

Pyramid Clubs

Building friendships, creating confidence







Pyramid clubs – update May 2019

- What Pyramid is
- Accreditation/theory of change
- Secondary school research
- SEND pilots and planned research



What is the problem?



Pyramid

- Symptoms of half of all adult mental health problems are apparent by the age of 14 (DH, No health without mental health, 2011)
- One in eight 5-19 year olds has a mental health disorder, one in 20 has two disorders, and emotional problems are more prevalent, especially in girls (NHS Digital, Mental Health of Children and Young People in England, 2017)
- Unhappy, anxious or worried children find it difficult to concentrate and to learn in school
- Children who do not ask for help often do not get it

Why do we need to do something?

- One in four people will experience mental health problems during their life (or every year?)
- Promoting good mental health and intervening early can prevent serious illnesses from developing or prevent them from becoming as severe as they might otherwise
- Children deserve to have happy childhoods





What is the Pyramid intervention?

- A proven early intervention early in the child's life and in the course of their problems – to build self-esteem, resilience and social skills
- Group work for those aged 7-14
- Low key, fun, non-stigmatising, non-clinical, low-cost
- Targeted at the quiet, shy, withdrawn, anxious, unhappy, those finding it difficult to make friends, those missing out, often overlooked and possibly underperforming in school



What is a Pyramid Club?

- Normally run after school for 1.5 hours, once a week for 10 weeks
- Involves 8-12 children and 3-4 club leaders, volunteers or paid
- Leaders trained in advance in supporting children's social and emotional development
- Fun and nurturing activities food, games, art and craft and circle time
- Activities are planned to meet the needs of the group, and in accordance with the group's interests and preferences





The Pyramid child or young person

- Young carers, abused children
- Illness in the family
- Bullied picked on because of appearance, family background, ability, ethnicity/faith etc.
- Struggling with school work OR exceptionally bright
- Lots of (often undiagnosed) children on the autistic spectrum
- Recent arrivals to country, area, school
- Simply guiet, anxious and withdrawn











Formalising the model - accreditation



As funding became more difficult after 2010, the importance of formal accreditation grew so UWL applied for Project Oracle accreditation in 2014.

In 2017 the primary and transition variants of clubs were included in the Early Intervention Foundation (a government 'What Works' centre) Guidebook, and in 2019 the secondary school clubs were added.







Other recognition





Included as a validated small group work intervention on the Mentally Healthy Schools website (primary schools).

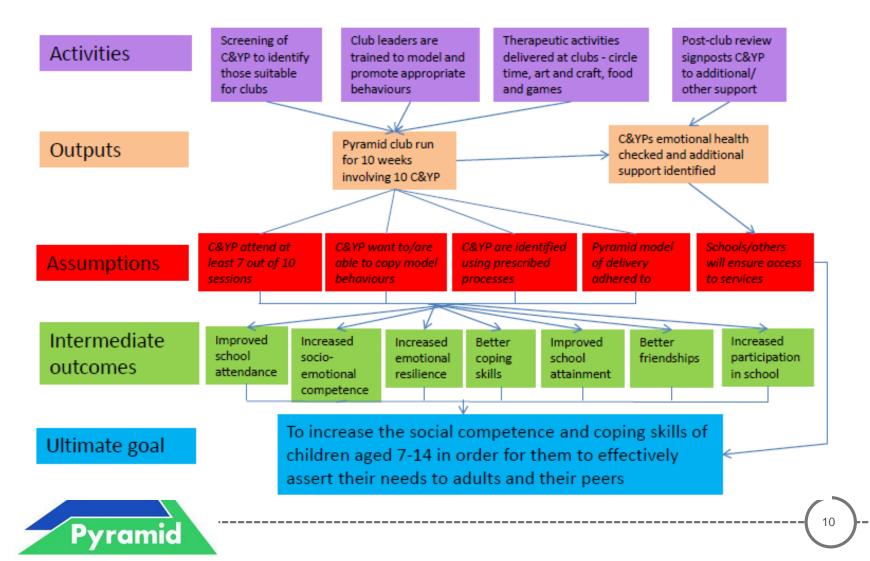
Also included in the Youth Wellbeing Directory on

the Anna Freud website (clubs for ages 7-14)



