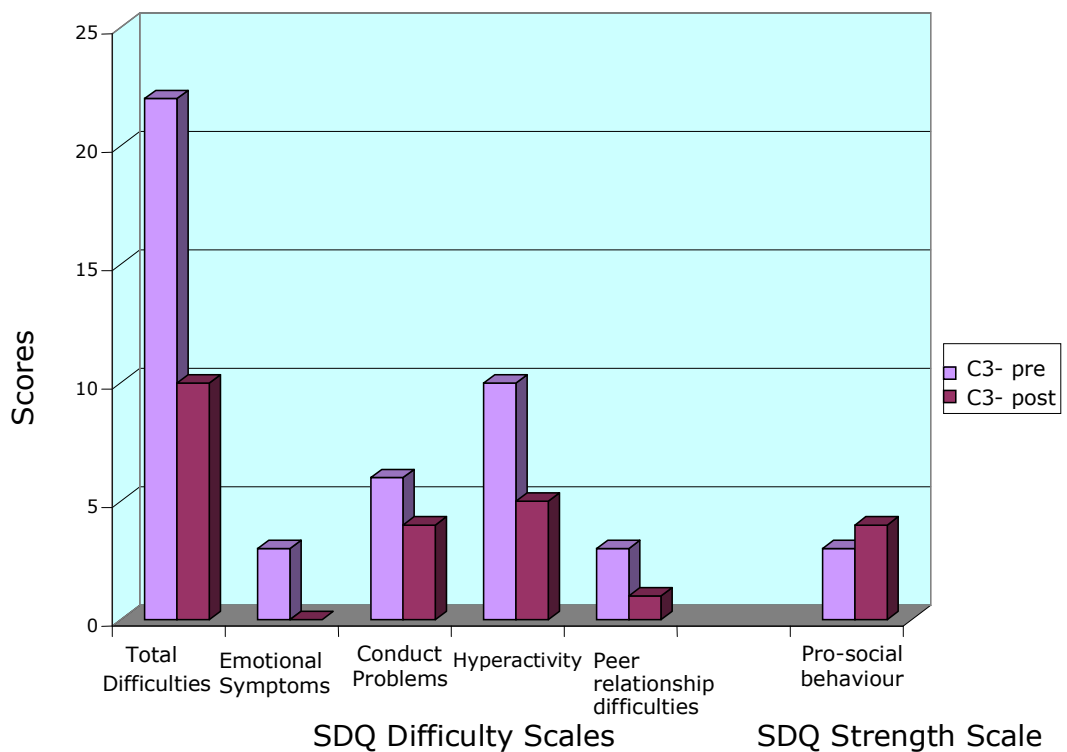
Observation Records

Engagement to task increased from 23 minutes in the first observation to 28 minutes in the final observation (total 30mins) (see Appendix 22, pg 173). Table 6 (pg 90) shows the areas where C3 improved most significantly during the monthly observations (see Appendix 25 (pg 176) for a summary of the recorded events from the observations).

Table 6: Areas of most improvement for C3 from the observations records

Areas of significant improvement from event recording	No. occurrences in first observation	No. occurrences in final observation
Inconsideration to others	3	0 (decrease denotes positive movement)
Engagement	3	9

VIG Micro-Analysis

The length of the edited video clips increased by approximately a third showing that the quantity of positive interactions increased (see Appendix 27, pg 178).

Consultation meetings and Semi structured interviews

At the start of the intervention, Parent 3 (P3) felt that the mainstream school did not appreciate Child 3's (C3) strengths. She felt that this was affecting his self esteem which was having a direct impact on his behaviour. She hoped that the intervention would enable the school to value him.

Through the VIG, it was evident that the school class teacher adjusted her interaction with C3. She became more attentive to him and displayed more friendliness in her body language. In the second VIG review, she led and directed him more so that he was included within the group. In the last session, she even stopped to listen to him, and changed the direction of conversation following his

contribution showing that she had received his initiation (Figure 23, pg 91 shows how she developed her interaction skills).

Figure 23: School Teacher's employment of contact principles in videoed interactions
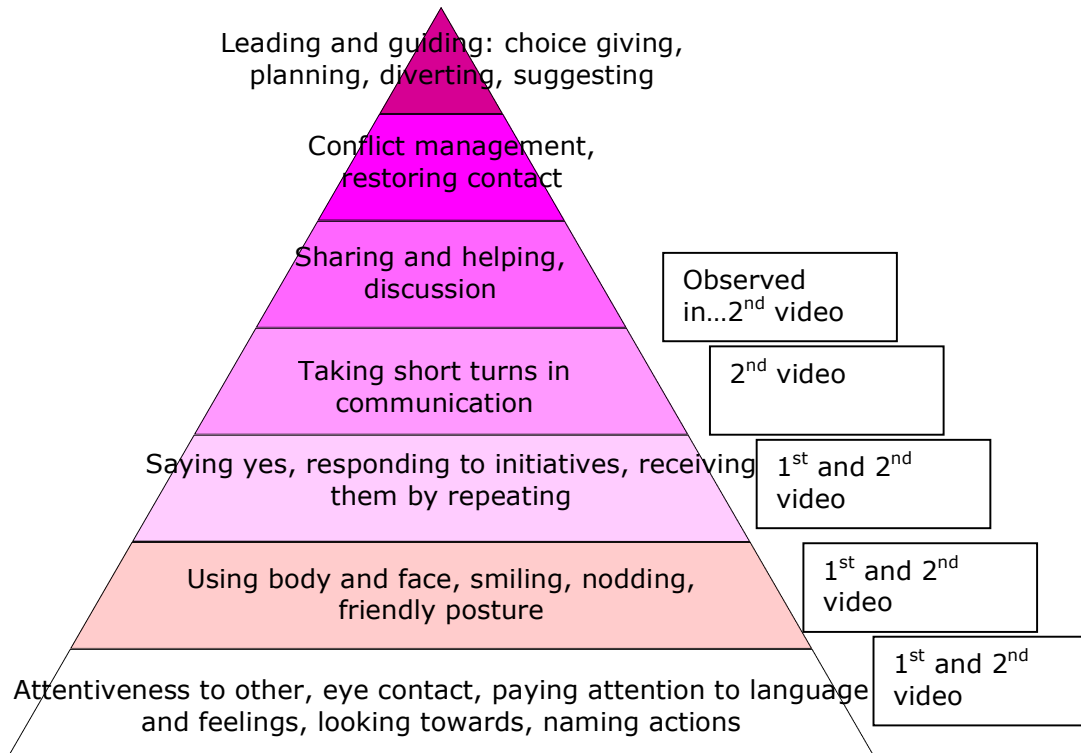
Furthermore, she commented on how sharing practice was having a positive impact on C3;

"He behaves better when the TA from the NG joins the class on a Wednesday afternoon". (SC, meeting 1)

She also noted how his behaviour had improved since their visit to the NG. Following this visit, they incorporated the same reward and behaviour management practices. However, from C3's perspective things had deteriorated because of this;

"The teacher (at school) uses the token thing now. Usually I am naughty to get out of the class and now that I have tokens she

just takes the tokens away and I stay in class. I get really annoyed about that… They (staff at school) are interfering. It's my school here". (C3, post SSI)

P3 was pleased with his behaviour and regulation of his emotions. She had also incorporated the same NG practices to help manage his wilful nature;

"They're teaching him to handle anger… I can say to him now, 'You need to think about your blue room,' and that helps him deal with it". (P3, post SSI)

Once again C3 was slightly resistant to collaboration between the NG and home. Although he thought that the blue book (the home – school book) was useful, he also found it frustrating;

"It can be bad because Mum and Dad lie and don't want to put anything bad down and then they do… if it wasn't there they wouldn't be able to do it". (C3, post SSI)

P3's hope for C3 to feel valued was demonstrated in the final VIG review session. It highlighted how the class teacher praised him and that she was interested in him and his opinion;

"That's a good point C3…" (SC, 2nd videoed interaction)

At the end of the intervention, P3 was pleased that C3 had "the gift of feeling valued". However, she did not seem convinced that the school valued him as much as the NG did.

7.2.4 Case 4 (C4 and P4)
Boxall Profile

C4 had a positive impact score of 11 indicating that there were some improvements in her social, emotional and behavioural functioning post-intervention. She improved in 7 strands, remained the same in 7 strands and declined in 6 strands (see Figure 13, pg 78, Appendix 20, pg 171 and Appendix 28, pg 179).

SDQ

Figure 24 (pg 93) and Appendix 29 (pg 180) show that C4's total difficulties score declined slightly post-intervention. This decline was attributable to an improvement on the 'peer relationship scale', as she remained the same for the other 3 difficulty scales. She improved in the pro-social scale post-intervention.

Figure 24: SDQ Scores for C4 pre- and post-intervention
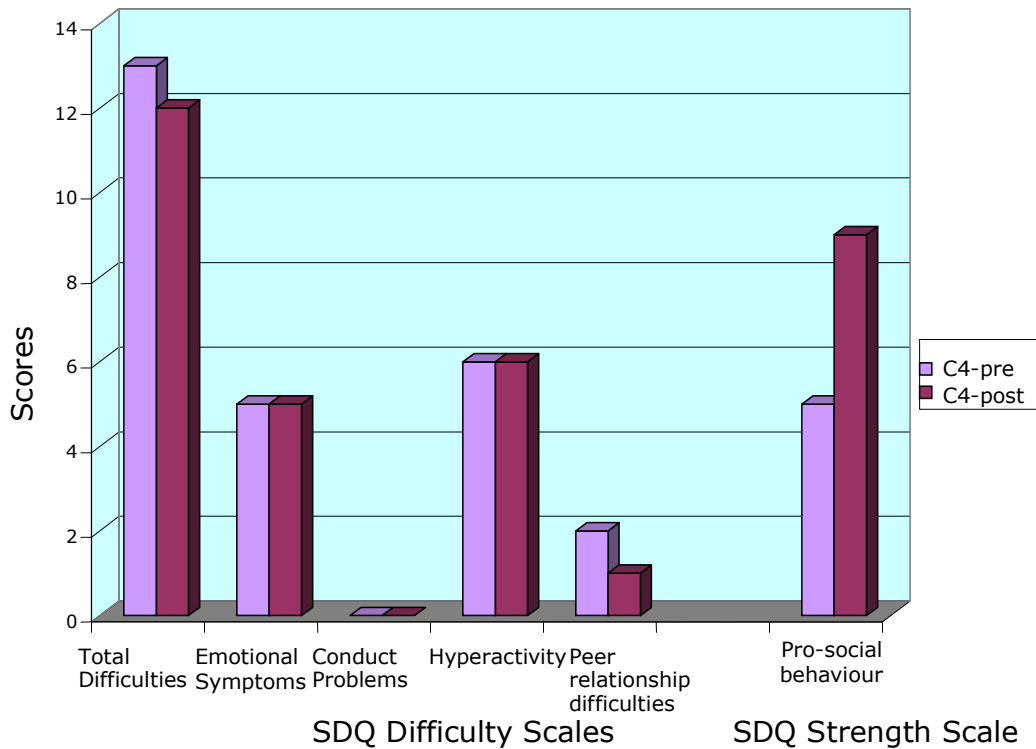
Observation Records

Engagement to task remained the same throughout the observations at 30 minutes (total 30mins) (see Appendix 22, pg 173). Table 7 (pg 94) shows the areas where C4 improved most significantly during the monthly observations (see Appendix 26 (pg 177) for a summary of the recorded events from the observations).

Table 7: Areas of most improvement for C4 from the observations records

Areas of significant improvement from event recording	No. occurrences in first observation	No. occurrences in final observation
Co-operating with adults	2	5
Less of a desire to seek assurance	5	0 (decrease denotes positive movement)

Semi-structured interviews and Consultation meetings

In our first discussion, Parent 4 (P4) expressed that she wanted Child 4 (C4) to be calmer at home and for C4 to control her anger. She also wanted other family members to feel safe and to function as a 'normal' family. She seemed helpless, expressing that she couldn't take anymore and confided that she doubted herself as a parent. She seemed desperate, explaining that she was considering breaking up the family to move away from C4. In both our 1st and 2nd discussions, P4 attributed this to C4's extreme aggression and violence.

Staff at the NG aimed to support the family, develop parental confidence and build their resilience. Some improvements at home were apparent to C4 but she was not able to define what had improved. Interestingly, C4 told me she was "scared" about the NG and her parents working together. She clarified this, expressing that she was worried that the NG staff would find out about her behaviour at home.

During our 2nd discussion, P4 reported how C4's behaviour had improved slightly but had then deteriorated again. Despite this, she explained that she was committed to working through these difficulties and said that the family could not function without her. Her commitment was evident when she explained that she was still

seeking advice on how to parent C4.   This was a progressive shift from the exasperation she expressed in the 1st discussion.

N.B. For all of the observations where there were two observers (two observations per child), there was a statistically significant positive correlation between the observers at the 0.01 level (see Appendix 17 pg, 165-168 for statistical output).

Chapter 8

Discussion

This chapter interprets, explores and clarifies the findings from the previous chapter. The chapter is organised under relevant research question headings to aid coherence.

8.1 What differences does partnership working have on social and emotional outcomes for the experimental group in comparison to the control group (RQ1)?

This section compares outcomes for the experimental and control group as measured by the Boxall Profile and SDQ.

The Boxall findings suggest that control group children made greater gains in comparison to children from the experimental group, particularly within the diagnostic strands. However, as there was a high level of variance within the small groups, it is difficult to draw definitive conclusions based on group outcomes. O'Connor and Colwell (2002) also describe how post-NG intervention, there was a relapse in four strands of the Boxall profile and that long term positive outcomes were not measured by the profile.

Conversely, the SDQ findings revealed that the experimental group made greater gains post-intervention. The level of variance was also smaller, allowing more accurate group comparisons to be made. Although both groups improved post-intervention, the experimental group improved to a greater extent and children's total difficulties scores moved closer to average categories.

Although the Boxall and SDQ have been used together in previous studies, I am not aware of studies which have used them to measure the impact of an intervention as described in this current study. However, other studies (Cooper and Whitebread, 2007; Gerrard, 2006) report differences in Boxall and SDQ findings. Due to the

differences in outcomes from the different measures in this study, clear conclusions cannot be accurately drawn.

8.2 What implications does partnership working have on social and emotional outcomes for individual children in a Key Stage 2 Nurture Group (RQ 2)?

This section explores and discusses the impact of partnership working on the children from the experimental group by summarising the findings and comparing these with existing research evidence.

When comparing pre- and post-measures of the Boxall for the experimental group children, it was evident that no clear conclusions could be drawn about the effectiveness of partnership working. One of the children improved vastly on the Boxall, whereas another pupil declined on the profile. Two other pupils improved on some of the strands as well as declined on strands, while variable amounts of strands remained the same pre- and post-intervention. Although other studies have not applied the same intervention as described in this paper, studies (Cooper, Arnold and Boyd, 2001; Cooper and Whitebread, 2007; Binnie and Allen, 2008; Sanders, 2007) researching the effectiveness of NGs have reported positive social and emotional gains as recorded by the Boxall Profile following NG provision.

Analysis of the SDQ data showed that post-intervention, there were positive outcomes for all experimental group children. However, changes for one child were minimal. This case might be explained by parents being less engaged with the intervention as a result of personal circumstances. These findings support other studies (Binnie and Allen, 2006; Cooper, Arnold and Boyd, 2001) who report positive outcomes as measured by the SDQ following NG provision. However, it contrasts with other studies (Cooper and Whitebread, 2007; Gerrard, 2006) which found no consistent significant difference in SDQ scores following NG provision.

Analysis of the observations showed areas where experimental group children made clear improvements in their emotional, social and task related responses. There seemed to be some agreement between the areas of improvement, for example, two children showed particular improvements in the regulation of their emotions, two demonstrated that they were more engaged at the NG and two were more co-operative with adults. The described improvements are characteristics of a 'securely' attached child (Bowlby, 1969; 1973; 1980). With these developing competencies, children may be more able to understand and regulate their behaviour, form relationships and communicate with others; all of which are essential foundations for learning.

Few other studies have used observations as a method to record social and emotional gains following NG provision. However, Sanders (2007) used termly naturalistic observations and reported similar findings. She detailed how post-intervention, children were more focused and engaged, showed more interest in academic tasks and purposeful play, were more adept at regulating their emotions and that the quality of interaction between children and adults improved. This might suggest that the improvements reported in the current paper were attributable to the NG provision and not necessarily the intervention. As only the experimental group was observed and not the control group, it is difficult to draw conclusions from the observation about the effectiveness of the unique intervention.

Evidence from the SSIs and consultation meetings supported findings from the observations and SDQs. They revealed improvements in children's emotional, behavioural and social functioning. Specifically, parents noted improvements in children's emotional regulation, amenability, how they were more settled and how they were more respectful. Some of these findings were also reflected by children. They reported how they were better at regulating their emotions, being respectful, felt more confident and that they had more friends. Similarly, Velderman et al. (2006) conclude how VIG had reduced the

number of children in the clinical range for externalising behaviour problems.

The length of video recorded positive interactions increased with time for two of the participants suggesting that the intervention was successful in increasing the duration and opportunities of positive interaction. Once again, this is a feature of secure attachment styles (Bowlby 1969; 1973; 1980). Conversely, the video length decreased for C2 (this is discussed further in section 8.3, pg 100).

From analysing the videos, it was evident that VIG facilitated the development of various interactional skills. Specific improvements were observed in participants' attentiveness, friendliness, listening skills, ability to initiate conversations, receptiveness of initiations, maintenance of conversations, supportiveness and guidance offered. These responses are characteristic of adults who facilitate secure attachment patterns (Trevarthen, 2009). The described findings are comparable to evidence collected by Fukkink (2007) and Simpson, Forsyth and Kennedy (1995) who found that parents' management of their children became more flexible, more attuned and that they grew in confidence following VIG intervention.

In addition, parents expressed how they had developed new ways of managing and understanding their children and how this had a positive impact on the parent-child relationship. As a result, parents seemed to grow in confidence. Generally, parents reported how they were enjoying spending time with their children more and how there was less conflict between them. The following quote illustrates the positive impact the intervention had on parent-child relationships;

> "I've changed my whole way of parenting… I really felt that I was drowning and it is not that anymore; we're actually swimming together. It is brilliant; I have got my little boy back. This works, it really does work; everything around him. I just don't want it to stop!" (P1, post SSI).

8.3 What are reliable and valid methods of gathering data in this research area?

The range of methods used to collect data provided an insight into tools that were effective. Furthermore, the triangulation of data generated information about which tools produced information that correlated or contrasted to other data. It is important to reflect upon this to add validity to the results from the current study and to inform subsequent research.

The results revealed a large discrepancy between the recorded outcomes provided by the Boxall Profile in comparison to the other tools that were utilised. This was particularly apparent for one pupil (C1). This contrasts with the SDQ, where measured positive outcomes correlate with the findings from the measures described below.

The observations provided a 30 minute snapshot of children's behaviour for a month. Although patterns emerged in the data, it is important to consider that the observations might not be reflective of children's progress over that time period. Furthermore, first and final observations were compared as these generally reflected progress made over the course of observations. However, this analysis was not able to pick up changes that occurred between the first and final observations so there was therefore some redundancy in the analysis process.

The consultation meetings were similar to the observations in respect that they continued throughout the intervention. However, the analysis of the consultation meetings was able to identify patterns of progress which could then be supported by discussion. There were also some correlations between findings from the observations and consultation meetings adding validity to the methods. For example, both methods identified that C1 was better at regulating his emotions and that C2 was more co-operative with adults.

Another positive feature of the consultation meetings was that they incorporated a solution focused scaling exercise (De Shazer, 1988) whereby parents recorded their level of concern, goals and progress that were pertinent to them. This allowed progress to be measured in areas that were significant to their situation and allowed subsequent discussions to be tailored to these areas. Other tools, such as the Boxall, SDQ or observations are unlikely to record such relevant contextual factors.

The individual SSIs allowed participants to openly share their views and experiences and have been widely used by other studies (Cooper, 2004b; Cooper, Arnold and Boyd; 2001; Cooper and Tiknaz, 2005; Sanders, 2007) in the research field. In this current paper, they allowed a perspective to be gained from a range of participants (children, parents and staff), which could then be compared pre- and post-intervention to find patterns and differences. The SSIs were similar to the consultation meetings as they agreed to flexible discussions and provided a holistic insight. Information from the SSIs correlated with findings from the consultation meetings and observations. In the case of C1, the SSIs and consultation meetings generally contrasted with findings from the Boxall profile.

Where VIG was used, the length of the video was a useful additional measure to consolidate the findings. However, if participants were only involved in 2 cycles of VIG (as with C2 and C3), it was difficult to identify patterns in the length of positive interactions. Other factors may also contribute to the length of the video. For example, In the case of C2, the presence of a shorter 2nd video was attributable to technical power difficulties associated with the video camera and the unsuitable positioning of C2 and P2 in the image.

Chapter 9

Conclusions

This chapter firstly summarises conclusions from Paper 1 and Paper 2. Discussion around the effectiveness and process of using VIG is explored here as it refers to both papers. Consideration is then given to the strengths and limitations of the study. Finally, the chapter concludes by reflecting on future directions.

9.1 Summary of Conclusions from Paper 1 and Paper 2

In Paper 1, the importance of communication, sharing practice, building of relationships and collaboration were all identified as significant features that develop partnership working relationships between home, NG and school. Similarly, Dunsmuir, Fredrickson and Lang (2004), Miller (2003) and Roffey (2004) suggest the significant roles of communication and trust in building and maintaining collaborative relationships between home and school.

Communication from the NG to home was shared formally and informally whereas communication to schools from the NG tended to occur formally. In both cases, NG staff generally seemed to share their knowledge rather than vice versa. These communication systems allowed NG practices to be shared and incorporated into different settings. This was perceived to improve outcomes for children.

In order to establish positive working relationships with parents, it was essential for professionals to demonstrate commitment, understanding and empathy. Professionals had to be accessible and available emotionally, as well as physically.

The majority of measures used in Paper 2 identify positive social, emotional and behavioural outcomes for children when parents and schools work collaboratively with NGs. However, no clear conclusions could be drawn when outcomes between the experimental and control

group were compared. VIG and the sharing of practices helped to modify the way parents and teachers understood, managed, communicated with and related to children. Although previous studies (Binnie and Allen, 2008; Cooper, 2004a) have suggested that NGs can have a positive impact on parent-child relationships, this has previously not been measured following an intervention and has not detailed what contributed to improvements in parent-child relationships. Cooper (2004a) stated that this was an interesting and important area that required "far deeper scrutiny in future research" (p64). This current study therefore contributes to this gap in research and practice.

Both papers demonstrate that children's school and home lives are intrinsically linked and that the success of any intervention is dependent on support from all settings. It conforms to constructivist theories (Bruner, 1996; Vygotsky, 1978) of learning whereby children 'construct' their realities through the experiences in their environments. Furthermore, the study supports an eco-systemic (Bronfenbrenner, 1979) psychological approach whereby the perception is that the 'problem' does not reside in the child, but that it is an interactive process between the child and the environment. This was important for the parents involved as the NG and intervention provided optimism which contrasted the negativity and despair that surrounded their child's preceding educational experience.

9.2 Re-constructing Reality with VIG

At the outset of the research, I planned to reveal pragmatic tools, such as the use of VIG, and investigate whether it supported effective partnerships in a NG setting. VIG provided a clear, cyclical system and theoretical framework to structure my work. Various perspectives from a constructivist (Bandura, 1997; Bandura and Adams, 1977), solution focussed (De Shazer, 1988) and positive

psychology (Seligman, 2004) approach underpin the discussion below.

As discussed in section 8.2, it was evident how VIG has an educational component whereby the client became aware of how the contact principles of communication (Trevarthen, 1979; 2001) could be employed. These enhanced nurturing practices by developing their communication skills, their understanding and empathy.

The solution focussed approach also allowed a more united, 'consumer model' (Cunningham and Davis, 1985) of working to be adopted. For example, VIG allowed parents to identify and reflect upon current practices that they felt were effective, discuss these openly and were prompted to think about applying them in other areas of communication. Discussions therefore focused around topics initiated by them, concurring with Brooks (2008) proposals of VIG supporting empowerment, partnership and respect. In addition, this model allowed parents to work within their Zone of Proximal Development (Vygotsky, 1978) whereby the VIG 'guider' mediates their learning experiences (Feuerstein et al., 2004).

The outcomes of VIG also conformed to the broad aim of NGs which intend to meet children at their emotional development stage. VIG encouraged parents to explicitly connect communication to emotional meanings. In addition, there are strong links with two of the six NG principles (Bennathan and Boxall, 2000);

- That language is a vital means of communication, and

- That all behaviour is communication

In addition, VIG has a strong positive focus which parallels with theories on positive psychology (Boniwell, 2001; Seligman, 2004). As the intervention progressed, parents became aware of small positive elements of their communication and on the impact this was having. Parents started to observe themselves in concrete events that were initially beyond their beliefs. For example, a parent had constructed a

belief that her child did not respect her and that he did not enjoy spending time with her. During the feedback session, I encouraged her to re-frame these constructs as there was evidence of him listening to her (showing her respect) and smiling at her (showing he was enjoying spending time with her). Boniwell (2001) highlights how positive observations serve as adaptive functions in allowing people to interpret their experience of reality positively.

An explanation for this phenomena is provided by Bandura (1997) and Bandura and Adams (1977). They explain that observing performance accomplishments provides unambiguous information on effective performance. They argue that this is the most influential source of self efficacy information as it is based on personal mastery experiences. Bandura (1977) explains that low self efficacy correlates with the avoidance of threatening situations that they (e.g. parents) believe exceed their coping skills. For example, low parental self efficacy led to parents avoiding setting firm boundaries. With the higher levels of parental self efficacy that became apparent with the VIG intervention, it became evident that they developed more active coping efforts when faced with threatening situations (e.g. setting boundaries). Once a parent had observed herself previously coping in this threatening situation effectively, she was able to estimate the expected outcome when faced with this same situation. Bandura (1977) describes how these higher levels of self efficacy are then generalised and applied to other situations.

As parents developed their self efficacy, they developed trust in the intervention. As VIG was the vehicle for change shared by me and the parent, they also developed trust in our relationship, leading to a more collaborative working relationship. The same positive observation was noted by Vermeulen (2006). Furthermore, the success of VIG is influenced by the quality of the relationship between the parents and me. Kennedy and Sked (2008) describe how communication is enhanced when the guider is emotionally engaged in the process as they demonstrate more enthusiasm, confidence and

initiative. This parallels with Lambert (1992), who argues that 70% of change is attributable to the relationship between a therapist and client.

Staff could also see how VIG provided NG parents with confidence in addition to a positive perception of themselves. Staff felt that this contrasted with previous messages they might have received whereby they might have felt judged. VIG may therefore be particularly beneficial in a SEBD setting such as a NG, as it is identified that parents of children with behavioural difficulties are more likely to feel judged (Miller, 2003).

Finally, parents often came to the NG as part of the VIG intervention. After a few VIG sessions with parents, parents joined in with the group informally for a story, breakfast or activity. This allowed them to become part of the group and implicitly experience the NGs methods of working.

9.3 Strengths and Limitations of Study

Before considering how the findings of the study contribute to theory, practice and policy, it is essential to reflect upon the strengths and limitations of the study. The following section focuses on this area.

The interpretative design employed in this study allowed me to develop an in-depth and holistic insight into the process and effectiveness of the intervention. However, interpretative studies of this nature have limitations. Social reality cannot be separated from the meaning a person gives to it (Radnor, 1994). When employing coding in data analysis and interpretation, it is inevitable that a pre-determined set of themes are being sought. Although I endeavoured to 'bracket' my experiences, views and constructs, it must be considered that I sought to understand the social reality of the research aims through my subjective understanding (Smith, Flowers and Larkin, 2009).

In addition, as the contact principles are central to VIG, they were frequently discussed in consultation meetings. Although the emphasis was on participants' recognising contact principles in the videos, it is essential to identify that the edited clips were selected by me. This may have influenced the emergent themes and made them less inductive as intended.

As verbatim transcripts are conventionally used within IPA, it is also important to identify that notes from the consultation meetings were not verbatim transcripts. The notes summarise recorded conversations from the meetings as they were also intended to provide participants with a practical, succinct record of the completed work.

When interpreting the findings, it is important to consider that it is difficult to control variables that Cooper and Whitebread (2007) and Cooper and Tiknaz (2005) suggest impact upon the effectiveness of NG provision. The measured outcomes may therefore result from an interplay of factors and not necessarily the described intervention.

The observation, SSI and joint consultation schedules employed were specifically designed for this research project and are subsequently not easily comparable to other studies.

Although the SSIs allowed me to flexibly enquire about topics in depth, it is important to consider that pre-determined prompts existed. Despite emphasising that I was interested in their views and experiences, and that there were no right or wrong answers, pre-determined questions may have inadvertently influenced their responses and biased the results. Furthermore, understandings gained in SSIs need to be perceived as being meaningful but not as absolute truths.

A benefit of a small scale study of this nature is that I was able to develop a thorough understanding of the participants and their unique contexts. This optimises the qualitative aim of the study. However,

as a result, the findings may be difficult to generalise to other NGs and families. A disadvantage of a small sample size is that it limits quantitative data interpretation.

The research design had to allow for me to engage in a 'psychologist-in-action' role and allow participants to engage with the research process. As a result, staff and parents were aware of the study's aims. This knowledge may have consciously or sub-consciously, determined their views and subsequently influenced the findings.

Participants varied in the number of VIG cycles they accessed as a result of time factors. For example, for P2, caring responsibilities for her other children limited the amount of time she was available for the intervention. Similarly, for the school teacher involved, curriculum and school demands restricted her availability. These difficulties were compounded further by research deadlines and by the allocation of one specific research day every week. Nonetheless, it is important to identify that the number of VIG cycles was not standardised between participants. Due to the variation in engagement, it may be difficult to draw conclusions.

Furthermore, participants volunteered to take part and were interested in improving outcomes for their families, receiving additional professional support and developing consistency between settings. This may have influenced the results. A key area to further explore would be how to work with parents who are less interested in engaging pro-actively.

Finally, the outcomes of the research may have differed if I was a fully accredited VIG guider, rather than training in the intervention. In addition, my skills with the approach improved with time as did my skills as a researcher, both potentially affecting the measures obtained later in the research.

9.4 Future Directions

The research identified implications for service delivery within the local authority, in addition to implications for Educational Psychologists. These are discussed below. These are conceptualised in Figure 25 (pg 109) alongside points from the discussions in Paper 1 and Paper 2.

Figure 25: Conceptual Map showing how partnership working between NG and home could be enhanced
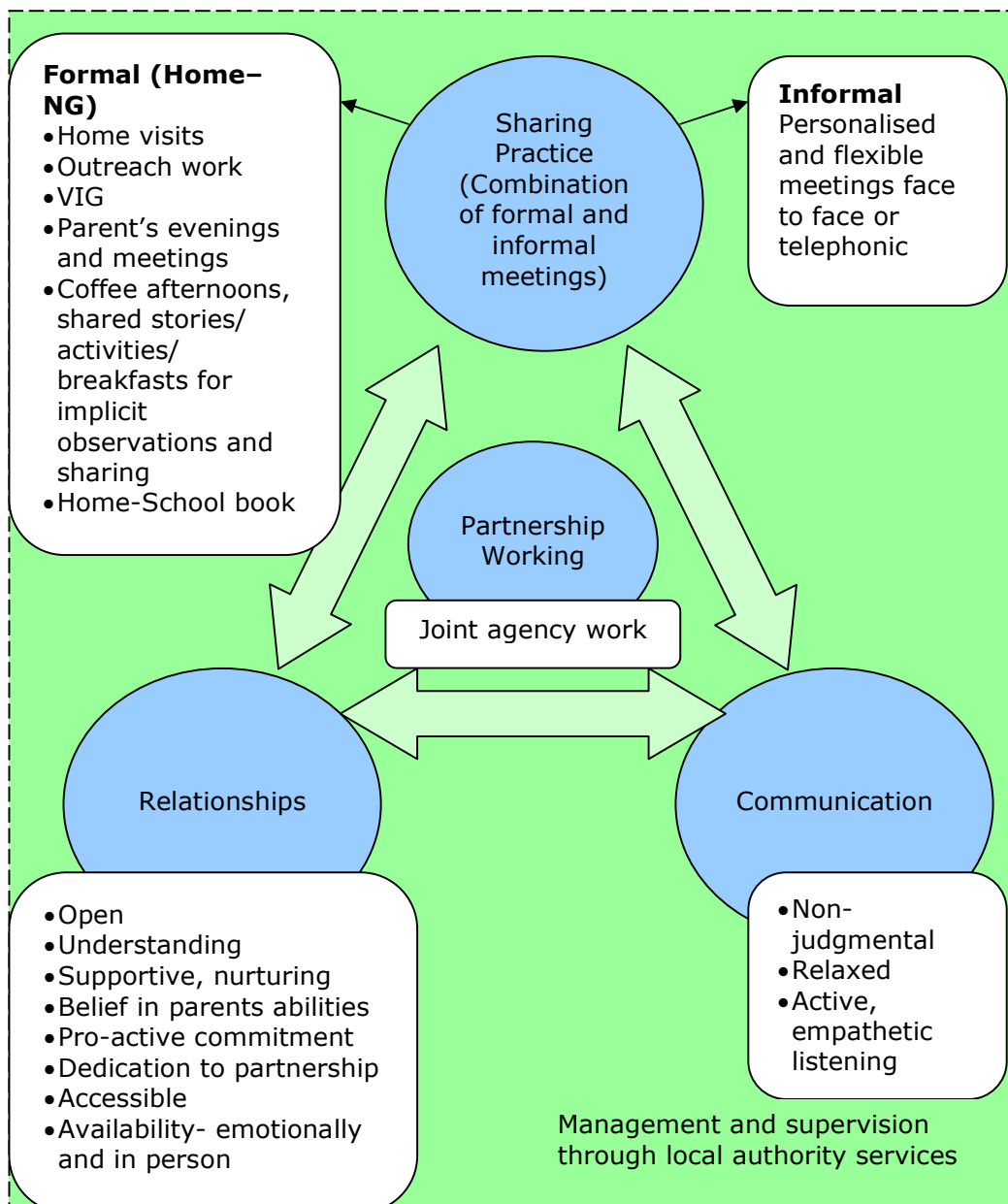
Further robust research into the effectiveness of partnership working and the use of VIG in this process is necessary so that valid and reliable conclusions can be drawn. Furthermore, it would be important to measure the long-term outcomes for children in a follow-up study.

As discussed, it was evident that more structured communication systems were in place for communication between the school and NG, in comparison to the home and NG. Although parents valued the informal methods of communication, some also expressed that they would appreciate more regular support in a structured form, for example, through parents evenings. NG staff supported this development, expressing how they would like to do outreach work with parents.

The research revealed some issues which require sensitive management when completing further work in the field. Children were anxious about partnerships between home, school and the NG. They subsequently need to be involved in the process and reassured that the aim of partnership working is to find solutions, and not to reveal areas they would prefer to hide.

As previously identified by Cooper and Tiknaz (2005), NG staff commented on potential challenges when working with some parents. They felt this was particularly salient when a child's behaviour may have resulted from difficulties in early life experiences. In Section 1 (pg 12), it was outlined how the rhetoric of blame and accountability could point to parents, how this could lead to an implicit power imbalance between parents and staff and how this deficit view of parents could serve as a barrier to collaborative working. The potential of VIG may be particularly powerful in these situations as it overtly links communication to emotional meanings in a positive, solution focused way. This may challenge staff perceptions about deficit models of parenting.

As with any intervention, it is important to consider obstacles that might need addressing. It is therefore worth acknowledging that the majority of the participants, particularly parents, were initially very self conscious about being videoed. As Biggs (1983) importantly identifies, video usage may endanger relationships by contributing to a power imbalance. Introducing the intervention sensitively needs to be considered carefully to ensure complete engagement.

A further foreseen challenge would be deciding on how to allocate time to the intervention when staff are already working to full capacity and further educational provisions seem unlikely in this barren economic climate. The NG has started to utilise support from the Parent Support Advisors to provide links between the home and NG. Further joined-up working from these agencies could be maximised to enable staff to develop targeted interventions such as VIG.

This research suggests that the effectiveness of the NG improved with the available support structures within the NG. This concurs with Sanders (2007). In addition, she comments on how the role of a Nurture Group Educational Psychologist facilitates the co-ordination of NG initiatives within the local authority, how they are instrumental in contributing towards strategic planning, how they provide ongoing support to NG staff and contribute to quality assurance. This research also demonstrates how tools like VIG can be successfully used to complement NG provision and improve outcomes. In addition, it would be worthwhile researching how Educational Psychologists can support NG staff in becoming trained with VIG and supervising the process. A flexible and committed approach to partnership working could be encouraged through the support of management of this local authority.

In terms of my own personal practice, VIG has been the most effective tool in facilitating positive outcomes. As well as using it in the context of the described study, I have also used it flexibly to

support teacher coaching in a whole class context and employed it to develop a teacher's understanding of the interactions of a non-verbal young person with severe and complex needs. However, fundamentally, VIG has impacted on all aspects of my work as it has enabled me to learn about the methods I employ to communicate, reflect upon these and to adapt my own interaction and consultation skills to ensure optimal outcomes. The research has therefore provided a valuable 'souvenir' or a 'reward' which will continue to shape my practice.

Chapter 10

References

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SECTION 4

Appendices

Appendices Contents

Appendix 1: Information Sheet for Parents and Carers

Research title: *From Nurture Group to Nurturing Community: Exploring Processes and Evaluating Outcomes when Nurturing Principles are Consistent between Home and School.*

Thank you for showing an interest in this project. Please read this information sheet carefully before deciding whether or not to participate. Although I would be very grateful if you decide to participate, there is no obligation for you to take part.

Frequently Asked Questions

What are the aims of the project?

This research forms part of my Doctorate in Educational, Child and Community Psychology at the University of Exeter. There are 2 aims for the project. Firstly, I aim to explore how to develop and maintain good working partnerships with parents. Secondly, I aim measure what the impact of this partnership working has for children's social and emotional development. The research will start in April 2009 and end in December 2009.

Why is this an important area of research?

Research shows that children who attend Nurture Groups make excellent progress in terms of their social and emotional development and their learning. Children who have social, emotional and behavioural difficulties are more likely to feel secure, happy and able to learn when there is consistency between their home and school environment. When people from the school and home work together as a team, research has shown that there are positive social, emotional and learning outcomes for children. This research is important as it will be used to inform how Nurture Groups can be most effective in the future.

What types of participants are needed?

The research will be based at … Nurture Group. I am hoping to find parents or carers for 6 children who are attending the group.

What will you need to do?

One of the research aims is to explore how to work well with parents. The following details what you will be asked to do should you agree to take part in the study:

- Meet once a month to talk about your child's progress and to set targets.
- Come into the Nurture Group at least once a month. When you visit you may be asked to complete some work or play with your child. If you are willing, this will be video recorded.
- Keep a record (for example, a diary) of your child's progress during their time at the Nurture Group.
- Meet with me before and after the research to discuss your experience of the project.

(If you have difficulties getting to the group, a home visit can be offered as an alternative).

What else will happen?

The second research aim of the research is to find out how partnership working with parents impacts the children's social and emotional development. In order to do this;

- We will compare measures of their social and emotional development before and after the project.
- I will compare their attendance at the Nurture Group before and after the project.
- I will observe your child once a month to see how they interact and engage in the group.
- I will find out what your child and staff think about the project.

What happens if I change my mind once the study has started?

You may withdraw from participation in the study at any time and without any disadvantage to yourself or your child. You may also request that any information collected from you be destroyed, deleted or not be used in as part of the study.

What information will be collected and what use will be made of it?

Results from the project may be published but any data included will in no way be linked to a specific participant. You are most welcome to request a copy of the results. The data collected will be securely stored and destroyed when it is no longer needed.

What if I have any questions?

If you have any questions about the research, either now or in the future, please feel free to contact
Roosje Egbers on 01872 323059

This project has been reviewed and approved by the Chair of the Schools Ethics Committee.

Appendix 1 continued...

Consent Form

Research title: *From Nurture Group to Nurturing Community: Exploring Processes and Evaluating Outcomes when Nurturing Principles are Consistent between Home and School.*

I have read the information sheet concerning the project and understand what it is about. All my questions have been answered to my satisfaction. I understand that I am free to request further information at any stage.

I know that:-

1. My participation in the project is entirely voluntary.

2. I am free to withdraw at the study at any time without any disadvantage.

3. That data will be securely stored and destroyed when it is no longer needed.

4. The results of the project may be published but my anonymity will be preserved.

☐ Please tick the box if you give consent for you and your child to be videoed (videos will only be viewed by people involved in the research).

I agree to take part in this project.

……………………………………. (signature of parent/ carer) …………………… (date)
……………………………………. (name)
……………………………………..… (child's name)

If you have any questions about the research, either now or in the future, please feel free to contact **Roosje Egbers on 01872 323059**

This project has been reviewed and approved by the Chair of the Schools Ethics Committee.

Appendix 2: Child Semi- Structured Interview Schedule

Introduction

Thank you for your time in taking part in this discussion. My name is Roosje and I am looking at how NG staff and parents can share their ideas and work well together. I am particularly interested in how this happens in … Nurture Group. I am going to ask questions over the next 30- 45 minutes. My aim is to get a true picture of how you feel and how things work in the NG. If it is ok with you, I would like to record our discussion so that I can listen to it again. The information I collect will not have your names on it. Please feel free to ask me any questions and thanks again for your help.

1. How long have you been coming to the NG?
2. Can you tell me about why you started coming to the group?
3. How did you feel inside when you found out you were coming to the group?
4. What was it like when you actually started here?
5. What do you think a NG is about?
6. How would you describe Nurture Groups to a friend who didn't know what they were?
7. Can you explain how you feel inside when you come to the Nurture Group?
8. Can you tell me about problems with coming to the Nurture Group?
9. How do you think the Nurture Group has helped you (e.g. attainment at school, attendance, social and emotional outcomes)?
10. Are there any reasons why you feel that this has been really helpful?
11. If you could change something, what would you change about the Nurture Group?
12. Can you tell me about any things in particular that you have liked about the Nurture Group?
13. Can you tell me about any things in particular that you have disliked about the Nurture Group?
14. Tell me about your teachers.
15. Do your parents ever come into the Nurture Group?
    If yes to Q14:
    -For what reasons do they come?
16. Do you talk to your parents and teachers about how you are doing?
17. Do your parents and teachers from the Nurture Group meet to talk about how you are doing?
18. How do/ would you feel about them talking about how you are doing?
19. Can you tell me why you think they/ it is important for them to meet?

20. Has anything come out of these meetings (e.g. anything improved or changed)?
21. If you are unhappy about something at the group, how do you let people know? Is there anyone that you feel you are able to talk to?
22. Have there been any changes at home since you have started coming to the NG?
23. If so, can you describe how things have changed?
24. How do you feel about going back to your school?
25. Do you think there will be any changes for you?
    If yes to Q25:
    -What kind of changes do you think there may be (attainment, social and emotional outcomes, attendance)?
26. Is there anything else that you would like to tell me?

Debrief for Semi Structures Interviews
Thank you very much for taking part. I value what you have said and will use this, along with information I will collect over the next 8 months to write my project. I have enjoyed working with you.

Appendix 3: Joint Consultation Planning and Intervention Meeting

Date:		Length of time at NG:	
Pupil:	C	Chron. Age:	
Present at meeting:			
Background:			
Expected Outcomes from intervention (for young person, NG staff and parents/ carers):			
What is working well for the young person and family at home and at school?			

Are they any current concerns for the young person and family at home or at school?

Level of concern

Least concerned ←——————————————→ Most concerned

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

(Discuss: Reasons why concern is not a ? (e.g. what is going well?)
What would be a realistic number to move to? What would this look like?)

Actions from discussion:	Completed by who:	Completed by date:
Next meeting:		

CC: Parents/ carers, NG staff, child, RE

Appendix 4: Example of completed Joint Consultation Review Meeting Record

Joint Consultation Review Meeting			
Date (and meeting no.):	25.11.09 Review mtg 4	Length of time at NG:	6 months
Pupil:	C1	Chron. Age:	10yrs
Present at meeting: P1, Roosje Rautenbach, Research Assistant			

Video recordings:

What strengths were observed?
- There was lots of laughing and lots of eye contact.
- There is good body language between you (e.g. you are both facing each other).
- C1 was initiating conversation/ games with you. You also lead some of the conversations.
- There was lots of turn taking (both of you were taking shorter and some longer turns).
- You were making suggestions and even guiding C1 to develop his ideas.
- C1 was being affectionate towards you.
- The video was very long! This shows how much better you are at staying engaged in an interaction.

What was the emotional response for those involved?
- C1 was very excited by the games that you played and stayed engaged for about 40 minutes.
- You both enjoyed each other's company. C1 seemed to be very comfortable.
- You both felt respected as you both listened and responded to each other's ideas.

How can we use what was learnt from this?
- That it is important to let both people lead in an interaction and that it is important to have a good balance of turns each person takes.