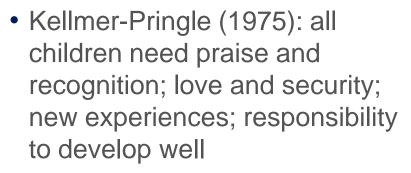


Pyramid theory of change



Theories/concepts that underpin the model

- Schiffer (1976) argued that the over-riding 'social hunger' of latency-age children is for acceptance by their peers, which group work can provide
- Kolvin (1981) reported on different types of intervention to support children at risk of maladjustment in Newcastle and found that short-term activity groups were most beneficial



- Risk and resilience: children are identified because they are at risk, and the club helps develop resilience in the child
- Positive psychology
- Solution-focussed brief therapy
- Cognitive behavioural therapy
- Play therapy



Developing a research base





- Importance of academic research, not just evaluation, was recognised early on and a tool selected (Goodman's SDQ) that government went on to mandate in schools
- Importance of longitudinal research
- UWL been involved in Pyramid primary school research – papers published since 2007 by Ohl et al
- Other universities including Manchester, UCL and Ulster also published papers on primary school work
- Research by Dr Michelle Jayman into Pyramid in secondary schools

Mental well-being: the role of schools

A common access point for mental health services?

- Better placed to address school-related stressors
- Can ease the pressure on specialist CAMHS
- Facilitates a wider culture within schools that values mental health and wellbeing
- Clearly now government's expectation

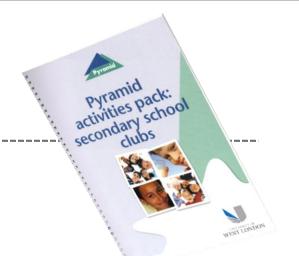
But..

• Competing school priorities; schools can be overwhelmed; lack of funding in schools





Aims of the research



RQ1. What impact does the Pyramid intervention have on the emotional health of early secondary-aged pupils?

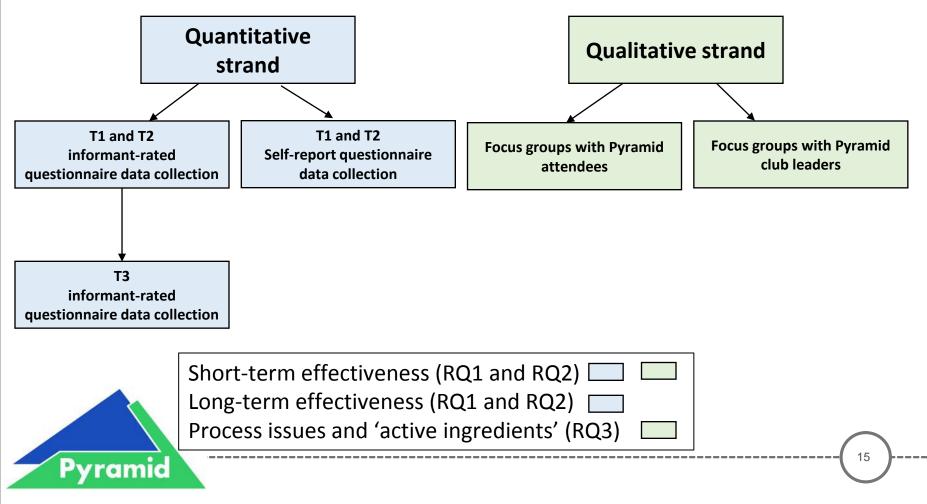
RQ2. What impact does the Pyramid intervention have on pupils' school performance?

RQ3. What are the intervention's 'active ingredients' that bring about change in recipients?



Mixed methods design

- Participant schools (n=8)
- Pupil participants (n=126: 66 Pyramid group; 60 matched comparison group)



Quantitative results: a snapshot

- Objective and subjective measures (SDQ) of SEWB demonstrated significant improvements in SEWB for the Pyramid group at short-term and longer-term follow-up with large effects
- Replicated findings from primary school studies

	UK SDQ norms: (age11-15) Mean (SD)	Baseline (T1) Mean (SD)	Post-test (T2) Mean (SD)	12-month follow-up (T3) Mean (SD)
	6.30 (6.1)			
Pyramid group (n=60)		14.40 (4.94)	9.24 (5.43)***	9.11 (5.42)***
Comparison group (n=66)		5.43 (5.09)	5.20 (5.40)	5.61 (5.50)
** p <.001				