What has been working well for the young person and family (at home and at school) since the last meeting (use diary as a prompt)?

- C1 is becoming more and more affectionate with you.
- You had quite a good half term filled with activities.
- C1 is getting better at maintaining eye contact, laughing and giggling with you outside of the Nurture Group.
- C1 expressed how he was feeling (e.g. that he was so excited about going to watch New Moon at the cinema).
- You feel more relaxed when you are communicating this him.
- You are able to trust C1 more (e.g. when he is with his niece). He seems to be responding well to this extra responsibility.

What has been working well for the young person and family (at home and at school) since the last meeting (use diary as a prompt)? (continued from previous page…)

- You are both enjoying some special times to talk together (e.g. when you are on the way to and from the Nurture Group).
- C1 is listening to you at times (e.g. he told his friends that he wasn't allowed to go out and he came back 10 minutes early).
- You are both feeling more respected.
- Disagreements that you have had with C1 have been a lot calmer and less stressful. He is starting to accept consequences.
- You said that you felt that you were explaining things better to C1 when you had a disagreement and that C1 is listening to you more effectively.
- During a recent shopping trip to Argos when C1 was insistent on having a range of toys, you made it clear to him that he was not allowed any of them. You stood your ground throughout his tantrum and eventually he calmed down without you having to buy what he wanted.
- He has been to the blue room at the Nurture Group but he is better at calming himself down. Outside of the Nurture Group he is also better at calming himself down. You also use humour sensitively, use tactical ignoring and give him some space. This has meant that you feel more relaxed when you are out as you feel that you have the ability to manage his behaviour.

Are they any current concerns for the young person and family at home or at school?

- C1 is still smoking and playing with fire.
- There are still times when C1 leaves the house but he now usually comes back.
- There are still some difficulties at home (e.g. not coming home, following his own agenda).
- Other children target C1 to wind up.
- You would like C1 to choose to do things with you.

Level of concern
     1   2   3   4   5   **6**   **7**   8   9   10
Least concerned ⟵————————⟶ Most concerned
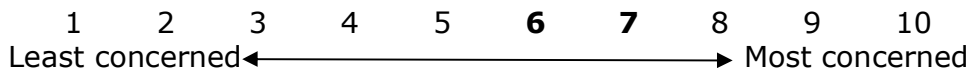
At the beginning you identified that you would like to get to a 4 or a 5. At a 4 or a 5, you feel that he would be listening and respecting you more. In addition, he would do what you asked him to do and there would be a reduction in his lying. These were the steps that we identified that would help you work towards this goal:

Actions from discussion:	Completed by who:	Completed by date:
Complete another video session and revisit the previous videos to identify progress.	Roosje and P1	Next week. Feedback videos before Christmas.
Next meeting:	2nd December at 9am	

CC: Parents/ carers, NG staff, child, RE

Appendix 5: Extracts from Reflective Diary

6th October 2009

I spoke with P4 again today on the phone. I have not been able to stop thinking about it as she was very emotional and was clearly crying during our conversation. She even told me that she was considering dropping C4 off to social services or the hospital so that she could receive the help that she needed. Initially I phoned to try and find out if I could arrange a meeting with her. Straight away she replied that she was so very busy at the moment and that she was "up to here with it all". I was disappointed at first that once again my interventions were not running as smoothly as I wanted them to be. Then she seemed to open up to me a bit and I realised that this might be the only opportunity that I may have to keep her involved in the research. I decided that the best course of action would be for her to offload her concerns and for me to be supportive and to empathise with her. While doing this I tried to explore some avenues for solutions but I was shocked with the extremity of the situation. Once again, I have learnt that it is important to not prioritise my agenda but to run with what they need at the time. At the end of the conversation we decided that she was going to speak to her consultant and then get back to me through NG1 about how I can support her. I'm feeling worried that I'll lose her as a participant but can understand that my research is the last thing on her mind while she is in the midst of a very messy family life. Once again, the importance of developing our relationship has reappeared.

7th October

A great part of my morning has been spent working on the above case. I have spoken to the school EP who spoke to the head at the schools. I have also now spoken to the NG teacher to clarify our stories. She is now going to speak to the parent and refer to social services if necessary. The school EP warned me about getting too involved with this case as she was worried that the parent would befriend me… Also realising how it can be beneficial to do meetings over the phone.

20th October

Was feeling slightly frustrated last week as P2 had organised something else when she was supposed to be coming in to meet me which put my VIG back by 1 week for her. Also P1 was not feeling well so I also did not manage to video their interaction. Pleased however that I managed to contact C3's school and arrange to go there tomorrow. The head seemed to be very pleased for my involvement, will be interested to see how my work there will evolve. I became worried this week when I had difficulties getting hold of P2, tried texting her but she did not reply for a day, eventually she replied via text. Interesting how the approach to all the parents is

very individual. Also, spoke to supervisor who mentioned that I do not need to worry too much about my participant numbers.

10th November 2009

I find that there is a really fine line between sounding like I am hassling parents and being organised! My feelings are interesting though… if I am honest, one of the reasons I am so committed to the parents is because it is my research. Maybe we need to think a bit better about supporting professionals when they are struggling to maintain contact with families. I seem to take it very personally but it may not be this case. Maybe I will try and be more explicit about how it is important to finish the programme. On a more positive note, the work in the school with P3 is going a bit better. I completed the VIG last week there and surprised myself that the video was actually quite good. It is certainly a lot easier to pin down professionals. I feel that I need to phone that parent and explain a bit of the work that I have been doing there.

I was disappointed with the VIG S&S for the feedback with P2, I spoke too much, took too longer turns and needed to do more checking out rather than saying so many statements. I know that I felt nervous but this has given me a bit of a knock.

I'm also keen to start a parent's group with the parents but not quite sure how I could work this. I need to do this alongside the NG teacher.

11th November 2009

Finally some progress! I went to the NG today and videoed parent 2 and child (although the video was not particularly good!) and parent 1. I shouldn't have taken it personally that I couldn't contact them, P2 had lost her phone behind the sofa and P1 was still set to meet me. She seemed to be particularly positive and started to recognise the small positive steps. When I spoke to NG1 about her, she said that she had spoken very positively about VIG to the ASD advisory teacher and NG1 in a meeting explaining that it had made a big difference. She also engaged in a very long interaction with C1 for approximately 37minutes! Such an improvement since the beginning. It would be interesting to analyse the length of the interactions that they have together at the end. I also spoke to NG1 about organising a parents afternoon and have set a date for this. P3 and P4 sounded very keen on this idea.

I also phoned P4 again and suggested that we just have a chat, instead of VIG, she sounded very relieved to hear this and was quite excited about the prospect of meeting up. I have also set a date for this. She said that she would like help on parenting strategies and how to restrain her without getting hurt herself. I need to clarify how I intend to work as I do not want to conform to this 'expert' position. Also spoke to P3 who thanked me for the time I had put into C3.

Appendix 6: Ethical Considerations

Informed Consent:
Verbal consent was obtained from both the head teacher of the school where the NG was based and also from the primary school where I worked jointly with the class teacher. Both written and verbal consent was obtained from the NG staff and from the class teacher in the other participating primary school. Written and verbal consent was also gained from the parents of the four pupils involved in the study. It was agreed that verbal consent from the pupils would be sought via the parents who would also provide relevant information about the research.

Throughout the research, I checked that participants were still willing to participate. I reminded them that they had the right to withdraw from the research at any given time and that any data related to them would be destroyed. In my initial meetings with parents and NG staff, I made them aware of how the research findings would be used.

Respect:
The views of children, parents and teachers were paramount in this study. I did my best to ensure that these were heard, respected and represented. I also endeavored to respect individual, cultural and role differences, including those involving age, disability, education, ethnicity, gender, language, national origin, race, religion, sexual orientation, marital or family status and socio-economic status.

Confidentiality:
Records of the data collected (including audio or video recordings) were stored in a securely locked and safe place. Information gathered was coded to ensure that participant's identification was kept anonymous. Collected information will be destroyed when it is no longer required. Participants were informed about who had access to information generated from the study and what the purpose of this was.

Safe guarding:
It was made clear to participants that in the exceptional event that there is evidence to raise serious concern about the safety of participants or other people, that this information would need to be passed on to relevant bodies in accordance with the Child Protection Act. During the study, my concerns about the safety of one of the participants and her family members were raised. The BPS Code of Conduct therefore came into place and the information was passed onto the appropriate services.

Appendix 7: Example of IPA Analysis Process

Post SSI with P1

Original Transcript	Exploratory Comments (descriptive, linguistic, conceptual)	Emergent theme
RR) Can you tell me what your understanding is of Nurture Groups? P1) Changed greatly to what I originally thought they were. It's really about getting into his head and really finding out how he feels. I suppose I thought they'd help with his anger. I thought that would definitely but they help him think about why he does things and the consequences of that. And also calming himself down. It's a big step for him. I think they've been brilliant, every school should have one. He is realising why he is angry.	Perception has changed with experience. Views them as focusing on emotional development. Suggests that anger management would be approached. Explains that NG has encouraged him to think about his behaviours. Does this affect his anger? NG provision focuses on regulation of emotions. Feels that this is area for development for him. Praise for NG and wishes there could be more. He understands the emotions behind his anger.	NG ethos-emotional development Difference to mainstream school
RR) How did you feel when you first talked about your child going to a NG? P1) I was relieved that he had somewhere to come and that I didn't have to have him at home. I did think that they could help him get back into mainstream but that is not something I want or a possibility. RR) Did you think that it would work? P1) I did have a few reservations because I didn't know what it was, like a new age things.	Relieved with the option of this educational provision. What was she worried about having him at home? Felt that it would provide access to mainstream school. Has past experience of education been so negative or has see now experienced a more appropriate provision? Hadn't previously heard of NG. Held few pre-conceptions.	Difference to mainstream school
RR) How do you feel now that he has started with the group?		

Original Transcript	Exploratory Comments (descriptive, linguistic, conceptual)	Emergent theme
P1) It has been fantastic. I can't sing its praises enough. NG1 is brilliant, everyone has been brilliant. They are just fantastic with him. He has formed such strong relationships with them, particularly with NG1 which is a bit of a worry because when he does leave it will be like bereavement for him! RR) Do you think he can now make more attachments with people?	Pleased with NG. Praise specifically directed at NG staff. Emphasis on 'brilliant'. Acknowledgement of the need to form good relationships. Concern about what will happen after NG provision as he has formed such a strong attachment with NG1.	Staff Approach Emotional development (as an outcome)
P1) Yes he realises that he can do. NG1 has never judged him or belittle him. That's the kind of people that he needs to be surrounded with. I would love to live with her; her house must be very calm! She makes you feel very comfortable.	Emotional development of C1. Showing understanding of approach that he responds to. Has he had this approach before within education? Further praise for NG1; she specifies how NG1 makes her feel very comfortable.	Emotional development (as an outcome) Staff approach.
RR) Is there anything about the group that you feel has been particularly successful? P1) For C1, getting in touch with himself and learning that he is not the only one on the planet and that we want to help him, that people are trying to help him. Even if it seems like we are against him, he is realising it now.	Success associated with C1 becoming more aware of others & less egocentric. Use of we/ people implies joint working. Is it important for him to realise others are paying him attention and understanding him?	Emotional and social development (as outcomes) Collaborating
RR) Is there anything about the group that you feel could be improved? P1) No, nothing.	Satisfied with NG provision	
RR) Are there any things in particular that you have liked about the Nurture Group? P1) All the staff. And how	More direct praise for the staff and their ability to	Staff approach

Original Transcript	Exploratory Comments (descriptive, linguistic, conceptual)	Emergent theme
they are all on the same level with C1 and how they help him to do his work, and there is always a consequence if he doesn't do something. They are consistent with that. They are on the same level. RR) Has that been useful for you to see?	work appropriately with C1. Reflection on NG approach in terms of support and consistency. Further identification that staff approach is suitable for pupils and how they are attuned to pupils.	Staff input Consistency and security
P1) Yes, I've always been pretty consistent at home, umm, but I'm more realistic now as what I put as a guideline. He gets rewarded or grounded, because that is what he hates most! Going out means so much for him.	Agrees but feels she has been consistent. 'Umm' indicates she is thinking. Acknowledgement of a change in her parenting and how she is now more realistic. Demonstrates an understanding of how to manage him.	Sharing practice Routines at home (as an outcome)
RR) Are there any things in particular that you have disliked about the Nurture Group? P1) No. Oh, the cups! They are horrible.	This was said in jest- indicates how she is happy with the more important aspects of the provision.	
RR) How would you describe the teachers at the schools? P1) They are just wonderful. They are friendly, they are compassionate. If I am upset, they know! I have had trouble getting him in, they have to physically remove him and they know how it makes me feel and just tell me to go. You get a phone call later to let you know that things are ok.	More praise for staff. Identifies their approach as a positive feature. Explains that they support her emotionally too. Provided an example of them understanding, empathising and reassuring her. Example of them using telephonic communication.	Staff approach Understanding Sharing
RR) Have you had many opportunities to work with staff from the NG? P1) Not really. If I did come in, that would really put C1 off. It did this morning, it put him off and he became cocky. In the afternoons	Initially understands this question as working in the group. Does she see herself as distracting him? Or does she feel that he doesn't	

Original Transcript	Exploratory Comments (descriptive, linguistic, conceptual)	Emergent theme
when he does not work he loves that, he loves showing me stuff that they have been doing and what others have done. That is good, normally he hasn't been interested in what they have been doing. It took him ages to learn their names! Because he didn't care and now he has some friends which he didn't have before.

RR) Who do you see in the morning? | want her there? Feels that she can visit when he is not doing academic work. Implies that he is more accommodating to her then. Suggests that he is now interested in the other pupils. Contrasts to before. Explains that he has formed friendships at the group.

Reframing of question to see who she communicates with rather than 'work with'. | Attitude (as an outcome)

Social Development (as an outcome) |
| P1) Anyone, who will take him. We can always have a chat then or afterwards. Or if I need to have a chat I can speak to NG1, I can just phone her or she can phone me. She is the lead on the TAC meetings too so we have a lot to discuss too about the future. We are on the same wavelength there, we both want the same thing. They are all fantastic. One day he forgot something and NG2 came all the way in her car to drop it off!

RR) Does it have an impact on C1, when you meet and talk to the staff? | Response describes how she is happy to speak to any staff and that this can be done at any time through a range of methods. Reciprocal phone contact imply communication is 2 way. Looking and planning ahead to the future. Shares a vision with NG1 and views this shared vision positively. Conversation is directed again towards praising the staff. Recognition that staff go beyond the call of duty to keep pupils happy. | Accessibility

Formality Availability

Sharing

Collaborating

Dedication of staff |
| P1) I think that he likes it that everyone is interested in him. They are helping and he likes that it spills into home sometimes. | Recognition that NG staff are helping and that he likes the support. Acknowledgment that things are changing at home. | Routines at home (as an outcome) |
| RR) Have there been any difficulties when working with staff?

P1) No. | Very clear that she has no difficulties working with staff. | |
| RR) How often are you able to come into the NG? | | |

Original Transcript	Exploratory Comments (descriptive, linguistic, conceptual)	Emergent theme
P1) Hardly ever, only when I see you. If they have a coffee morning I will always come. It's great to support and show the kids that you're interested. RR) What did you think of that?	Only comes to NG for specific events or when invited. Shows willingness to come. Feels that children appreciate their parents being interested.	Formaility
P1) I thought that it was good, it was nice to meet other parents, although I only met 2 other parents and 1 of the girls told me about the family fund which I have now applied for. It's a good way of swapping information. RR) Do you think that it is something that should be done more often?	Explains how she valued meeting other parents. 'Although' implies that she would have liked to meet more? A benefit was sharing information with other parents.	Sharing Formaility
P1) Yes, if you can get the parents to come. Some work and some… they just probably don't want to. I think it is a very good idea for parents to meet. It's a really good idea. It shows the kids that you are interested and that you care. They want to see your face there to see what you're doing.	Recognition that parental involvement in the NG setting can be difficult for either pragmatic reasons or through lack of willingness. Emphasis on 'good' stresses her view on it being a good idea. Feels that children value parental involvement.	
RR) How would you describe your relationship with the staff? P1) Brilliant.	Views relationship very positively.	
RR) Do you feel that you have real opportunities to influence and contribute to your child's education? P1) Um, I don't know really. Probably not really. RR) How did the blue book	'Um' implies thinking. Perhaps views NG as not emphasising education. Feels like she does not contribute to education. I was interested to find out	

Original Transcript	Exploratory Comments (descriptive, linguistic, conceptual)	Emergent theme
work?	if she was contributing through other methods.	
P1) We lost ours! But now we verbally pass on messages. Like if he has had a particularly bad morning and it's spilling over, they should know and vice versa. It comes better verbally and sometimes I could write a book about it. Verbally I can include humour and they can read things in my voice. Or if I can't talk in front of C1, I'll phone later and speak to NG1.	Explained that she was not using the blue book. Sees the importance of 2 way communication. She prefers to communicate verbally as she feels she has a lot to say and that they are able to gain a clearer understanding through non-verbal messages. Understands that at times it is inappropriate for her child to listen (blue book may not be good method as he could read the messages).	Formality Sharing Formality
RR) Do you feel that your opinions have been valued by staff at the group? P1) Definitely. RR) Has that always happened? P1) More with the NG. Staff at the schools didn't have time and just thought that he was a naughty boy. He was always sitting out the office and not learning anything.	Feels her opinions are valued by staff. Recognition that NG staff value her opinions more in comparison to schools. She suggests he has been misunderstood- perhaps this was because staff were not listening to her views?	 Respect Difference to mainstream
RR) How do you think that the Nurture Group has been successful? P1) What he does here needs to carry on; he needs his therapy to always carry on.	Expresses the value of the NG and its practices. Views his emotional needs as ongoing.	 Emotional needs (as NG ethos)
RR) Do you feel that you have been able to make any changes at home as a result of the NG? P1) He is definitely a lot calmer and I am a lot calmer which makes the house a lot calmer. We both have our moments but	Recognition of C1 and herself being calmer. Describes reciprocal relationship between the 2 of them. Although things	Attitudes (as an outcome) Behaviour (as

Original Transcript	Exploratory Comments (descriptive, linguistic, conceptual)	Emergent theme
it is a lot better, he is not throwing stuff or breaking stuff. He takes stuff apart to see how things work.	are not perfect there is a difference in his behaviour. 'We' also implies that she has got better.	an outcome)
RR) So there is a change in his behaviour?		
P1) Oh yes there is.	Clear change in his behaviour.	
RR) and socially?		
P1) Um, a little bit, he finds that tough. He'll have to learn to cope with a room full of people. It takes him a long, long time to make friends.	Thinks more about this (umm). Explains that this is more of a challenge but that there has been some improvement.	Social development (as an outcome)
RR) What do you think your child would say about NG?		
P1) That he never wants to leave. He feels very comfortable now, there are hardly any mornings now when he says that he doesn't want to go, even if he knows that there is some work that he has to catch up on. He could get himself stuck into a rut but he has learnt not to get himself into that corner. Sometimes I can see it happening but I don't know how to help him to stop it. It's a battle of wills. But he is getting up and being excited about coming.	Can see from his perspective; explains that he feels comfortable and likes it. Implies that previously there had been difficulty getting him to go to school. Faces consequences now and management of his emotions has improved. Identifies that there are still some difficulties when helping him to manage his emotions. Recognition of improvement. Does she need more practical support?	Emotional (as an outcome) Attendance (as an outcome) Attitude (as an outcome)
RR) Has he been like that about a school before?		
P1) Oh no, we have had terrible problems getting him in. He wants to bring things in and share which he never want to do before.	Confirms previous difficulties. His attitude to education has improved; he now wants to share with others.	Difference to mainstream Social development (as an outcome)
RR) How would you describe your experience of VIG?		
P1) That has been such an	Realisation of progress	

Original Transcript	Exploratory Comments (descriptive, linguistic, conceptual)	Emergent theme
eye opener for me. Watching them all today and seeing where we were and where we are today is amazing in a relatively short space of time really. How all this has come together and is helping him so much, and me, I have had to change my whole way of parenting. Like with the eye contact and waiting for him to answer me and trying to get conversations going again. Sometimes now he will start them and want to talk to me about something which is great! Not that I always want to know how fast a car can go! But I have to sit there and look really interested, he goes on and on!! It's not often that he walks out of the room now. He wants to know the answer but can get inpatient. He'll ask me a question and I don't know so we'll look it up on the internet. We'll sit together for ages. There is a lot more going on between the 2 of us now which. I felt that I was drowning, really felt that I was drowning and it is not that anymore; we're actually swimming together, yeh. It is brilliant, I have got my little boy back. This works, it really does work, everything around C1. I just don't want it to stop!	made in the time period. Recognition of success of all support in helping him. Adds that it has helped her too and that she has changed her practice. 'Me' implies both have changed. Specifies exactly what has changed as a result of VIG. Understands the impact that the intervention has had on him; he now starts conversations and shows willingness to talk to her and stay with her. Jokes how he sometimes talks about things that don't interest her but that despite this she receives his initiations. Explains that they spend a lot of time finding answers jointly on the internet and how his behaviour management has improved. Describes how they spend more time together now and how their relationship has grown. Uses metaphor to describe how her previous desperation (and isolation?) contrasts with her current happiness and connection with C1. 'My little boy back' suggests how distant she felt from him. It also implies that he has started to behave more age appropriately (as he was becoming less influences by older peers). Emphasis on 'this works, really does work' highlights the success of the program. Shares eagerness for it to continue.	Change is parenting Social development (as an outcome) Behaviour (as an outcome) Emotional Development (as an outcome)

Appendix 8: NVIVO Analysis SSIs
Super-ordinate Theme: Relationships

Support
<Internals\Post SSI NG1> - § 2 references coded [21.32% Coverage]

Reference 1 - 12.04% Coverage

I think that the big shift is that we can't just work in isolation with the children and the role is supporting the families particularly with the group of children that we have at the moment. That role has increased more and more and the families are relying more on us now than they were before. It's not just the children that you (me) have worked with, it's all of them. There has been a big shift in our role. It's hard at the moment. Q- What has caused that change then do you think? I think better relationships with the families, and the families that we are working with are more willing to engage. With C and K, and all of them really! There is a real need for support for the family. I can't see anywhere to point that other than us. It doesn't feel right to point that anywhere else; it does need to fit with us. We are struggling time wise to support that. Q- What do you think a solution to that would be? I'm hoping that the 2 PSA's that have just been appointed, which we did have before but left… I'm hoping that they can work with them I supporting the children. With 2 children the 2 PSA's have been brilliant in providing a link between the family and the NG. That may be a solution if we can involve them.

Reference 2 - 9.29% Coverage

5) In what ways do you feel the Nurture Group is successful? Working with the parents, with C1 and C4's parents. We've been liaising and kept things going and kept them more buoyant about the situation. We have kept C1 in mainstream and stopped the situation deteriorating anymore. And definitely with C1 there has been a huge difference in the relationship that he has with his mum and rebuilding that relationship has been really powerful. Keeping C4's family going and building the confidence in the parents to deal with their children. Also in C8's family. Q- has this then had an impact on the children? Yes completely, they are more settled at home and improvement in the relationships at home and the parents are empowered that they have the belief that there is something that they can do and that they aren't bad parents, they maybe have not been doing it the right way but there are lots of things that they are doing right and then that there are other things that they can do right as well.

<Internals\Post SSI NG2> - § 2 references coded [9.35% Coverage]

Reference 1 - 4.12% Coverage

10) Are there any things in particular that you like about the Nurture Group?
The children, like when C4 said to me, that she wanted to talk to me. She has approached me, we have a strong relationship, she stands with me if she is anxious or worried. That is really good when you help them. And then you have a little sparkle moment when they have overcome something.

Reference 2 - 5.23% Coverage

22) Do you feel parents have been able to make any changes at home as a result of their child coming to the NG?
Yes, the ones that have been talking to us on a 1-1 have had a lot of progress at home as well. Like they have changed the routine slightly at home to suit them and it is acceptance. Sometimes they are over keen and take away too many tokens. That can be the only time it doesn't work. We have to fit around them as well. We need to do it around their needs too. I think that sometimes that the parents can have more of the NG needs than the children. They need to be nurtured more because they can't give what they didn't receive. Q-So do you see your role as nurturing the parents as well? I think they do. One parent used to come in more and more, she needed it, until social services came in. It's a generation of children bringing up children. It was them that was let down in the first place not them letting their children down.

<Internals\Post SSI P1> - § 1 reference coded [3.88% Coverage]

Reference 1 - 3.88% Coverage

8) How would you describe the teachers at the NG?
They are just wonderful. They are friendly, they are compassionate. If I am upset, they know! I have had trouble getting him in, they have to physically remove him and they know how it makes me feel and just tell me to go. You get a phone call later to let you know that things are ok.

<Internals\Post SSI P2> - § 1 reference coded [7.79% Coverage]

Reference 1 - 7.79% Coverage

8) How would you describe the teachers at the NG?
They are really supportive, even to the parents. I mean if I'm upset in the morning, they'll take time out to listen to talk about it and then get the children involved and tell C2 "what do you think you're doing wrong?" and then "what do you think you're doing wrong?" and everyone gets their say. I don't think there would ever be a problem because everyone speaks up. It's all dealt with and no-one gets hurt like in other schools. I think they need a few more teachers so that

they have more support.

<u><Internals\Post SSI P4></u> - § 1 reference coded [8.85% Coverage]

Reference 1 - 8.85% Coverage

15) How would you describe your relationship with the staff?
They are brilliant, such good support. They are the only support in a big ocean! They are the ONLY support we have had. NG1 and NG2 are amazing, they are the most professional people and they empathise so well.

<u><Internals\Pre SSI P1></u> - § 3 references coded [14.90% Coverage]

Reference 1 - 5.29% Coverage

If so, can you tell me about why that may have gone so well?
He is quite young and understands his difficulties. He knows how hard it is for me. He'll phone me back if I call him. He listens to me and believes me.

Reference 2 - 4.39% Coverage

How would you describe your relationship with the staff?
Very good, the whole school are very good, they are all fantastic! I have had more support here than at any other school.

Reference 3 - 5.22% Coverage

Do you feel that you have real opportunities to influence and contribute to your child's education?
Not at the moment. Not the right time at the moment, I would support them with anything that they want me to do.

<u><Internals\Pre SSI with NG1></u> - § 1 reference coded [2.18% Coverage]

Reference 1 - 2.18% Coverage

How would you describe the relationships that you have with parents?
Non- threatening, they see us as approachable and supportive.

<u><Internals\Pre SSI with NG2></u> - § 1 reference coded [1.74% Coverage]

Reference 1 - 1.74% Coverage

If so, can you tell me about why that may have gone so well?
She comes in and is willing to work with us.

Trust

<u>Internals\Post SSI NG1</u> - § 1 reference coded [1.79% Coverage]

Reference 1 - 1.79% Coverage
21) How would you describe the relationships that you have with parents?
Good, they trust us. They don't feel judged and are able to share things with us. They have confidence in us.

<u>Internals\Post SSI NG2</u> - § 1 reference coded [4.12% Coverage]

Reference 1 - 4.12% Coverage
10) Are there any things in particular that you like about the Nurture Group?
The children, like when C4 said to me, that she wanted to talk to me. She has approached me, we have a strong relationship, she stands with me if she is anxious or worried. That is really good when you help them. And then you have a little sparkle moment when they have overcome something.

<u>Internals\Pre SSI P3</u> - § 1 reference coded [3.71% Coverage]

Reference 1 - 3.71% Coverage

How would you describe your relationship with the staff?
Open, I'm not guarded at all. I could be honest and tell her what I really think of the education system.

Understanding

<u>Internals\Post SSI NG1</u> - § 3 references coded [21.65% Coverage]

Reference 1 - 9.29% Coverage

5) In what ways do you feel the Nurture Group is successful
…Q- What about learning progress and social and emotional outcomes? Yeah, definitely, just the acknowledgement for C11 that he worries about things and he's telling us he's worried and we can see he's worried. It's been working with the school for him because he was never a problem at home, just the school, that has been a really big change for him because someone acknowledging that your worried and we can see you're worried, that's been a big change for him. What else, in terms of learning for C3, naming it for him again and saying what we think the problem is. We're removed a barrier for him there and he's making progress.

Reference 2 - 5.80% Coverage

What do you think contributes to the success of the Nurture Group? It's the relationship we have developed with the child and then the parents. Ultimately everything we do hinges on that and if we don't get that relationship right then we are not able to change anything. So it's experiencing the positive relationship I'd say. Q- What would your advice be to someone else about getting the relationship right? It's about containment of the child, validating their experience and saying "it's absolutely ok to feel that and any feeling is right and it's right to feel that". And attunement and saying, "you know we can see how it is for you." Having that being met and getting it right and the child feeling safe and understood and contained are the 3 most important things that we do to develop a relationship with the child. Understanding, empathising and containing them physically and emotionally and keeping them safe.

Reference 3 - 6.57% Coverage
10) Are there any things in particular that you like about the Nurture Group?
Just, when you get it right. Most of the time, you are working on a hunch really about what it might that that child has experienced and what they need. And when you breakthrough and get it right and you can see from their reaction that you get it right. Then it's the recognition on their face that this person has heard me and understood me and gets it and I feel better. That look on the child's face is just brilliant. Or when they reach out to you for the first time for physical comfort or in an affectionate way; for a child has always been quite distant it is very powerful as well.

<Internals\Post SSI NG2> - § 3 references coded [16.78% Coverage]

Reference 1 - 7.83% Coverage

11. How do you share your knowledge with other teachers in school/ outside of school?
We have got different work styles (the TA's), I listen and try and change that way rather than tell them. That is the key for me. The schools I have worked have been brilliant. Sometimes they ask my advice. The strict boundaries are very clear in C9's school, sometimes we are more flexible here. Q- do you think they model what they do from you? Yes I think so, she sees how I communicate with C4 and I might explain that maybe she is upset about something (and that is why she is behaving in such a way. I have learnt things off them as well. The way I talk and what I do. It's about the emotional literacy. In C9's school the teacher will ask me for my advice. It's drip drip. It's about teaching the teachers. One of the teachers wanted me to do the photocopying for her. I can't be her teaching assistant I'm there to be with him.

I just let them watch me. I never inflict it on them. We need to respect them. I like to build a relationship with them first and see what kind of a teacher they are.

Reference 2 - 3.73% Coverage

21) How would you describe the relationships that you have with parents?
Really good. You've got to throw out all of your personal judgment out the window. Everyone has a bit there and be 100% open and diplomatic. I find that I am. I have a good relationship with all of them. The key is to listen, because it is not what you see.

Reference 3 - 5.23% Coverage

22) Do you feel parents have been able to make any changes at home as a result of their child coming to the NG?
Yes, the ones that have been talking to us on a 1-1 have had a lot of progress at home as well. Like they have changed the routine slightly at home to suit them and it is acceptance. Sometimes they are over keen and take away too many tokens. That can be the only time it doesn't work. We have to fit around them as well. We need to do it around their needs too. I think that sometimes that the parents can have more of the NG needs than the children. They need to be nurtured more because they can't give what they didn't receive. Q- So do you see your role as nurturing the parents as well? I think they do. One parent used to come in more and more, she needed it, until social services came in. It's a generation of children bringing up children. It was them that was let down in the first place not them letting their children down.

<Internals\Post SSI P1> - § 1 reference coded [3.88% Coverage]

Reference 1 - 3.88% Coverage

8) How would you describe the teachers at the schools?
They are just wonderful. They are friendly, they are compassionate. If I am upset, they know! I have had trouble getting him in, they have to physically remove him and they know how it makes me feel and just tell me to go. You get a phone call later to let you know that things are ok.

<Internals\Post SSI P2> - § 1 reference coded [2.49% Coverage]

Reference 1 - 2.49% Coverage

17) Do you feel that your opinions have been valued by staff at the group?
Yeah, I don't have my opinion! Q- but if you have something to say,

do they listen? Oh yeah, definitely.

<u>\<Internals\Post SSI P3></u> - § 1 reference coded [9.03% Coverage]

Reference 1 - 9.03% Coverage

18) How do you think that the Nurture Group has been successful
His school is not delivering. Its treatment of C3 was the tip of the
iceberg. He was failed by that education system. (At the NG) he can
criticise his school. He feels like he is being heard finally.

<u>\<Internals\Post SSI P4></u> - § 1 reference coded [8.85% Coverage]

Reference 1 - 8.85% Coverage

15) How would you describe your relationship with the staff?
They are brilliant, such good support. They are the only support in a
big ocean! They are the ONLY support we have had. NG1 and NG2
are amazing, they are the most professional people and they
empathise so well.

<u>\<Internals\Pre SSI P1></u> - § 1 reference coded [5.29% Coverage]

Reference 1 - 5.29% Coverage

If so, can you tell me about why that may have gone so well?
He is quite young and understands his difficulties. He knows how
hard it is for me. He'll phone me back if I call him. He listens to me
and believes me.

<u>\<Internals\Pre SSI with P2></u> - § 1 reference coded [5.81%
Coverage]

Reference 1 - 5.81% Coverage

If so, can you tell me about why that may have gone so well?
With the head (at NG school) for example, he spent hours with me
listening to me and understanding me. The other head (at
mainstream school) didn't do this.

Appendix 9: Emerging Themes from Semi-Structured Interviews with No. of Sources and References

Super-ordinate theme	Emergent theme	Sources	References
NG Ethos	Behaviour	9	12
	Learning	8	11
	Social	7	10
	Emotional development	10	31
	Consistency & security	10	16
	Staff approach	21	66
NG Practice	Curriculum	14	30
	Resources	6	10
	Staff input	9	15
	Mixture of pupils	15	19
	Setting	13	21
	Outreach	9	18
	Transition	12	13
	Geographical location	4	5
	Leadership & management	4	6
	Difference to mainstream school	17	26
Communication	Formality	19	39
	Resistance	15	24
	Sharing	21	62
	Co-operating	7	12
	Collaborating	8	12
	Confusion	7	9
Relationships	Respect	13	29
	Trust	3	3
	Support	8	12
	Availability	9	13
	Understanding	8	12
	Dedication	4	4
	Accessibility	6	11
Outcomes	Attitudes	8	15
	Emotional	15	36
	Social	11	22
	Behavioural	10	13
	Academic learning	9	14
	Attendance	1	1
	Routine	11	13
	Joint working	10	21
	Static	13	16

Appendix 10: NVIVO Analysis Consultation meetings

Sharing Practice Nodes

Home and NG

<Internals\P1 mtg 4> - § 1 reference coded [1.14% Coverage]
Reference 1 - 1.14% Coverage
You have spent some time in the Nurture Group before the last video recording.

<Internals\P1 mtg 6> - § 2 references coded [2.12% Coverage]
Reference 1 - 0.79% Coverage
You also mentioned how Julie has helped you to use choices when negotiating with C1.

Reference 2 - 1.33% Coverage

You expressed that you have seen him changing slowly; you feel pleased with the input that the Nurture Group and video sessions have provided.

<Internals\P2 mtg 3> - § 2 references coded [4.55% Coverage]

Reference 1 - 2.78% Coverage

The Nurture Group teachers are able to show C2 how to deal with things and tell me about things.

Reference 2 - 1.77% Coverage

The blue book is good as you always know what is happening.

<Internals\P2 mtg 4> - § 2 references coded [4.69% Coverage]

Reference 1 - 2.94% Coverage

C2 seems to be close to NG3 in the Nurture Group. You normally have a chance to catch up with Nurture Group staff in the morning.

Reference 2 - 1.75% Coverage

C2 doesn't always hand in his blue book so it doesn't always get filled in.

<Internals\P2 mtg 5> - § 1 reference coded [17.88% Coverage]

Reference 1 - 17.88% Coverage

I went to the teacher, I suppose you can go and see him when you want. All issues have been sorted out (from last meeting: You mentioned that the communication with the school is not very good e.g. they have not yet had a parents' evening and that C2 doesn't always hand in his blue book so it doesn't always get filled in.

<u>\<Internals\P3 mtg 1\></u> - § 1 reference coded [2.17% Coverage]

Reference 1 - 2.17% Coverage

He now receives positive affirmations at the NG- he enjoys reading his comments to me

<u>\<Internals\P4 mtg 1\></u> - § 1 reference coded [2.81% Coverage]

Reference 1 - 2.81% Coverage

What is working well for the young person and family at home and at school?
C4 attends the Nurture Group.
C4 attends her school.
The Nurture has been brilliant in providing support.

<u>\<Internals\P4 mtg 2\></u> - § 1 reference coded [7.79% Coverage]

Reference 1 - 7.79% Coverage

P4 explained that she has felt let down by social services. She felt that if they continued to not support the family, that there would be an incident that social services would have to be accountable for. P4 was concerned that nothing was going to happen at the TAC meeting next week as she was still waiting to hear from social services. At the last meeting, it was acknowledged how they were very concerned about C4 and that they felt that C4 was a danger to herself as well as her siblings. You are waiting to hear back from the NG teacher is she has been able to contact them.

Home and School

<u>\<Internals\P2 mtg 1\></u> - § 1 reference coded [2.56% Coverage]

Reference 1 - 2.56% Coverage

There seems to be poor communication between school and home.
Something seems to happen at the school every day.

<u>\<Internals\P2 mtg 4\></u> - § 1 reference coded [2.61% Coverage]

Reference 1 - 2.61% Coverage

You mentioned that the communication with the school is not very good (e.g. they have not yet had a parents' evening).

<Internals\P2 mtg 5> - § 1 reference coded [17.88% Coverage]

Reference 1 - 17.88% Coverage

I went to the teacher, I suppose you can go and see him when you want. All issues have been sorted out (from last meeting: You mentioned that the communication with the school is not very good e.g. they have not yet had a parents' evening and that C2 doesn't always hand in his blue book so it doesn't always get filled in.

<Internals\Sc3 mtg 1> - § 1 reference coded [4.42% Coverage]

Reference 1 - 4.42% Coverage

Are they any current concerns for the young person and family at home or at school?

The school feel that P3 is not supportive of the school and that this impacts upon C3's attitude towards school.

Multi- agency

<Internals\P2 mtg 1> - § 1 reference coded [2.56% Coverage]

Reference 1 - 2.56% Coverage

There seems to be poor communication between school and home. Something seems to happen at the school every day.

<Internals\P2 mtg 4> - § 1 reference coded [2.61% Coverage]

Reference 1 - 2.61% Coverage

You mentioned that the communication with the school is not very good (e.g. they have not yet had a parents' evening).

<Internals\P2 mtg 5> - § 1 reference coded [17.88% Coverage]

Reference 1 - 17.88% Coverage

I went to the teacher, I suppose you can go and see him when you want. All issues have been sorted out (from last meeting: You mentioned that the communication with the school is not very good e.g. they have not yet had a parents' evening and that C2 doesn't always hand in his blue book so it doesn't always get filled in.

<u>\<Internals\Sc3 mtg 1\></u> - § 1 reference coded [4.42% Coverage]

Reference 1 - 4.42% Coverage

Are they any current concerns for the young person and family at home or at school?

The school feel that P3 is not supportive of the school and that this impacts upon C3's attitude towards school.

School and NG

<u>\<Internals\P2 mtg 2\></u> - § 1 reference coded [6.23% Coverage]

Reference 1 - 6.23% Coverage

No problems at school anymore. NG3 goes to school with C2 on a Friday afternoon to ensure that there is some consistency between the school and the Nurture Group.

<u>\<Internals\Sc3 mtg 1\></u> - § 2 references coded [6.29% Coverage]

Reference 1 - 1.52% Coverage

The school TA and SC3 have both been to the Nurture Group to visit.

Reference 2 - 4.77% Coverage

The class have now also incorporated the NG reward system (tokens) into C3's routine which seems to be working well. They have also started to use the sand timers system to allow C3 to take time out when necessary.

<u>\<Internals\Sc3 mtg 2\></u> - § 2 references coded [7.13% Coverage]

Reference 1 - 4.44% Coverage

You felt that his behaviour had changed (in a positive direction) when you visited the NG and since the same structures have been put into place (e.g. token system).

Reference 2 - 2.69% Coverage

You also felt that the Nurture Group held a slightly negative view of the work that you do at school.

Appendix 11: Emerging themes from the consultation meetings with No. of sources and references

Super-ordinate theme	Emergent theme	Sources	References
Communication (parent and child)	Attentiveness to other	5	8
	Shared attention	7	13
	Friendliness displayed to other	7	10
	Listening	7	16
	Receiving initiatives	9	14
	Initiating	6	9
	Turn taking	5	6
	Maintaining conversation	6	12
	Leading/ guiding	8	15
	Setting boundaries	6	14
	Understanding	3	3
	Relaxed	5	9
Relationships	Reciprocal Enjoyment	7	19
	Respect	8	18
	Understanding	1	2
	Loving/ affection	6	9
	Conflict/ aggressive	8	14
Outcomes	Attitudes	8	15
	Emotional	16	41
	Social	10	23
	Behavioural	12	28
	Academic learning	2	2
	Attendance	7	7
	Extra curricular engagement	5	6
	Changes at home (e.g. routine)	12	22
	Parenting skills/ approach	10	25
	Risk taking behaviours	5	12
Joint Working Practices	Sharing practice (home and NG)	8	11
	Sharing practice (NG and school)	3	5
	Sharing practice (home and school)	4	4
	Multi agency	3	5

Appendix 12: Additional Information on the Boxall Profile

The profile consists of two, 34-item sections; a developmental profile and diagnostic profile. The developmental strand describes aspects of the development in the early years whereas the diagnostic strand describes behaviours that interfere with a child's satisfactory engagement with school. A sample item from the Diagnostic Profile is:

N is oblivious of people and events; doesn't relate; is out of contact and can't be reached.

A sample item from the Developmental Strands is:

N accommodates to other children when they show friendly and constructive interest in joining his/her game.

The profile was developed as part of the NG approach to allow for a precise assessment of difficulty and progress. This knowledge is then used to plan a focused intervention.

All of the items are described more comprehensively in the handbook. Each item is scored on a 5 point Likert-type scale. Positive progress over time on the Diagnostic Profile is denoted by a declining score, whilst positive progress on the Developmental Strands is denoted by a rising score. The NG teacher was trained in using the profile and used it routinely in the NG. Further information on standardisation and the development of the profile is detailed in the handbook.

Appendix 13: Additional Information on Goodman's Strengths and Difficulties Questionnaire

The SDQ was devised by Goodman (1997, 1999) for use with 3-16 year olds. The questionnaire contains items about 25 attributes, some positive and others negative. These 25 items are divided between 5 scales: emotional symptoms, conduct problems, hyperactivity/ inattention, peer relationship problems and pro-social behaviour (all 5 scales have 5 items). The first four scales mentioned above contribute to a total difficulties score. The NG teacher was required to tick a box indicating whether they believe each item to be 'not true', 'somewhat true', or 'certainly true' in relation to a specific child. Two sample items from the scale are:

- N is helpful if someone is feeling hurt, upset or feeling ill
- N is usually obedient, usually does what adults request

Standardisation data are provided by Goodman and Scott (1999).

Appendix 14: Completed Observation Schedule

Date:	18.11.09	Time:	11.41am
Duration:	30 minutes	Pupil:	C1
Setting:	NG	Observer:	R Rautenbach
Context: (e.g. What is happening around pupil? Who are the significant adults and peers? How are they organised?)	Literacy lesson led by NG teacher (NG1). Other pupils sat on carpet calmly listening to her. 3 TA's sat on the carpet with the children. All pupils there today.		

Event recording: Tick whenever an event has any of these characteristics:

Totals:

Sharing:									
Helping:									
Caring:									
Including others:	√	√	√						
Resolving problem:	√								
Conforms to rules:	√								
Accepts authority:	√	√							
Disruptive:									
Other:									
Comments:									

Engagement to task: Timed Sampling (√ or X)

Context:
Teacher led literacy task ➝

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	totals
√	√	√	√	√	√	X	√	√	√	√	X	X	√	√	

Context:
Free play ➝ Blue room _____

16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	**27**
√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	

Comments: (task, reaction to task, reaction to people, level of involvement)
Writing interesting captions to match a picture. Teacher led. 10 pupils sat on the carpet, other pupils engaged with task. 3 TA's supporting children. C1 supported by TA on a 1-1.
Unstructured play. Staff keeping a close eye on the children but not directly involved with them.

General observations:
C1 came back to the carpet after being angry in the Blue Room for 50 minutes. Had a drink of water. Got his whiteboard and pen and sat on the carpet with other children. Listening to lesson input and then started to write sentences on his

General observations (continued from previous page):

whiteboard when instructed. Sat quietly next to the other children. TA sat behind him, reassuring him by rubbing his back. C1 was looking at the picture on the interactive whiteboard. Wrote an appropriate sentence and then showed this to the TA voluntarily. Then seemed to become unsettled and crawled towards the book corner. TA followed him and tried to convince him to come back to the carpet. He returned to the carpet with the TA. TA continued to support him on the task. Started to roll his pen on his whiteboard. Teacher gave C10 a sticker for his good work. Teacher also praised another child. He looked at the teacher quietly. Teacher turned to him and asked him how he was doing with the task. He didn't reply. TA explained to the teacher what C1 had written. C1 then crawled back towards the blue room under the tables. He went into the room and then came back straight away. He sat down on the carpet again with the group.

During free play he went up to other children at the sand tray. He then sat on the sofa with 2 other children. There were 3 other boys in the room. C1 tried to make a tent, some of the other boys started to throw cushions at each other. He threw a cushion once and then told the other boys to stop. Became grumpy when TA came in and said they couldn't run. He quickly brought himself back. C8 said to him "What are you doing?" accusationally. He stayed quiet, went into the tent, smiled, came out and then threw a blanket at C8's face. He then threw a soft brick at C8 too. Threw a soft brick at the wall. C9 started to talk. He stayed calm. TA came and re-explained the rules (not throwing, running etc). he went back under the blanket (tent). Came out from the tent/blanket. C8 came in and shouted "who wants to play?". He was chatting under the tent. "This is quite cool- I'll just sit here". Seems quite restless. Same out of tent and then back in with 2 boys. Talking together quietly under the tent. C1 laughed and giggled. Then started imaginative role play pretending that the tent was a house, he stopped before coming back in and said "can I come in?".

Accompanying Notes:

Event recording documented aspects of pro-social behaviours, interactions and participation of the individuals during the sessions. These were totalled at the end of each session. Time sampling recorded the child's engagement on the task at one minute intervals. These were also totalled at the end of the observation session. Furthermore, the general comments section of the schedule described the behaviours, interactions, engagement and outcomes in more depth. In addition, the context of the session was noted (for example; what the task was, significant adults and peers in proximity of the child, how the activity was organised and the level of involvement of adults).

Appendix 15: Emerging Themes from Observations

Super-ordinate theme	Emergent theme
Social Responses	Including other children
	Including other adults
	Considerate of others
	Solitary
	Dismissive of others
	Inconsiderate of others
Communication	Co-operating with adults
	Engaged in conversation with child
	Instructing others
	Subordinate
	Argumentative
Behavioural Responses	Following rules
	Oppositional
	Mild attention seeking
	Overtly disruptive
Emotional Responses	Self assured
	Seeking assurance
	Accepting praise
	Content
	Discontent
	Self regulating emotions
	Emotion not regulated
Task related Responses	Engaged
	Un-cooperative/ task avoidance
	Pursuing own agenda

Appendix 16: Example of a Coded Observation

C1 Observation 7 (09.12.09)

Super-ordinate theme	Emergent theme	Observations	Total- 1st observer	Total- 2nd observer
Social Responses	Including other children	Playing with another pupil in the tray. Went up to another pupil who was playing on the lego.	2	1
	Including other adults		0	0
	Considerate of others		0	0
	Solitary	While the rest of the class were playing a game, he was sat away from the group with a TA. He went to guinea pigs and then to the role play area- drifting during choosing time.	2	2
	Dismissive of others		0	0
	Inconsiderate of others		0	1
Communication	Co-operating with adults	TA went up to him, praised him for his attention and encouraged him to return to the carpet. He sat back on the carpet again. TA asked him what he wanted for lunch, he shouted "Beans on toast!" TA tickled him and he laughed.	2	1
	Engaged in conversation with child		0	1
	Instructing others		0	0
	Subordinate		0	0
	Argumentative		0	0
Behavioural Responses	Following rules	Started to whizz around on the chair, teacher asked him to stop. He stopped.	1	1
	Oppositional		0	0
	Mild attention seeking	Got up to go, shouted and lay back on the floor.	1	2
	Overtly disruptive	Screaming loudly in the blue room. Started to throw furniture around the room.	2	2

Super-ordinate theme	Emergent theme	Observations	Total– 1st observer	Total– 2nd observer
Emotional Response	Self assured		0	0
	Seeking assurance		0	0
	Accepting praise	TA went up to him, praised him for his attention and encouraged him to return to the carpet. He sat back on the carpet again.	1	1
	Content	Facial expression started to relax. Playing with another pupil in the tray. TA asked him what he wanted for lunch, he shouted "Beans on toast!" TA tickled him and he laughed.	3	0
	Discontent	Got up to go, shouted and lay back on the floor. He lay down again and said that he wanted to go.	2	3
	Self regulating emotions	Lay on the carpet but then sat up by himself. Did not need to go the blue room. He seemed to contain his frustration. He was eager to do choosing time and was doing a really good job at staying with the group. He stopped whizzing on chair and ran into the blue room.	4	2
	Emotion not regulated	Got up to go, shouted and lay back on the floor. Screaming loudly in the blue room. Started to throw furniture around the room.	3	3
Task related Responses	Engaged	Came back to the carpet with the TA. When it was his turn he said that he liked presents. Started to play positive corner with the group. He was eager to do choosing time and was doing a really good job at staying with the group.	4	2
	Un-cooperative/ task avoidance	He lay down again and said that he wanted to go.	1	1
	Pursuing own agenda		0	0

Appendix 17: Inter rater reliability of observations
Nonparametric Correlations

C1: Observation 4

Correlations

			Ob1a	Ob2a
Kendall's tau_b	Ob1a	Correlation Coefficient	1.000	.855**
		Sig. (2-tailed)	.	.000
		N	25	25
	Ob2a	Correlation Coefficient	.855**	1.000
		Sig. (2-tailed)	.000	.
		N	25	25

**. Correlation is significant at the 0.01 level (2-tailed).

C1: Observation 5

Correlations

			Ob1b	Ob2b
Kendall's tau_b	Ob1b	Correlation Coefficient	1.000	.685**
		Sig. (2-tailed)	.	.000
		N	25	25
	Ob2b	Correlation Coefficient	.685**	1.000
		Sig. (2-tailed)	.000	.
		N	25	25

**. Correlation is significant at the 0.01 level (2-tailed).

Inter rater reliability contd...

C2: Observation 4

Correlations

			Ob1a	Ob2a
Kendall's tau_b	Ob1a	Correlation Coefficient	1.000	.791[**]
		Sig. (2-tailed)	.	.000
		N	25	25
	Ob2a	Correlation Coefficient	.791[**]	1.000
		Sig. (2-tailed)	.000	.
		N	25	25

**. Correlation is significant at the 0.01 level (2-tailed).

C2: Observation 5

Correlations

			Ob1b	Ob2b
Kendall's tau_b	Ob1b	Correlation Coefficient	1.000	.907[**]
		Sig. (2-tailed)	.	.000
		N	25	25
	Ob2b	Correlation Coefficient	.907[**]	1.000
		Sig. (2-tailed)	.000	.
		N	25	25

**. Correlation is significant at the 0.01 level (2-tailed).

Inter rater reliability contd...

C3: Observation 4

Correlations

			C3ob1a	C3ob2a
Kendall's tau_b	C3ob1a	Correlation Coefficient	1.000	.906**
		Sig. (2-tailed)	.	.000
		N	25	25
	C3ob2a	Correlation Coefficient	.906**	1.000
		Sig. (2-tailed)	.000	.
		N	25	25

**. Correlation is significant at the 0.01 level (2-tailed).

C3: Observation 5

Correlations

			C3ob1b	C3ob2b
Kendall's tau_b	C3ob1b	Correlation Coefficient	1.000	.799**
		Sig. (2-tailed)	.	.000
		N	25	25
	C3ob2b	Correlation Coefficient	.799**	1.000
		Sig. (2-tailed)	.000	.
		N	25	25

**. Correlation is significant at the 0.01 level (2-tailed).

Inter rater reliability contd...

C4: Observation 3

Correlations

			C4ob1a	C4ob2a
Kendall's tau_b	C4ob1a	Correlation Coefficient	1.000	.817**
		Sig. (2-tailed)	.	.000
		N	25	25
	C4ob2a	Correlation Coefficient	.817**	1.000
		Sig. (2-tailed)	.000	.
		N	25	25

**. Correlation is significant at the 0.01 level (2-tailed).

C4: Observation 2

Correlations

			C4ob1b	C4ob2b
Kendall's tau_b	C4ob1b	Correlation Coefficient	1.000	.637**
		Sig. (2-tailed)	.	.001
		N	25	25
	C4ob2b	Correlation Coefficient	.637**	1.000
		Sig. (2-tailed)	.001	.
		N	25	25

**. Correlation is significant at the 0.01 level (2-tailed).

Appendix 18: Table showing Mean and Standard Deviations for the control and experimental groups for the different Boxall strands

		Experimental Group- Pre		Experimental Group- post		Control Group- Pre		Control Group-Post	
		mean	SD	mean	SD	mean	SD	mean	SD
Developmental strands	A	14.5	4.12	15	2.83	12.5	5.06	15	2.94
	B	8.5	1.73	9.5	0.58	7.5	1.73	8	3.16
	C	7	4.24	9.5	2.08	8.25	0.96	8.75	2.75
	D	11	4.08	15.5	3.7	11	4.24	14.75	4.11
	E	4	1.83	7	0.82	4.25	0.96	5.5	1.73
	F	9.5	3.32	9.5	2.08	8.25	1.5	8.5	1.29
	G	13.25	4.19	12.25	3.77	8.25	3.6	10.25	2.87
	H	12.25	5.44	16.5	2.38	9.25	4.03	14	2.94
	I	4.75	0.5	6.25	1.71	3.25	0.96	4.75	1.5
	J	4.5	1.74	6	1.41	3.5	1.91	4.75	1.70
Diagnostic Strands	Q	6	2.16	4.25	2.22	6.25	5.62	4.25	2.63
	R	4.75	1.26	5.75	2.22	8.5	4.12	6.75	2.36
	S	3.5	4.04	4	1.41	5.75	5.68	4	3.37
	T	5.75	4.57	4.75	4.35	13.5	3.79	7	5.89
	U	4.75	2.87	4.5	2.38	5	2.83	4.75	2.36
	V	5.75	4.03	5	2.94	9.75	5.12	4.75	2.75
	W	6	7.66	8	4.55	11.25	4.86	8.25	4.03
	X	4.75	5.5	4.5	4.65	10.5	5	8.25	4.57
	Y	6.75	7.89	6.75	6.80	12.5	9.57	8.25	5.62
	Z	2	2.82	2.25	2.22	8	0	3.25	2.06

Appendix 19: Charts showing means for the control and experimental groups for the different Boxall strands

Diagnostic Strands

Legend:
- Experimental Group- Pre mean
- Experimental Group- Post mean
- Control Group-Pre mean
- Control Group-Post mean

Developmental strands

Legend:
- Experimental Group- Pre mean
- Experimental Group- Post mean
- Control Group-Pre mean
- Control Group-Post mean
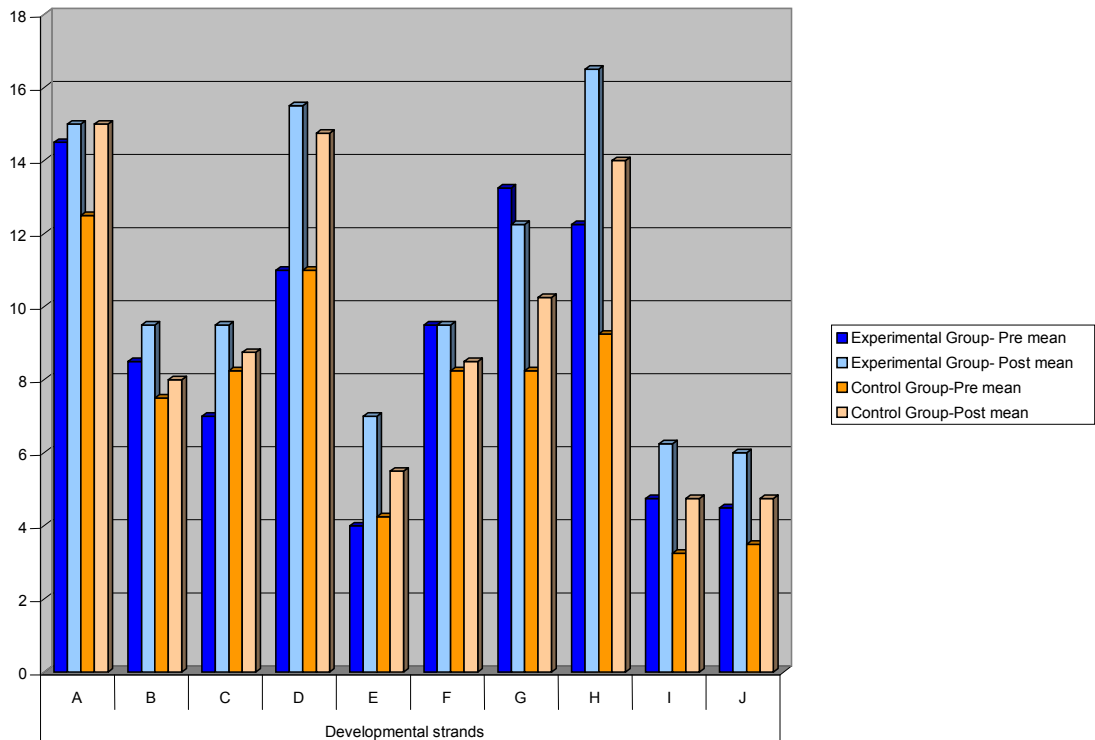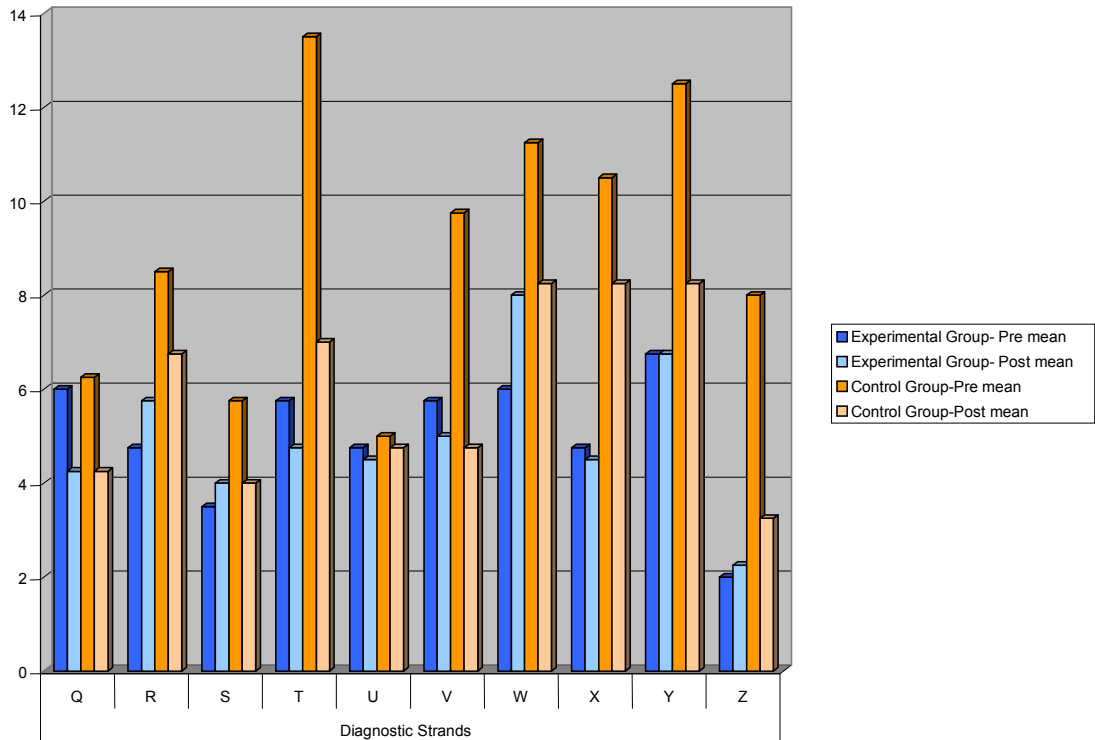
N.B. Positive progress over time on the Diagnostic Profile is denoted by a declining score, whilst positive progress on the Developmental Strands is denoted by a rising score.

Appendix 20: Table showing individual totals, means and standard deviations of Impact Scores in addition to a summary of improvement for the different strands

		Impact score	No. strands positive change	No. strands neutral	No. strands negative change
Experimental Group	C1	-46	2	3	15
	C2	14	11	1	8
	C3	93	19	1	0
	C4	11	7	7	6
	Total	72			
	Mean	18			
	SD	57.11			
Control Group	C7	14	9	3	8
	C8	3	11	0	9
	C9	53	16	2	2
	C10	129	18	0	1
	Total	199			
	Mean	49.75			
	SD	57.02			

Appendix 21: Table showing Mean and Standard Deviations for the control and experimental groups for the different SDQ strands

	Experimental Group- Pre		Experimental Group- Post		Control Group-Pre		Control Group-Post	
	mean	SD	mean	SD	mean	SD	mean	SD
Total Difficulties	20.75	5.25	10.5	1.91	25.5	5.97	17.25	4.92
Emotional Symptoms	4.25	2.99	2.25	2.22	6	3.16	5	2.94
Conduct Problems	4.25	3.5	2	1.63	5	3.37	2.25	0.96
Hyper-activity	7.75	1.71	4.75	0.96	8.25	2.22	6	2.31
Peer relationship difficulties	4.5	2.38	1.5	1	6.25	1.5	4	2.94
Pro-social behaviour	4	1.83	7.25	2.36	3.75	2.5	6.75	1.26

Appendix 22: Table and Chart to show Engagement to Task Recordings from the observations

	May	June	July	Sept	Oct	Nov	Dec	Jan
C1	8	30	27	26	28	27	15	20
C2		28	19	24	24	23	25	25
C3		23	26	28	27	29	27	28
C4				30	30	30	30	30

Chart showing engagement of individual children during observations
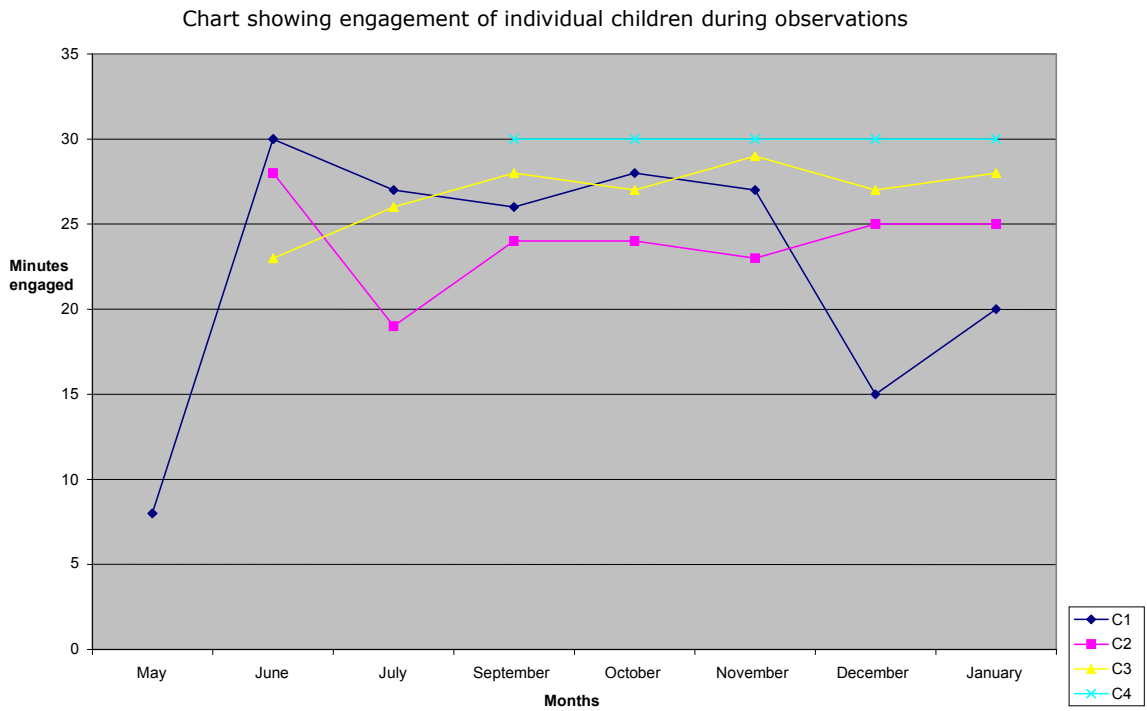
Appendix 23: Observation Summary for C1

Super-ordinate theme	Emergent theme	Ob 1	Ob 2	Ob 3	Ob 4	Ob 5	Ob 6	Ob 7	Ob 8
Social Responses	Including other children	0	2	1	4	5	5	2	1
	Including other adults	0	4	7	1	5	1	0	1
	Considerate of others	0	0	0	1	1	0	0	0
	Solitary	1	1	3	2	0	0	2	1
	Dismissive of others	0	0	0	0	0	1	0	0
	Inconsiderate of others	0	3	0	3	0	1	0	0
Communication	Co-operating with adults	1	1	2	2	3	3	2	1
	Engaged in conversation with child	0	0	0	0	2	3	0	0
	Instructing others	0	0	1	2	0	1	0	0
	Subordinate	0	0	0	0	0	0	0	0
	Argumentative	0	0	0	1	0	0	0	0
Behavioural Responses	Following rules	1	5	2	2	4	3	1	1
	Oppositional	0	0	0	2	0	0	0	0
	Mild attention seeking	1	0	2	0	0	0	1	0
	Overtly disruptive	1	0	0	1	0	0	2	1
Emotional Responses	Self assured	0	0	0	0	0	0	0	0
	Seeking assurance	0	2	1	0	0	2	0	0
	Accepting praise	0	0	0	0	1	0	1	0
	Content	0	4	2	3	8	4	3	3
	Discontent	1	0	0	1	0	3	2	2
	Self regulating emotions	1	0	0	1	0	6	4	3
	Emotion not regulated	0	1	1	4	1	1	3	1
Task related Responses	Engaged	3	2	2	2	8	6	4	4
	Un-cooperative/ task avoidance	2	0	0	0	0	1	1	0
	Pursuing own agenda	2	1	0	2	0	0	0	0

Appendix 24: Observation Summary for C2

Super-ordinate theme	Emergent theme	Ob 1	Ob 2	Ob 3	Ob 4	Ob 5	Ob 6	Ob 7
Social Responses	Including other children	3	0	1	2	5	0	0
	Including other adults	0	2	1	2	0	3	0
	Considerate of others	3	1	0	0	2	0	0
	Solitary	0	0	0	0	0	0	0
	Dismissive of others	0	0	0	0	0	0	0
	Inconsiderate of others	1	0	0	0	0	0	0
Communication	Co-operating with adults	0	0	2	1	1	1	4
	Engaged in conversation with child	1	0	0	1	4	0	1
	Instructing others	0	0	0	0	0	0	0
	Subordinate	1	0	0	0	0	0	0
	Argumentative	0	0	0	0	0	0	0
Behavioural Responses	Following rules	1	1	1	0	0	0	1
	Oppositional	0	0	0	0	0	0	0
	Mild attention seeking	0	0	1	0	0	0	1
	Overtly disruptive	0	0	0	0	0	0	0
Emotional Responses	Self assured	0	0	0	1	0	0	0
	Seeking assurance	0	0	3	3	1	2	2
	Accepting praise	0	0	0	0	0	1	0
	Content	3	1	1	4	1	1	0
	Discontent	0	0	7	0	0	2	2
	Self regulating emotions	0	0	2	0	0	1	4
	Emotion not regulated	0	0	5	0	0	2	1
Task related Responses	Engaged	1	1	3	7	1	4	4
	Un-cooperative/ task avoidance	0	1	4	1	0	1	0
	Pursuing own agenda	1	3	0	0	0	0	0

Appendix 25: Observation Summary for C3

Super-ordinate theme	Emergent theme	Ob 1	Ob 2	Ob 3	Ob 4	Ob 5	Ob 6	Ob 7
Social Responses	Including other children	0	1	1	3	3	2	0
	Including other adults	0	0	1	1	1	0	0
	Considerate of others	1	0	0	0	0	1	0
	Solitary	0	0	2	0	0	1	0
	Dismissive of others	0	0	1	0	0	0	0
	Inconsiderate of others	3	0	0	1	0	1	0
Communication	Co-operating with adults	2	1	1	1	2	3	0
	Engaged in conversation with child	0	2	0	3	1	1	0
	Instructing others	0	0	0	0	1	0	0
	Subordinate	0	0	0	0	0	0	0
	Argumentative	4	0	0	0	0	1	0
Behavioural Responses	Following rules	3	2	3	3	2	3	5
	Oppositional	1	2	0	0	0	0	0
	Mild attention seeking	1	0	0	0	0	1	0
	Overtly disruptive	0	0	0	0	0	0	0
Emotional Responses	Self assured	0	0	0	0	0	0	0
	Seeking assurance	0	0	0	0	1	0	0
	Accepting praise	0	1	0	0	0	0	0
	Content	1	3	4	5	2	1	5
	Discontent	1	1	0	1	4	1	0
	Self regulating emotions	0	0	1	0	4	0	0
	Emotion not regulated	2	1	0	1	0	1	1
Task related Responses	Engaged	3	8	5	3	9	4	9
	Un-cooperative/ task avoidance	3	2	1	1	0	4	1
	Pursuing own agenda	0	1	0	1	0	1	0

Appendix 26: Observation Summary for C4

Super-ordinate theme	Emergent theme	Ob 1	Ob 2	Ob 3	Ob 4	Ob 5
Social Responses	Including other children	0	0	3	3	0
	Including other adults	3	2	2	5	4
	Considerate of others	1	1	0	1	0
	Solitary	1	1	0	0	0
	Dismissive of others	1	0	0	0	0
	Inconsiderate of others	0	0	0	0	0
Communication	Co-operating with adults	2	2	2	3	5
	Engaged in conversation with child	0	0	3	3	0
	Instructing others	0	0	1	0	1
	Subordinate	0	1	0	0	0
	Argumentative	0	0	0	0	0
Behavioural Responses	Following rules	2	1	2	0	2
	Oppositional	0	0	0	0	0
	Mild attention seeking	0	0	0	0	0
	Overtly disruptive	0	0	0	0	0
Emotional Responses	Self assured	0	0	0	1	0
	Seeking assurance	5	1	0	3	0
	Accepting praise	0	3	0	0	0
	Content	2	3	5	4	3
	Discontent	1	0	0	0	0
	Self regulating emotions	0	0	1	1	0
	Emotion not regulated	0	0	0	0	0
Task related Responses	Engaged	7	4	6	5	9
	Un-cooperative/ task avoidance	0	0	0	0	0
	Pursuing own agenda	0	0	0	0	0

Appendix 27: VIG Analysis

Length of Edited Video (in seconds)

	1st interaction	2nd interaction	3rd interaction	4th interaction	5th interaction
C1	60	128	93	144	179
C2	102	59			
C3	74	105			

Chart showing Length of Edited Videos (seconds) for C1, C2 and C3
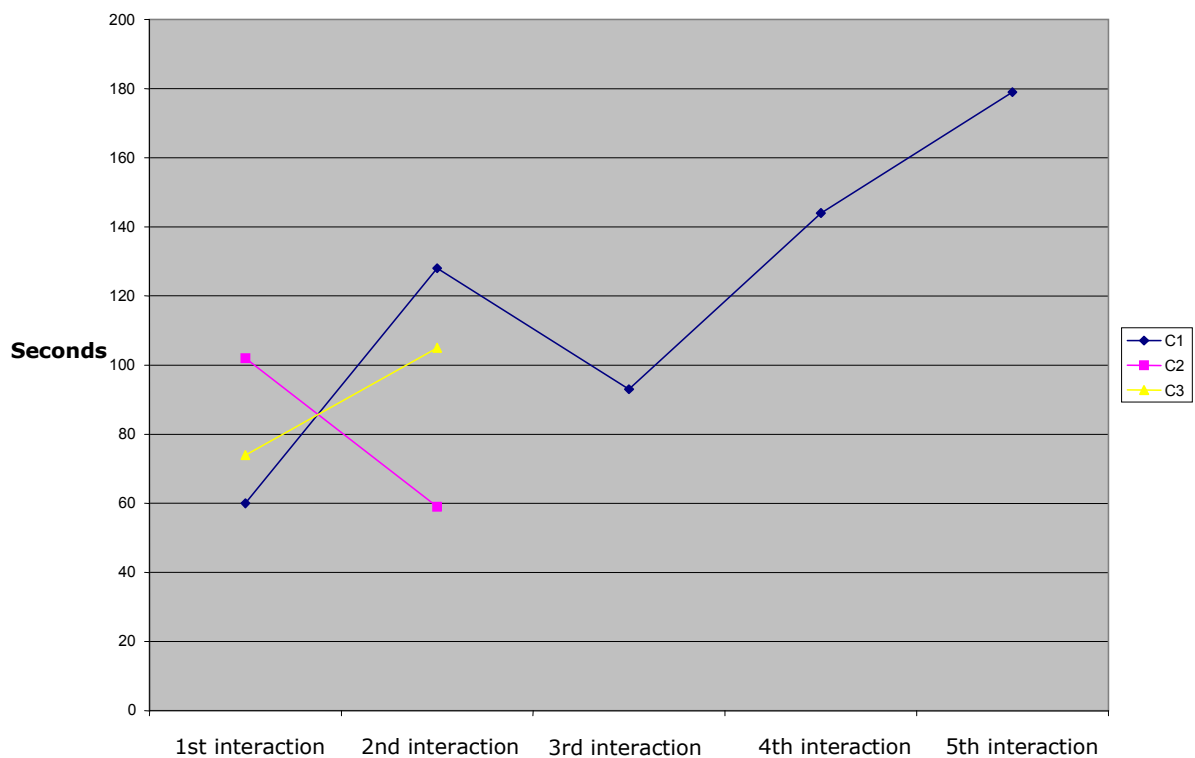
Appendix 28: Table showing Boxall Scores Pre and Post intervention with Impact Scores for C1, C2, C3 and C4

	purposeful attention	constructive participation	connects experiences	insightful involvement	cognitive engagement	emotionally secure	accepts constraints	accommodates to others	constructive responses	maintains standards	disengaged	self negating	undifferentiated attachments	inconsequential behaviour	craves attachment	avoids/ rejects attachment	insecure sense of self	negative towards self	negative towards others	wants, grabs disregards others
	a	b	c	d	e	f	g	h	i	j	q	r	s	t	u	v	w	x	y	z
C1 pre	19	9	12	13	5	9	15	12	5	5	5	5	1	5	1	8	8	9	12	2
C1 post	13	9	10	13	7	7	9	13	4	4	7	5	5	9	7	9	13	11	16	5
impact	**-6**	**0**	**-2**	**0**	**2**	**-2**	**-6**	**1**	**-1**	**-1**	**-2**	**0**	**-4**	**-4**	**-6**	**-1**	**-5**	**-2**	**-4**	**-3**
C2 pre	15	6	3	5	2	12	15	8	5	5	4	5	0	5	8	6	0	0	0	0
C2 post	13	10	7	12	6	10	15	17	8	7	3	9	2	1	3	5	8	4	7	1
impact	**-2**	**4**	**4**	**7**	**4**	**-2**	**0**	**9**	**3**	**2**	**1**	**-4**	**-2**	**4**	**5**	**1**	**-8**	**-4**	**-7**	**-1**
C3 pre	9	10	9	14	6	5	7	9	4	2	9	6	9	12	5	9	16	10	15	6
C3 post	15	10	12	20	8	9	9	18	7	6	2	4	4	8	2	4	9	3	4	3
impact	**6**	**0**	**3**	**6**	**2**	**4**	**2**	**9**	**3**	**4**	**7**	**2**	**5**	**4**	**3**	**5**	**7**	**7**	**11**	**3**
C4 pre	15	9	4	12	3	12	16	20	5	6	6	3	4	1	5	0	0	0	0	0
C4 post	19	9	9	17	7	12	16	18	6	7	5	5	5	1	6	2	2	0	0	0
impact	**4**	**0**	**5**	**5**	**4**	**0**	**0**	**-2**	**1**	**1**	**1**	**-2**	**-1**	**0**	**-1**	**-2**	**-2**	**0**	**0**	**0**

Appendix 29: Table showing SDQ Scores Pre- and Post-intervention with Impact Scores for C1, C2, C3 and C4

	Total Difficulties	Emotional Symptoms	Conduct Problems	Hyperactivity difficulties	Peer relationship difficulties	Pro-social behaviour
C1 pre	24	1	8	8	7	2
C1 post	8	1	2	4	1	7
Impact	16	0	6	4	6	5
C2- pre	24	8	3	7	6	6
C2- post	12	3	2	4	3	9
Impact	12	5	1	3	3	3
C3- pre	22	3	6	10	3	3
C3- post	10	0	4	5	1	4
Impact	12	3	2	5	2	1
C4-pre	13	5	0	6	2	5
C4-post	12	5	0	6	1	9
Impact	1	0	0	0	1	4

Appendix 30: Certificate of Ethical Approval

UNIVERSITY OF EXETER

School of Education and Lifelong Learning

Certificate of ethical research approval

STUDENT RESEARCH/FIELDWORK/CASEWORK AND DISSERTATION/THESIS
You will need to complete this certificate when you undertake a piece of higher-level **research** (e.g. Masters, PhD, EdD level).

To activate this certificate you need to first sign it yourself, then have it signed by your supervisor and by the Chair of the School's Ethics Committee.

For further information on ethical educational research access the guidelines on the BERA web site: http://www.bera.ac.uk/publications/guides.php and view the School's statement in your handbooks.

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READ THIS FORM CAREFULLY AND THEN COMPLETE IT ON YOUR COMPUTER (the form will expand to contain the text you enter).
DO NOT COMPLETE BY HAND

___

Your name: Roosje Egbers

Your student no: 570026071

Degree/Programme of Study: Doctorate in Educational, Child and Community Psychology

Project Supervisor(s): Tim Maxwell and Andrew Richards

Your email address: rae202@ex.ac.uk and roosje_e@yahoo.co.uk

Tel: 07776 142876

___

Title of your project:
From Nurture Group to Nurturing Community: Exploring Processes and Evaluating Outcomes when Nurturing Principles are Consistent between Home and School.

Brief description of your research project:
Research suggests that Nurture Groups (NG) can have significant social and emotional gains for young people and their families. Young people challenged with listening, relating and communicating skills are more likely to feel secure about their environments when there is consistency of approaches between the home and school. It is apparent that when settings collaborate with parents as respected partners in their child's education that there are positive outcomes.

Phase 1 of this research proposal aims to explore how to foster partnership relationships with parents to ensure that nurturing practices are more consistent across settings through a qualitative approach. In order to investigate this, information will be gathered through observations and semi structured interviews in the identified NG setting and children's centre. Diary entries of NG staff, parents and the young people, video recordings and consultation records will also be analysed for Phase 1 of the study.

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Chair of the School's Ethics Committee
last updated: September 2007

Phase 2 aims to evaluate social and emotional outcomes for young people and their families using a mixed methodology design. Outcomes for the control group and the experimental group will be compared. For participants within the experimental group, video recordings, observations, semi structured interviews and joint consultation meetings will be employed to develop consistent nurturing practices at home and at school. Quantitative measures before and after the intervention will be compared for the control and the experimental group within the identified NG setting. Furthermore, semi- structured interviews, ongoing observations and consultation meetings will measure social and emotional gains for the young people in the NG.

Give details of the participants in this research (giving ages of any children and/or young people involved):
I plan to identify approximately 6 pupils (aged between 7-11years) and parents from the NG setting to take part in the experimental group. The teacher of the NG would also be participating in the study. I would also plan to recruit 5 staff and 5 parents from a children's centre.

Give details regarding the ethical issues of informed consent, anonymity and confidentiality (with special reference to any children or those with special needs) a blank consent form can be downloaded from the SELL student access on-line documents:
I will be following the Code of Ethics and Conduct set out by the British Psychological Society (BPS, 2006). Issues regarding respect, confidentiality, informed consent, safe guarding will be carefully considered as detailed below.

Respect: The views of children, parents and teachers will be paramount in this study. I will ensure that these are listened to, respected, represented and acted upon. I will also endeavor to respect individual, cultural and role differences, including those involving age, disability, education, ethnicity, gender, language, national origin, race, religion, sexual orientation, marital or family status and socio-economic status.

Confidentiality: Records of the data collected (including audio or video recordings) will be stored in a secure and safe place. Electronic information will only be accessed by the researcher with their username and password. This information will be stored on a secure system with recognised virus protection. Electronic and paper information will be locked in a secure building. Information will also be coded to ensure that their identification is kept anonymous. This will remain anonymous in the write up of the research. Collected written information will be destroyed by shredding and securely disposing when it is no longer required. Digital video and audio recording will also be electronically shredded using McAfee software.

Informed Consent: It will be essential to obtain informed consent form parents. Records of when, how and from whom consent was obtained, will be recorded. Through correspondence and meetings, I will provide details of the project and my contact details. I will also invite the young people to participate and ensure that they are aware of what participation will involve. I will make sure that participants are aware of how the research finding will be used. Informed consent will be an ongoing process throughout the research. Participants will also be reminded that they have the right to withdraw from the research at any given time and that data related to them will be destroyed.

Safe guarding: It will be made clear to participants that in the exceptional event that there is evidence to raise serious concern about the safety of participants or other people, information will be passed on to relevant bodies in accordance with the Child Protection Act 1989.

Give details of the methods to be used for data collection and analysis and how you would ensure they do not cause any harm, detriment or unreasonable stress:
Data Collection for Paper 1
For Phase 1, the data will be mainly qualitative. Semi structured interviews and naturalistic observations will be employed in the children's centres to explore practices of partnership working. Phase 1 data will also be collected from parents and children in the NG experimental group. The information will be gathered from video recordings, observations, semi structured interviews and consultation records. Further information about the measures is detailed below;

Observations: Observations for the explorative phase of the research will be more informal and less structured to allow for freedom in the information gathering and recording. I plan to observe how parents and staff (in NG and children's centre) interact.

Semi- Structured Interviews: Individual semi structured interviews with children centre staff, NG staff, parents and children will be conducted to explore and inform practice. The initial interviews will seek to gather information around a number of identified topics (such as concerns, strengths, what works well, areas for

development, particular difficulties etc...). Following the young person's placement in the NG or after 2 terms (whichever occurs sooner), the individual semi structured interviews will be completed again as a comparison within the NG setting. I plan to gather information regarding their experience of the intervention, what they gained and what could be improved upon. The interviews will aim to evaluate the overall effectiveness of the intervention, to establish which elements were particularly successful and to see whether their views changed after the intervention. With the consent of the participants, the interviews will be recorded on audio tape.

Joint Consultation Meetings: NG teachers and parents of young people within the NG will be encouraged to keep an ongoing narrative diary of their involvement and experiences throughout the research which they can then use as a prompt during the meeting. A monthly consultation meeting with parents, NG teachers and if appropriate, with the young person, will review information gathered from the observations, video recordings and diary notes. I will record discussions from the meetings on a consultation record form.

Video Recordings: This will be used as a versatile tool for aiding and enhancing positive communication and interaction between people. With the consent of the participants, the intervention will use short clips of video to identify the strengths of those involved, to enable them to observe, analyse and then change their behaviour while feeling positive about themselves in the process. The method will begin with a short piece of film (approximately 10 minutes) taken of the participants (NG staff and parents) in a situation that shows interaction (e.g. a game, conversation). These clips will then be viewed with the participants and discussions will feed into the consultation meetings.

Data Analysis for Paper 1
The qualitative data collected from observations, semi- structured interviews and consultation meetings will be uploaded onto the NVivo software computer program. The NVivo package is able to store a large quantity of data and provides an organised storage system for the information. NVivo will also aid the process of coding information and ensure that the coding is consistent. Interpreting Phenomenological Analysis uses coding, organising and interpreting of the data to produce a set of themes. These themes will identify similarities and differences of the accounts between participants.

Data Collection for Paper 2
For phase 2, data collection will be quantitative with supplementary qualitative measures. Some of the measures obtained in the NGs for Phase 1, will also be applicable to Phase 2. Please refer to 'Data Collection for Paper 1' for information regarding semi- structured interviews and joint consultations that will also be used for paper 2.

At the start of the young people's placement in the NG, staff will complete the Boxall profile (Bennathan and Boxall, 1998) for all of the young people. Goodman's (1997) Strengths and Difficulties Questionnaire (SDQ) will also be completed by staff and parents. For participants in the control and experimental group, measures from both the Boxall profile and SDQ will therefore be obtained. NG staff will also track and record attendance records for both groups. Systematic observations will start at the beginning of the intervention and then continue on a monthly basis for children within the experimental group. Follow up measures for the Boxall Profile and SDQ will be collected at the end of the child's provision within the NG in order to draw comparisons. Comparisons will be also be made between the semi structured interviews prior to the intervention and following the intervention. Further information about the measures is detailed below;

Observations in NG setting: Systematic observations will occur in the NG setting at the beginning of the research and then continue on a monthly basis during the young person's placement to assess social and emotional development. Event recording will record interactions, participation and engagement of the individuals during the sessions. Time sampling will also be used to record the young person's engagement on the task. In addition, comments will be made during the observations so that observations can be located in context. The observation schedule will be piloted prior to its use in the research. In order to ensure observer consistency, a second observer will observe a proportion of the sessions.

Boxall Profile: The Boxall Profile provides a framework for the structured observation of children in the classroom and consists of two sections: a developmental profile and diagnostic profile. The profile was developed as part of the NG approach to allow a precise way of assessing the areas of difficulty that children experience in order to enable a focused and planned intervention and a way of measuring of progress.

Strengths and Difficulties Questionnaire: The SDQ is a behavioural screening questionnaire for 3-16 year olds. All versions (teacher and parent versions) of the SDQ ask about 25 attributes, some positive and others negative. These 25 items are divided between 5 scales: emotional symptoms, conduct problems, hyperactivity/ inattention, peer relationship problems and pro-social behaviour (all 5 scales have 5 items). The SDQ also

asks whether the respondent thinks the young person has a difficulty, and if so, enquires further about chronicity, distress, social impairment, and effect it has on others. This provides useful additional information.

Attendance: Attendance record details will also be collected for the term prior to the start if the intervention and monitored during the intervention. This data will be analysed by SPSS.

Data analysis for Paper 2
The quantitative data (Boxall profiles, SDQ scores, observation records and attendance records) will be entered onto a SPSS dataset. This will allow SPSS to provide an overview of the descriptive statistics, including the mean scores, standard deviations and the distribution of scores.
In order to ascertain if there is any difference before and after the intervention, for both the experimental and control group in Boxall profile scores, observation records, SDQ scores and attendance figures, I will complete a *repeated measures t test*. An *unpaired two-group t-test* will also be completed to determine if there is a difference between Boxall Profile scores, SDQ scores and attendance figures for the experimental and control group before and after the intervention. Furthermore, as previously mentioned, information gathered from the semi structured interviews and also the NG observations will be uploaded onto NVivo which will code, organise and interpret the data to produce a set of themes. Differences between participants and over time (e.g. before and after the intervention) will then be analysed.

Give details of any other ethical issues which may arise from this project (e.g. secure storage of videos/recorded interviews/photos/completed questionnaires or special arrangements made for participants with special needs etc.):
During the data collection, data analysis and write up, data (video recordings, audio recordings, consultation meeting records, observation records, questionnaires, interview data and school attendance data) will be securely stored in a locked cabinet in a secure building. As previously mentioned, electronic information will only be accessed by the researcher with their username and password. Electronic information will also be stored on a secure system, within a locked building with recognised virus protection. It will be destroyed when it is no longer required.

Give details of any exceptional factors, which may raise ethical issues (e.g. potential political or ideological conflicts which may pose danger or harm to participants):
None known.

*This form should now be printed out, signed by you below and sent to your supervisor to sign. Your supervisor will forward this document to the School's **Research Support Office** for the Chair of the School's Ethics Committee to countersign. A unique approval reference will be added and this certificate will be returned to you to be included at the back of your dissertation/thesis.*

I hereby certify that I will abide by the details given above and that I undertake in my dissertation / thesis (delete whichever is inappropriate) **to respect the dignity and privacy of those participating in this research.**

I confirm that if my research should change radically, I will complete a further form.

Signed: *Roosje Egberts* .... **date:** 30.01.09

N.B. You should not start the fieldwork part of the project until you have the signature of your supervisor

This project has been approved for the period: Dec '08 **until:** June 2010

By (above mentioned supervisor's signature): .... *Jim Maxwell* .... **date:** 3rd Feb 2009

N.B. To Supervisor: Please ensure that ethical issues are addressed annually in your report and if any changes in the research occurs a further form is completed.

SELL unique approval reference: .... 3|23|09|31-

Signed: *Salah Troudi* .... **date:** 23/02/2009
Chair of the School's Ethics Committee

Chair of the School's Ethics Committee
last updated: September 2007

Appendix 31: Feedback Presentation to Educational Psychologists and Head of Education out of School Service

From Nurture Group to Nurturing Community:

Phase 1- Exploring the processes of partnership working when developing consistent nurturing approaches between home and school.

Phase 2- Evaluating outcomes when nurturing principles are consistent between home and school.

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Research Assumptions

- From the literature, we know that:
- There are positive social and emotional outcomes for children who attend NGs
- Outcomes for children and young people are improved when there is consistency between the home and school approaches
- Partnership working with parents can be challenging. This can be exacerbated when there are social, emotional and behavioural concerns as the underlying rhetoric of blame can point towards parents.

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Research Questions

1. How can consistency in nurturing principles at home be effectively developed?
2. How can consistency in nurturing principles at school be effectively developed?
3. What is the best practice for developing and maintaining effective partnerships with parents?
4. What differences does partnership working have on social and emotional outcomes for the experimental group in comparison to the control group (all Key Stage 2 at the NG)?
5. What implications does partnership working have on social and emotional outcomes for individual children in a Key Stage 2 Nurture Group?

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Instruments used for Data Collection

- *Semi- Structured Interviews*: Individual interviews with NG staff, parents and children from the experimental group were conducted before and after the intervention.
- *Joint Consultation Meetings:* These were conducted between me and a parent. For one of the participants, these meetings involved the mainstream school class teacher instead of the parent.
- *Observations in NG setting:* Systematic observations were conducted in the NG setting at the beginning of the research and repeated on a monthly basis during the intervention to assess social and emotional development for the children in the experimental group.
- *Boxall Profile:* The NG teacher also completed the Boxall Profile for children in the control and experimental group before and immediately after the intervention.
- *Strengths and Difficulties Questionnaire (SDQ):* Levels of social, emotional and behavioural development for the children in the control and the experimental group were measured with the SDQ before and after the intervention.

Video Interactive Guidance- Background

- It was developed in the Netherlands in the early 1980's to support communication in families whose children were in residential care.
- A versatile tool for aiding and enhancing positive communication and interaction between people.
- It is based on the notion that everyone has a desire to communicate, that this can done in a number of ways and that everyone can develop their communication skills and relationships.
- It aims to give individuals a chance to reflect on their interactions, drawing attention to elements that are successful and supporting clients to make changes where desired.

VIG: The Contact Principles

Leading and guiding, giving choices, making plans, distracting and diverting, take initiatives, making suggestions

Conflict management
Naming contradictions

Sharing and helping each other, discussion

Taking turns in communication
Making your turns short

Saying yes, responding to their initiative
Receiving them by repeating what they have said

Using your body and face
Smiling   nodding   friendly posture

Attentiveness to the other person, Giving eye contact
Paying attention to what they say and feel
Looking towards, Naming what they do

Intervention

Participant	Cycles of VIG	No. of meetings	Duration of intervention
Participant 1	5	6 with parent	May '09- Jan '10
Participant 2	2	5 with parent	June '09- Jan '10
Participant 3	2	3 with teacher 3 with parent	June '09- Jan '10
Participant 4	0	3 with parent	Sept '09- Jan '10

- The work with all of the participants varied.
- I planned to complete 3-5 cycles of VIG with the participants combining the review meetings with video feedback sessions.
- Tried to establish other practices too, e.g. coffee afternoon for parents.

RQ1: How can consistency in nurturing principles at home be effectively developed?

Sharing Practice

Sharing practice allowed management strategies to be shared and improved an understanding of perspectives. Both improved outcomes.

Parents valued the personalised and flexible approach when communicating and sharing practice.

Positive Outcomes

Relationships

Communication

Open, understanding and supportive communication improved relationships and vice versa.

At a micro level, the analysis of communication through VIG improved the relationship between parents and children.
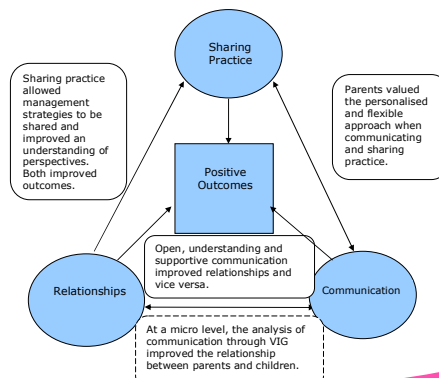
RQ1: How can consistency in nurturing principles at home be effectively developed?

Existing Practice:
- Parents expressed how they valued spending informal time in the NG. The NG teacher also had a system whereby she arranged termly meetings. This enabled them to discuss concerns, solutions and share strategies. Different parents seemed to prefer different methods of communication.
- All the parents appreciated the specific parenting strategies that the NG shared and felt more confident in the strategies that they used to manage their child's behaviour. This is evident in Figure 1 with the abundant references to changed outcomes with relation to 'parenting skills', 'changes at home' and 'behavioural'.
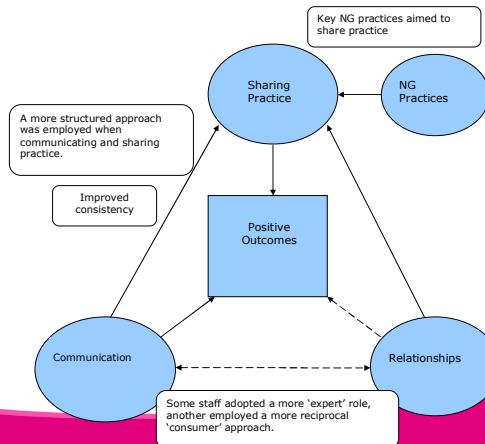 - *"The NG teachers are able to show C2 how to deal with things and tell me about things".*
  - *"C1 is very sensitive and there is a particular way of understanding and communicating with him…"*

RQ1: How can consistency in nurturing principles at home be effectively developed?

- New Practice:
- Parents started to come into the NG more with the intervention, eventually they would joint the group for breakfast, a story or an activity. This allowed for them to implicitly learn about nurturing practices.
- In collaboration with the NG, I invited parents in for a coffee afternoon. The parents and NG staff were positive about the event. The findings revealed various benefits; It allowed parents to, "overcome the barrier that the NG is part of a school and that we are scary," (NG1, post SSI). It enabled parents to meet each other properly. As a result, parents swapped useful information and learned about each other's situations. Parent's also used the opportunity to talk to me or the NG staff directly about concerns.
- "It was lovely, really nice. When you see others you don't think they have problems like you but everyone has a problem!" (P2 post SSI).
- "If they have another coffee morning I would always come…it was nice to meet other parents, one of them told me about the family fund which I have now applied for- It's a good way of swapping information… It shows the kids that you are interested and that you care." (P1 post SSI)
- Respect and attunement grew in the relationships between parents and children through VIG- see graph 2

RQ2: How can consistency in nurturing principles at school be effectively developed?

VIG developing nurturing principles…

Legend: Sources, References

X-axis labels: Attentiveness to other, Shared attention, Friendliness displayed to other, Listening, Receiving initiatives, Initiating, Turn taking, Maintaining conversation, Leading/ guiding, Setting boundaries, Understanding, Relaxed

Emergent themes

RQ3: What is the best practice for developing and maintaining effective partnerships with parents?

Belief in parent's abilities

Collaboration
- Consistency
- Continuity
- Mixture of strategies

Positive Outcomes

Relationships — VIG — Communication

- Respectful
- Available
- Understanding & empathy
- Supportive
- Accessible
- Committed and dedicated
- Trustworthy

- Open
- Inclusive
- Understanding of perspectives
- Personalised/ flexible
- Non-judgmental
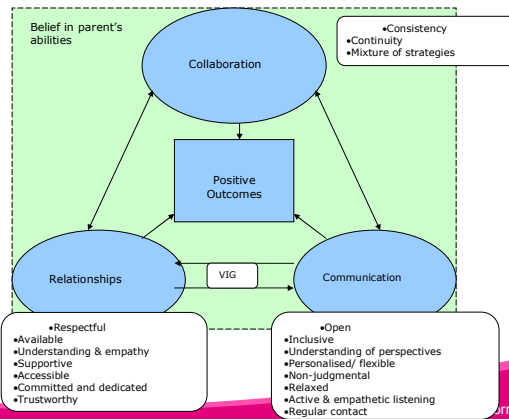- Relaxed
- Active & empathetic listening
- Regular contact

RQ3: How can consistency in nurturing principles at school be effectively developed?

- "They are really supportive, even to the parents. I mean, if I am upset in the morning, they take time out to listen and to talk about it and then get the children involved… It's all dealt with and no-one gets hurt like in other schools." (P2, post SSI).

- "We need to do it around their needs too. I think that sometimes that the parents can have more of the NG needs than the children. They need to be nurtured more because they can't give what they didn't receive… It's a generation of children bringing up children. It was them that was let down in the first place, not them letting their children down." (NG2, post SSI).

- "You've got to throw out all of your personal judgement out the window; Everyone has a bit there, and be 100% open and diplomatic…The key is to listen because it is not what you see." (NG2 post SSI)

- "They don't patronise me- people can patronise you when you have a difficult child." (P1, pre SSI).

RQ4: What differences does partnership working have on social and emotional outcomes for the experimental group in comparison to the control group?

○ Boxall Profile results showed that the control group made greater social and emotional gains in comparison to the experimental group.

○ SDQ data showed that both group made gains. Experimental group made slightly greater gains.

RQ5: What implications does partnership working have on social and emotional outcomes for individual children in a Key Stage 2 Nurture Group?

- **Child 1:**
- Evidence suggests that he starting to self regulate his emotions (ob)
- Increase in engagement and decrease in the amount of time that he was pursuing his own agenda (ob)
- His capacity to include adults, other children and his consideration for others increased. He was also being inconsiderate less frequently as the observations progressed (ob)
- Impact score on Boxall was -46.
- Improved on all but one area of the SDQ.
- Quantity of positive interactions through VIG increased.
- Parent moved from a 9 to a 5/6 on a scale of 1-10 (4/5 was her goal).
- He became better at regulating his emotions, *"…it's changed my behaviour a bit… I don't chuck tables. I still do it a bit, but not as much… I don't fight, I only play fight, I'm not rough."* (C1 post SSI)
- Both listened to each other more, increased their initiations. P1 guided him more and became better at maintaining interactions.
- Levels of affection and enjoyment increased between them.
- Less conflict between them.
- *"I have had to change my whole way of parenting; Like with the eye contact, waiting for him to answer me and trying to get conversations going again. Sometimes now he will start them and want to talk to me about something which is great… he goes on and on! It's not often that he walks out of the room now…We'll sit together for ages. There is a lot more going on between the two of us now…"* (P1 post SSI).
- C1 also became more amenable and compliant. P1 became more confident and assertive.

RQ5: What implications does partnership working have on social and emotional outcomes for individual children in a Key Stage 2 Nurture Group?

- **Child 2**
- Co-operated more with adults towards the end of the intervention.
- Started to regulate his own emotions more towards the end of the intervention.
- Engagement generally increased and he pursued his own agenda less.
- Boxall impact score of 14.
- Improved on all areas of SDQ.
- On scale of 1-10, P2 moved from a 9 to a 1 (goal was a 5).
- P2 improved her skills at listening, receiving his initiatives, guiding, re-directing and encouraging C2
- Noticeable development in the area of respect; *"I've stopped calling mum names… I don't swear at adults".* (C2, post SSI),
- C2 became more confident and assertive

RQ5: What implications does partnership working have on social and emotional outcomes for individual children in a Key Stage 2 Nurture Group?

- **Child 3**
- Started to include more children as time went on and became less inconsiderate of others.
- Became less argumentative and less oppositional
- Impact score of 93 on the Boxall Profile.
- Improved on all areas of the SDQ.
- P3 wanted the school to value him. Through the VIG, the teacher became more attentive to him and displayed more friendliness in her body language. She would stop to listen to him, received his initiatives and tried to integrate him more into the group.
- Teacher valued sharing practice with the NG, C3 did not; *"The teacher (at school) uses the token thing now. Usually I am naughty to get out of the class and now that I have tokens she just takes the tokens away and I stay in class. I get really annoyed about that… They (staff at school) are interfering. It's my school here".*
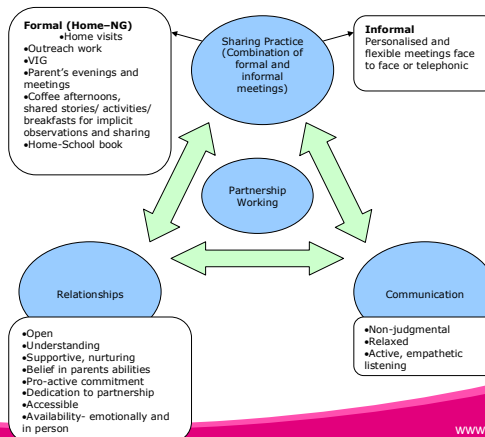- At the end of the intervention, P3 was pleased that C3 had *"the gift of feeling valued".*

RQ5: What implications does partnership working have on social and emotional outcomes for individual children in a Key Stage 2 Nurture Group?

- **Child 4**
- Including adults increased as well as including children to a lesser degree. Became less solitary.
- Engaged in conversation more with adults as time went by as well as with children (but to a lesser degree).
- Seemed to seek less assurance as the intervention took place and become more content.
- Engaged throughout.
- Boxall impact score of 11.
- Improved on 3 areas of Boxall, stayed the same for 2.
- Staff at the NG aimed to support the family, develop parental confidence and build their resilience.
- At the end of the intervention, P4 commented on how the NG had been; *"the only people that have formed relationships and have reached places with C4 that no one else has managed".* (P4, Post SSI).

Implications for Practice

Formal (Home–NG)
- Home visits
- Outreach work
- VIG
- Parent's evenings and meetings
- Coffee afternoons, shared stories/ activities/ breakfasts for implicit observations and sharing
- Home-School book

Sharing Practice (Combination of formal and informal meetings)

Informal
Personalised and flexible meetings face to face or telephonic

Partnership Working

Relationships
- Open
- Understanding
- Supportive, nurturing
- Belief in parents abilities
- Pro-active commitment
- Dedication to partnership
- Accessible
- Availability- emotionally and in person

Communication
- Non-Judgmental
- Relaxed
- Active, empathetic listening

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SECTION 5

Literature Review

N.B. The literature review has been marked and examined separately from the examination of this thesis. It is appended here for completeness and to give coherence to the whole thesis.

1 Aims

I lay the foundations for the review by briefly outlining the educational and political context with regard to working with children with social, emotional and behaviour difficulties (SEBD). As attachment theory underpins Nurture Group (NG) philosophy and is subsequently entwined within research into NG practice, an overview of the main principles is provided. This is followed by a succinct summary of NGs. After this, I discuss NG research, investigate inconsistencies in research evidence and explore factors which contribute to the effectiveness of NGs. Leading directly from this is a discussion around partnership working with parents. I look at research that investigates the essential successful components of partnerships working with parents. Video Interactive Guidance (VIG) is introduced as a theoretical framework that can be used when working with parents. Research into the success of VIG is subsequently summarised. Before I conclude, I emphasise the importance of the emerging 'relationship' theme. I conclude by summarising the review and close by outlining my research and research questions.

2 Introduction

2.1 Political and Educational Context

It is argued that the educational inclusion of all pupils is an international human rights agenda which calls for the full inclusion of all people, in all aspects of life. The Code of Practice (DfES, 2001) and the Special Educational Needs and Disability Act (DfES, 2001) reflect this, as does the United Nations (1994) strategy 'education for all'.

Bennathan (1997) identified that while there was some success in the inclusion of children with sensory impairments or physical difficulties into mainstream schools, the same success was not apparent for children with SEBD (ILEA, 1995). In an attempt to address some of these concerns, the 1997 Education Act required schools to create behaviour management policies.

This coincided closely with the first publication of Bennathan and Boxall's (1996) book on NGs. Excellence for all Children (DfEE, 1997) responded positively to the publication, citing NGs as a promising form of educational intervention. Further emphasis on tailored provisions, such as NGs, was reflected in the objectives of subsequent Government initiatives, for example, Intervening Early (DfES, 2002) and Every Child Matters (DfES, 2004).

While inclusion recommendations were being formulated, there was also an increasing awareness of the value of parental involvement. The Government's commitment to increasing parental involvement was made clear in the Education Acts (1988, 1992 & 1993). In addition, the Code of Practice (DfES, 2001) and Excellence for all Children (DfEE, 1997) explicitly stated how parents had 'real opportunities' to influence and contribute to their child's education. This was synonymous with the views of Bennathan and Boxall (1996)

who emphasised the need to encourage parental involvement within NGs.

In summary, NGs are an educational provision aimed at meeting the complex needs of children with SEBD. In addition, they endorse partnership working between parents and staff to ensure consistency of approaches. Before describing NGs in more depth, the following section introduces the notion of attachment so that NGs can be understood in an appropriate context.

2.2 Nurture Group Philosophy

Attachment theory (Bowlby, 1969, 1973, 1980) provides a useful framework to help understand the confusing behaviours that some children with SEBD exhibit. Attachment represents the series of interactions between a child and the primary care giver. This will shape how they view and behave in future interactions and relationships throughout life.

Primary care givers play a vital role in ensuring that a child's need for safety, security and stability are fulfilled. This facilitates growth in every aspect of their development. Fundamentally, children start to learn about themselves through the actions, attitudes and approaches of their primary care giver. 'Good enough' care, as termed by Winnicott (1964), describes how the care giver is able to attune to and satisfy the needs of the child.

Bowlby (1969, 1973, 1980) found that babies use their primary care giver as a secure base. During stressful times, he found that children who had experienced 'good enough' parenting had an internal sense of calm, believing that they were lovable, that others were bonded to them and that they could trust others to meet their needs. Such children could be described as being 'securely attached'. They have the confidence to tolerate separation from their parents, explore their world and negotiate developmental milestones.

In contrast to secure attachment patterns, there are three classifications for insecure attachment patterns. These can either be avoidant (child ignores care giver during attachment related stress), ambivalent (child is indifferent to care giver during attachment related stress) (Ainsworth et al., 1978) or disorganised (child is unable to use a strategy to deal with attachment related stress) (Main and Solomon, 1990). These insecure attachment patterns have been learnt to allow a child to adapt to their care giver so that their primary needs have the best chance of being met. As part of this adaptation a child may suppress their needs or find ways of coping alone. Other children may learn to gauge when it is an opportune time to meet their needs. Alternatively, some children may scream or shout until their needs are met. These different responses are classified into attachment styles which are then likely to be transferred to future relationships and experiences.

These attachment styles impact on a child's transition from egocentricity to social competence. Children have to progress through a set of experiences which allow them to identify themselves as being independent in relation to other people. This psychological development is essential as a degree of social competence is expected when they start school. Without these competencies, a child may find it difficult to understand and regulate their behaviour, form relationships and communicate with others; all of which are essential foundations for learning. NGs aim to offer children with attachment difficulties opportunities for relating in mainstream classes and are described in more detail below.

2.3 What is a Nurture Group?

Prior to founding NGs in 1970, Bennathan (2004) observed increasing numbers of children challenging their teachers with externalising, disruptive behaviours. She observed how some were withdrawn, unable to access learning and appeared to be 'locked in their own

frightening worlds' (Bennathan, 2004). With poorly developed skills in listening, understanding others and communicating, she believed they found it difficult to respond in classrooms. She hypothesised that without these social competencies, they felt overwhelmed by classroom demands. This contributed to feelings of anger and fear which were subsequently displayed in their challenging behaviour.

NGs aim to develop the skills, competencies and early learning experiences of pupils so that they can function at an emotionally and socially age appropriate level. In addition, they are intended to serve as a bridge to permanent and full time placement in the mainstream classroom. 'Classic' NGs, as described by Bennathan and Boxall (2000), consists of 10-12 children and are part of a mainstream primary school. They are run by a teacher and a teaching assistant for approximately 9 out of the 10 weekly sessions with the remaining session being spent in the mainstream classroom.

The role of NG staff is to understand the consequences of gaps in early experiences and to meet the child at their emotional development stage. Adults model how to support, consider, listen and express their wishes to each other in a socially competent manner. This is completed within an environment which is safe, secure, predictable and nurturing. Children receive emotional acceptance and differentiated teaching whilst accessing the National Curriculum. NGs balance learning, teaching, affection and structure within a home like setting and can be summarised by the following six principles:

1. Children's learning is understood developmentally.
2. The classroom offers a safe base.
3. The importance of nurture for the development of self esteem.
4. Language is a vital means of communication.
5. All behaviour is communication.
6. The importance of transition in children's lives.

The expectation is that after 2-4 terms children would be ready to return to mainstream classes. At this point, it is hoped that their confidence would have increased through academic and social learning, that they are responsive to others, that they have self respect and that they take pride in behaving well and achieving. In theory, this sound promising. However, the important factor is whether this occurs in practice. This is explored more in the following section.

The following literature has been sourced through a number of EBSCO and Pschinfo searches, Google scholar online searches, and personal books. To ensure that the research was viewed from a variety of perspectives, a number of differing search terms were used. For example, I used the terms 'nurture group effectiveness', 'success of nurture groups' and 'difficulties with nurture groups' to evaluate the success of NGs. When exploring the literature around partnership working with parents, I used terms such as 'parent partnerships in nurture groups' and 'partnership working with parents in education'. When reading this literature, I became aware of further relevant research in the field and found these directly on the same search engines detailed above. Furthermore, through discussions at the Video Interactive Guidance (VIG) training at University College London on the 9th and 10th of July 2009, I was signposted to relevant literature around VIG. Through my VIG supervisor, I also gained access to Spinlink, a website which collates published research from Europe on VIG.

3 Review of Nurture Group Literature

3.1 Are Nurture Groups Effective?

One of the most significant studies in the field is a large retrospective study carried out by Iszatt and Wasilewska (1997). They found that of 308 young people placed in six NGs since the 1980s, 87 percent were able to return to mainstream classrooms after a placement of less than a year. This group was revisited 7 to 11 years later. It was revealed that 83 percent of the original cohort was still in mainstream schools while only 4 percent required additional resources and expertise outside of the schools resources. Thirteen percent of the NG pupils required statements, of which 11 percent required placement in special schools. This was compared with a small control group of 20 children who had been assessed as having the level of difficulty to justify NG placement and there were much higher levels of persistent difficulties. Thirty five percent of these pupils were placed in special schools and only 55 percent managed to cope in mainstream schools without additional support.

Although the study was conducted 12 years ago, it identifies significant positive outcomes for young people 11 years after they had attended NGs. However, without adequate matching measures it is difficult to interpret the significance of differences in outcomes for the two groups. A more recent, albeit small-scale study by Sanders (2007), incorporated a matched control group into the design. Findings support the above study. As measured by the Boxall profile, children in the intervention group made statistically significant greater gains in comparison to the control group.

This is supported by a subsequent study by Binnie and Allen (2008). A within-group, repeated measures design with 36 NG children (within 6 NGs) was adopted to measure the impact of the intervention. The mean scores for all children improved on the developmental and diagnostic strands of the Boxall profile, the

Behavioural Indicators of Self Esteem Scale and Strengths and Difficulties Questionnaire (SDQ). Furthermore, evaluative feedback from 30 parents was 100 percent positive. However, due to the small scale of the study and the lack of a control group, the results need to be interpreted with caution. The observed differences may be attributable to the effects of natural progress made with time.

The same limitations apply to the recent study of four Cornish NGs. Nevertheless, it demonstrates that mean Boxall scores for all the NGs improved following the provision, while attendance rates improved for some NGs (Philips, 2008). However, the lack of statistical analysis further limit the generalisability of these findings.

In contrast to the above studies, Cooper and Whitebread (2007) provide evidence from a systematic, longitudinal, large-scale study which recorded the progress of 546 pupils from 11 Local Authorities. This study had 4 control groups allowing comparisons to be made between SDQ scores. As one would expect, the improvement rate for NG pupils was significantly greater than that of pupils who did not have SEBD in mainstream schools. Although there were differences, the difference in SDQ improvement rates between NG pupils and pupils with SEBD in a mainstream class was marginally not statistically significant. However, as with the studies outlined above, repeated measures analysis of Boxall scores showed a statistically significant improvement for pupils after NG provision.

Unlike the above study, Cooper, Arnold and Boyd (2001) found that there was a statistically significant difference in the SDQ scores between term 1 and term 2 when compared with the 2 control groups. In this large-scale study involving 342 pupils, Boxall Profile scores also improved significantly. However, the pupils in the control groups also made improvements to a lesser degree. Therefore it is important to question whether the measured improvements were due

to natural improvements made over time and whether they would be maintained.

The following year, O'Connor and Colwell (2002) aimed to answer this question. Boxall scores were obtained for 68 pupils before NG provision, upon exit of the group and 2 years after. In the short term, NGs were found to be effective (although there was relapse within 4 of the 20 sub strands of the Boxall Profile). In the long term, benefits were less clear as there was no significant improvement in 10 of the 20 sub strands. Although different measures were employed, this contrasts with the positive long term findings by Iszatt and Wasilewska (see above) (1997) where the majority of pupils (83%) were able to reintegrate back into mainstream schools.

O'Connor and Colwell's (2002) finding is significant. Despite the cost of NG placements being less than residential school placements and less than the average costs attracted by Statements for pupils with SEBD (Iszatt and Wasilewska, 1997), NG's are a costly provision when the ratio of adults to pupils is considered. Long term changes need to be made to justify costs and to allow these children to grow emotionally and socially within society.

The research has revealed that a significant number of children do make social and emotional gains after placement within a NG. However, as highlighted in the above study, not all children make the same improvements. For example, Gerrard (2006) found that one of the thirteen schools he examined did not make statistically significant improvements on the Boxall Profile. Furthermore, four out of fifteen schools measured no significant difference on SDQ scores.

Similarly, Cooper and Tiknaz (2005) explain how three pupils from two NGs were identified as not making any progress in their social and emotional development. In addition, Sanders (2007) reports how NG children had not been able to transfer skills learnt in the NG into

the playground. The research evidence is therefore not definitive; not all children appear to flourish with the provision. Clearly there are differences in the robustness of research designs which may contribute to these inconsistencies, however, this also leads to the question about what is it about some NGs that is particularly successful? This is explored in more depth in the following text.

3.2 What makes a Nurture Group Successful?

A comprehensive analysis by Cooper and Whitebread (2007) identified variability in the success of NGs. They classified these factors into school, structural, child-related and organisational factors (summarised in Table 1).

Table 1: Factors affecting the effectiveness of Nurture Groups (Cooper and Whitebread, 2007)

School Related Factors	Structural Issues	Child Related Factors	Organisational Factors
Replacement of staff during running of group (head, NG staff)	Age distribution of pupils within NG	NG pupils level of English fluency	Length of time NG had existed
Quality of whole school teaching	Balance of male and female pupils	Pupils' National Curriculum attainment levels	Proportion of school week pupils spend with NG
	Balance of SEBD types represented in group		

Findings from this study also demonstrated that greatest improvements were made between the 1st and the 2nd term and that groups established for more than 2 years showed a greater rate of improvement. Variability in these factors may therefore explain in part the earlier question about why some children do not seem to make the same progress.

Cooper and Tiknaz (2005) employed a case study approach to identify factors that contribute to the success of NGs. They revealed variables on a more interactional level rather than on a pragmatic scale as presented above. They found that the balance of SEBD types in group, peer relations in the group, communication between staff, individual staff skills and the quality of interactions among NG staff and between pupils all contributed to NG success. For example, one class teacher reported;

> "about the communication; the lines are a bit fuzzy to me- what the Nurture Group is responsible for and what I am responsible for…"

(pp. 218)

This is analogous with some other studies. Gerrard (2006) and Binnie and Allen (2008) highlight how liaison between the class teacher and NG teacher could be challenging. Sanders (2007) also concluded that it was important for all staff to be briefed about NG principles and that more successful NGs involved whole school staff and children for certain activities. Remarkably, there was no commentary on involving parents with these activities too.

Conversely, Cooper and Tiknaz (2005) highlight how involving parents can be a challenge for NGs. This is apparent in the following NG teacher's comment;

> "There is a huge gap between the attitude at school and attitudes at home… obviously, the school has no importance and the people at school are useless… he is being told off at home which (means) he is very confused…there is a huge amount of confusion in the child's mind."

(Cooper and Tiknaz, 2005, pg 216)

Interestingly, it is not only the NG teachers who appear to be perplexed about the challenge of parental involvement. The challenge is echoed and demonstrated in the following statement by a parent of a child attending a NG;

"... I see his class teacher, but I don't see his nurture group teacher. I feel I don't know what goes on in the group. I need to understand what he is doing a bit more."

(Cooper, 2004, pg 43)

The qualitative research evidence clearly illustrates the importance of communication at all levels. At this point, it may be useful to refer back to the research findings of O'Connor and Colwell (2002) where long term benefits of NGs for some children were questioned. They argue that to maintain short term benefits, these children require a degree of nurturing in the mainstream classroom. This is a particularly salient point for children whose home circumstances remain unchanged. They argue that a child's school experience and home life are intrinsically linked and that the success of any intervention depends on support from both areas.

Bomber (2007) supports this, arguing that children with insecure attachment styles can become confused when they are given 'good enough' education. Differences between the different environments become apparent and they may need to reframe their existing relationship templates as a result. In congruence with my research aims, she emphasises how inconsistencies between home and school need to be addressed.

Surprisingly few studies discuss the importance of parental involvement in NG success. This perhaps reflects a culture where school and home are viewed as different entities. The following text explores the notion of parental involvement in more depth.

3.3 Parental Involvement in Nurture Groups

> *"Partnerships with parents play a key role in promoting a culture of co-operating between parents, schools, LEAs and others. This is important in enabling children with SEN to achieve their potential. Parents hold key information and have a critical role to play in their children's education."*
>
> (2.1 & 2.2, SEN Code of Practice 2001)

Parental rights have not only been outlined in the Code of Practice (2001) but the need for commitments to parent partnerships has also been made explicit in the Education Acts (1988, 1992 & 1993), Excellence for all Children (DfEE, 1997), Every Child Matters (DfES, 2004) and Care Matters (DfES, 2006). Evidence suggests that when settings collaborate with parents as respected partners there are positive social and emotional outcomes for children and parents (Cooper, 2004).

Parental responses to NG placement seem to be a key issue for NGs (Cooper, 2004). As identified earlier, if the assumption is that children have missed out on early experiences which are essential for development, then parents may feel criticised about their ability to nurture and provide valuable experiences.

In an attempt to counteract this, NG staff are trained to be non-judgmental, positive and to develop empathy for both children and their parents. Bennathan and Boxall (2000) emphasise that with the right tools and with collaborative work with teachers, parents and children, difficulties can be overcome. However, Bennathan and Boxall (2000) do not detail how to approach partnership working with parents. Suggested strategies include relaxed and enjoyable parent's evenings and flexibly timed informal meetings.

Binnie and Allen's (2008) study provided some optimism on providing an explanation of successful partnership working. The NG provision being evaluated incorporated Surestart staff who offered training to families. However, once again, there was no discussion on whether it was effective and if it was, what made the support programme successful.

As within the literature, the notion of parental involvement seems to be hazy in practice, making me question if parental involvement is a priority for NGs. For example, when Binnie and Allen (2008) asked staff about the opportunity the intervention offered, only three out thirty three comments noted how involvement of parents had been valuable. Furthermore, Cooper and Lovey (1999) asked thirty four delegates how schools were affected by NGs. Only two talked about the relationship between staff and parents. Gerrard (2006) also reports how only one out of eight head teachers responded that parental involvement was a positive contribution of NGs. Yet despite this, research suggests that parents view NG positively once they have had direct experience with them (Binnie and Allen, 2008; Bishop & Swain, 2000a; Bishop & Swain, 2000b; Cooper, 2004; Cooper, Arnold & Boyd, 2001; McKerrell, 2004; Sanders 2007).

Perhaps guidelines on partnership working are hazy due to complex obstacles this joint work carries. Bishop and Swain (2000a, 2000b) identify that the nurturing of parental involvement in inherently problematic. In their case study (2000b), they identify how professional viewpoints on 'partnership' working were perceived as training parents through modeling and expert advice and 'bringing them in' to talk about the difficulties the NGs experienced. This communication tended to occur in the form of 'feeding back' rather than 'feeding forward' and occurred when the NG deemed it to be necessary. This suggests that in practice, the meaning of 'partnership' can be problematic as a particular form of home-school relationship is often fostered.

Cunningham and Davis (1985) recognise three models of partnership working. Firstly, the 'expert model' is a model whereby professionals have control over interventions. The second is the 'transplant model' in which the skills and expertise of teachers are passed on to parents. In contrast, the 'consumer model' allows for a more equal partnership in which the knowledge and rights of parents are recognised.

Through my exploration of literature, it is evident that the 'transplant model' is frequently employed in NGs. For example, Binnie and Allen (2008) cite how several parents benefited from access to the parents programme provided by staff and that parents had daily feedback on how their children were progressing. Generally this communication fits in with the transplant model whereby communication is led and initiated by professionals. Nevertheless, there appears to be some recognition that communication with parents is important. One NG teacher expressed how it was important 'to keep the lines of communication open' with hard to reach parents (Bishop and Swain, 2000b).

Cunningham and Davis (1985) are critical of the transplant model that seems to be employed as the setting retains control, and it is therefore not a full partnership. Dale (1996) also criticises the model as it ignores differences in parenting (e.g. culture, relationships, values, family resources). This may account for some of the difficulties surrounding partnership working.

I believe that Bishop and Swain (2000b) also manage to reveal an important factor which they feel makes partnership working with parents difficult. When parents and professionals have a different focus it can be a challenge to work collaboratively. For example, the main concerns of the parents may be to keep their child in mainstream provision and in supporting the school in this, whereas the main concerns of the NG may be the management and control of

the group and about engaging parents in nurturing principles at home.

This correlates with the views of Pinkus (2005) who identified that translating partnership theory into practice has often proved to be difficult. Although this research studied the relationships between parents of children with special educational needs and did not specifically focus on parents from children in NGs, it managed to uncover aspects of partnership working that are applicable within the NG context. From her semi-ethnographic research, she concluded that four features in particular were identified by parents as being essential to combating this state of 'partnership paralysis', these were:

- Consensus about the purpose of the partnership.
- Clarity as to who is in the partnership and why.
- Enabling equal power distribution between the partners.
- Implementing transparency and accountability mechanisms for monitoring the partnership.

Pinkus (2005) therefore manages to expose components of successful working which could be applied to a NG setting. She stresses that the beginning of relationships seemed to be particularly important (to set short, medium and long term goals). In addition, her case study approach revealed that the ongoing sharing and planning process was also significant with professionals needing to adapt and evolve with the parents. She found that parents consistently felt disempowered as their involvement often seemed to be tokenistic and that information provided to parents was not consistently accessible.

In the following section, I introduce Video Interactive Guidance (VIG) as a tool that can be used when working with parents to help translate the rhetoric of partnership working into practice.

4 Video Interactive Guidance

4.1 A tool to Facilitate Partnership Working?

The rationale for including VIG as a method of working with parents is clear as it has been proposed that it facilitates empowerment, partnership and respect (Brooks, 2008). The method was developed in the Netherlands in the early 1980's to support communication in families whose children were in residential care. It is based on the notion that everyone has a desire to communicate, that this can done in a number of ways and that everyone can develop their communication skills and relationships.

In brief, VIG involves cycles of filming, analysis and discussion of filmed interactions (e.g. of parent and child). The VIG 'guider' encourages the client (e.g. parent) to identify existing positive strategies, the subsequent emotional responses and to apply these more attuned responses to other interactions that are not working as well. It explicitly links communication to emotional meanings in a solution-focused approach.

VIG seems to fit in with a consumer model of working as described above. Wels (2004) supports this, explaining that it promotes empowerment as it accepts parents as they are, as well as strengthening their skills rather than identifying their weaknesses. Most importantly, parents discover these skills themselves instead of being advised by professionals. It is collaborative rather than prescriptive and empowering rather than de-skilling. Theoretically, it fits in with Vygotsky's (1978) concept of the 'zone of proximal development', Bruner's (1996) idea of 'scaffolding' and Feuerstein et al. (2004) Mediated Learning Experience. In addition, Bandura (1997) sees the advantages of individuals observing themselves as it provides guidance on how to perform while strengthening beliefs of an individual's capability.

4.2 Research into the Effectiveness of VIG

A Dutch meta-analysis by Bakermans- Kranenburg et al. (2003) explored the findings of 51 randomised intervention studies involving 6282 mothers. They reported that interventions with video feedback were more effective than interventions without video feedback.

A subsequent small-scale study by Simpson, Forsyth and Kennedy (1995) compared the first and final films of a VIG programme with five families. Alongside additional qualitative information from interviews with the families, the researchers concluded that parents' strategies for managing their children became more flexible, that more time was spent in attuned interactions and that parents felt more confident. However, without comparisons to a control group, it could be possible that changes occurred as a result of others factors, and not because of VIG.

More support for VIG was generated through a large-scale study by Juffer et al. (2005) which unlike the above study, adopted a randomised control trial for 130 families with 6 month old adopted babies. The short term intervention of video feedback with a personal book significantly reduced the rate of disorganised attachment of babies at 12 months. However, these findings need to be interpreted with caution as the study looked specifically at young children in adopted families which is not necessarily generalisable to children in a NG.

Another study was completed the following year by Velderman et al. (2006) involving mothers and their infants (no adopted children). However, it was also implemented with infants who were aged 7-10 months so generalisability to other age populations is limited. As in the study above, Velderman et al. (2006) employed a randomised control trial design for 77 mothers to compare if Video Feedback was more effective than a control and whether results could be enhanced if video feedback was used alongside a book aimed at affecting the

mother's representation of attachment. Once again, in the short term, in both the intervention groups mothers were significantly higher in their maternal sensitivity.

In addition, Velderman et al. (2006) explored long term findings. There were also positive; three years after the intervention, children from the video feedback intervention group showed fewer externalising behaviour problems, although interestingly, children from the group where mothers had the book and video feedback were comparable to the control group. The authors suggest that the representational book may have left mothers feeling uncomfortable with tension caused in the attachment discussions or that this may have taken away the focus of the video feedback aspect of the programme. This could account for why they did not measure the same long term benefits.

Further support of VIG as a method emerged from a large-scale meta-analysis of 29 studies (total of 1844 families) by Fukkink (2007). This analysis showed statistically significant positive effects of video feedback interventions on the parenting behaviour and attitude of parents. Further analysis was conducted by Fukkink (2007) comparing VIG with other family support programmes. Although VIG had a greater effect size in comparison to the other programmes, this was not statistically significant.

This literature review has identified an increasing body of evidence which supports VIG as a method although there are some inconsistencies. For example, Juffer et al. (2005) found that the video feedback intervention was not completely successful in changing insecure avoidant and ambivalent attachment styles. Furthermore, Fukkink (2007) found that positive changes in parenting behaviour and attitudes were smaller if parents belonged to a 'high-risk' group (Fukkink, 2007).

A particularly salient feature of VIG was identified by Simpson, Forsyth and Kennedy (1995) in their study. They found that although all of the families changed in positive ways as a result of VIG, the nature of the change was unique to the family and not always in the direction that the psychologist might have expected. I therefore feel that VIG fits with a consumer model of working as it is capable of empowering families in ways that are specific to their situation and which they have an element of control with.

Once again, it is important to query why the effectiveness of VIG varies. Bakermans- Kranenburg et al. (2003) found that shorter programmes (less than 5 sessions) proved to be more effective than longer programmes (5-16 sessions). This is analogous with Fukkink (2007), who concluded that shorter VIG programmes focusing on specific behavioural elements appeared to be more effective in improving parenting skills.

Differences in research robustness may also account for inconsistencies in research findings. Although standardised questionnaires and profiles are employed, they are often triangulated with observations and information from interviews which may include bias by the experimenters. In addition, we are all aware of our behaviour while being videoed and as a result, may be inclined to change our behaviour. Therefore, the recorded interactions may in fact not be a true representation of their communication style.

A further explanation is provided by Kennedy and Sked (2008) who suggest that the effectiveness of VIG is influenced greatly by the quality of the relationship with the client. A further interesting point was made by Biggs (1983) who suggests that video usage has inherent dangers in terms of the power relationship between the professional and client. To counteract this, Simpson, Forsyth and Kennedy (1995) argue that the guider needs to clarify with the client if their insights are compatible, respect their superior personal

knowledge of the situation, use the contact principles themselves in their communication with the clients and ensure that the client understands that they (the clients) own the video materials. They emphasise the importance of building a trusting relationship with parents. Perhaps this relationship is the distinguishing feature of VIG that guides its success. Before concluding, the notion of relationships is discussed further.

4.3 Is it all about the Relationship?

When reflecting on this literature review, it became evident how one theme in particularly threaded itself into all the areas. The concept of relationships seems to underlie best practice within NGs and when working with parents.

It is clear that good communication is at the heart of best practice in psychology. Egan (2002) supports this, claiming that competence in communication and interpersonal skills is critical for helping. Evidence also suggests that a good alliance predicts good outcomes (Horvath and Greenberg, 1994). Appreciation of the importance of emotional expressive dialogue was acknowledged through the British Psychological Society's declaration of 2005 as the year of the relationship. In addition, attachment theory and NGs are underpinned by the constructionist perspective that children construct knowledge through their interactions and relationships with others.

Research by Lambert (1992) found that the quality of the relationship with the client was a more important contributing variable than programme choice, suggesting that sensitivity and responsiveness can promote long lasting positive change. This will clearly directly influence my research in terms of the relationships that I plan to form with the people I work with.

This research also implies that regardless of the method, be it VIG or another programme, the relationship has an overriding power to

affect change. Although early on in my training of VIG, I feel that as a Trainee Educational Psychologist with limited experience of working with theoretical frameworks, VIG helps me to determine a structure to my approach. Vermeulen (2006) also argues an important point explaining that because VIG is a positive approach, it has a positive effect on the relationship between the guider and client.

5 Conclusion

5.1. Summary of Review

The review has examined small-scale and large-scale studies which show potential social and emotional gains following NG provision (Bennathan, 1997; Binnie and Allen, 2006; Bishop & Swain, 2000b; Cooper, Arnold and Boyd, 2001; Cooper and Whitebread, 2007; Iszatt and Wasilewska, 1997; O'Connor and Colwell, 2002; Philips, 2008; Sanders, 2007). However, a smaller body of conflicting evidence has identified that not all children make the same progress (Cooper and Tiknaz, 2005; Gerrard, 2006; Sanders, 2007). I question why these differences exist and plan to provide some explanations in the subsequent research.

The studies have varied in their robustness, however, it needs to be appreciated that within real world research of this nature, it is often challenging to compare NG children with matched pupils receiving no form of additional provision. Experimenter bias may also be apparent as measures are often required to be recorded by staff as they understand the child's developmental progress thoroughly. There appears to be some discrepancy in the improvements measured by SDQs and Boxall. A possible explanation could be that unlike the Boxall, the SDQ is not a tool designed specifically for measuring children's emotional and behavioural difficulties.

Despite these differences in research design vigour, various organisational, structural, school and child related factors were

identified as variables that may account for this difference (Cooper and Whitebread, 2007). In addition, interactional factors were also found to influence this success (Binnie and Alen, 2008; Cooper and Tiknaz, 2005; Gerrard, 2006; Sanders, 2007).

Although research pointed out that partnership working with parents was crucial and beneficial to children, it was found to be a particularly challenging task for NGs. While parental participation seems to be valued, practices involving parents in an empowering way remained undetected with involvement occurring in the form of 'feeding back', rather than feeding forward. The complexity of this partnership working may account for why few guidelines have been published.

The review revealed that the philosophy underpinning VIG seems to support an empowering and collaborative model of working with parents. Generally research into VIG supports it as a method for improving communication (Bakermans- Kranenburg et al., 2003; Juffer et al., 2005; Simpson, Forsyth and Kennedy, 1995; Velderman et al., 2006). However, the reviewed literature has not specifically used VIG for children in NGs so needs to be interpreted with caution.

The importance of relationships has entwined itself throughout the review. Perhaps this pertinent point reflects the idea that to develop children's skills with relating to other people, professionals need to firstly develop their skills when relating to parents.

5.2 Where next?

A literature review by the DfES (2003) on the impact of parental involvement concluded that parenting programmes had a positive long term impact on the well being of parents and on the behaviour of children. However, it did not convincingly outline the most effective methods of working with parents. The reviewed research has also not revealed how to foster partnerships with parents of children in NGs.

In agreement with Sanders (2007), I feel this needs to be explored further.

In addition, VIG research has previously been centred around pre-school children and not school age NG children. As a result of mostly collecting data from infants, children's perceptions of how their relationships with their parents might have changed as a consequence of VIG has not been gained. Furthermore, research has not investigated how VIG can be used as a tool in NGs to foster working relationships with parents and what the possible benefits of this might be. After all, research that explores effective communication styles is crucial when supporting the complex needs of children with their communications and relationships.

5.3 Research Outline

Considering the existing research literature, it is clear that more needs to be learnt about these areas. For Phase 1 of this research, I aim to explore how to foster partnership relationships with parents to ensure that nurturing practices are more consistent across settings through a qualitative approach. Phase 2 aims to evaluate social and emotional outcomes for children and their families using a mixed methodology design. My research aims to explore this through the following five research questions:

1) How can we effectively develop consistency in nurturing principles at home?

2) How can we effectively develop consistency in nurturing principles at school?

3) What is the best practice for developing and maintaining effective partnerships with parents?

4) What positive implications does this partnership working have on social and emotional outcomes for young people?

5) What are the most viable methods of gathering data in this research area?

Word Count: 6598

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