Table 1. Participants' Total Difficulties scores (SDQ: Goodman, 1997) at T1, T2 and T3: informant-rated

Qualitative findings: a snapshot

Thematic analysis of service user and club leader data

- Generated **11** thematic categories and **27** subthemes
- Evidence of impact on socio-emotional well-being and school performance; supporting quantitative findings

Thematic categories with respect to behaviour change

- Behaviour Change Procedures (BCPs): setting; delivery; and content of Pyramid
- Behaviour Change Techniques (BCTs): demonstration and practice; social reward; social support; and goal setting



Qualitative findings: a snapshot

setting

When we came we had our own [personally decorated] mug'

demonstration and practice

'She was like an older sister...like a role model for us'



delivery

'You get to pick what you'd like to do'



content

'We could do more things and be creative'



social support

'Say, if you're having a bad week, I don't know at school, you know that you've got these people'



social reward

'There was a lot of sharing and you'd hear

them say, 'that looks really good'

goal setting

'We played mini games, just to get to know each other'



Published papers

- Jayman, M., Ohl, M., Hughes, B., Fox, P. (2017) Beyond evidence-based interventions: implementing an integrated approach to promoting pupil mental wellbeing in schools with Pyramid club, *Education and Health*
- Jayman, M., Ohl, M., Hughes, B., Fox, P. (2018) Improving socio-emotional health for pupils in early secondary education with Pyramid: A school-based, early intervention model, *British Journal of Educational Psychology,* DOI:10.111/bjep.12225
- Jayman, M., Ohl, M., & Fox, P. (In press). Improving wellbeing for pupils in early secondary education with Pyramid Club: A qualitative study investigating behaviour change drivers. *The Psychology of Education Review*.



Other research impact

Conferences:

•Roehampton University 12th International Conference on Child and Adolescent Psychopathology, 2017

•BERA (British Educational Research Association) Annual Conference, 2018

•BPS (British Psychological Society), Psychology of Education Section, Enhancing Wellbeing in Education, 2018

• Royal Society of Medicine, Psychiatry, Mental Health Interventions in Schools, June 2019

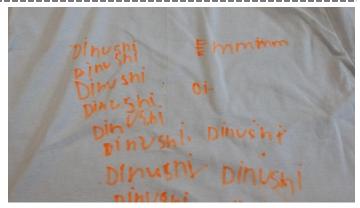
New BERA Special Interest Group

•Instigated a 'Mental Health, Wellbeing and Education' group, with first meeting 12th July 2019 at UWL



Potential areas of development

- Clubs for children with learning difficulties: pilots in 2018 and 2019
- Clubs for children with other disabilities, e.g. visual impairment: pilot in 2018
- Clubs for other ages: 16+ transition to college/work; 18+ transition to university
- Clubs in new markets: private schools, 'paid for' clubs, academy chains
- Clubs in other countries: historic interest from Hong Kong, Australia, Ireland, The Netherlands, Poland







Pyramid clubs for children with SEND

- **Physical and sensory disabilities:** much less of an issue and can generally be accommodated by adapting existing activities within a mainstream group (can provide guidance on most conditions: also see '*Working with children in groups: an A-Z of common conditions*'
- Learning/developmental difficulties: more of an issue due to;
 - pace of group, given variations in individual need
 - incorporating a wide range of different abilities and needs (speech, language and communication; autism; cognitive) often alongside physical disabilities)
 - level/type of activity
 - timing/duration of group
 - establishing a baseline, measuring progress



Adapting Pyramid clubs for SEND children

- Timing of sessions: during the school day, about an hour, seems to work
- **Size of group:** around 10 seems to be fine, but with minimum four and preferably five leaders
- Art and craft: needs simplified for some but not others, so need to be flexible
- Games: children do not always understand the purpose, but love them anyway
- **Food**: more allergies/swallowing issues so needs more thought (may not be needed, depending on timing of club)
- Circle time: simplify themes, but all children clearly want to be heard
- Behaviour management: consistent with school procedures BUT need to allow children to express themselves and have fun



Future direction



- Clubs in Ealing special schools in 2019/20 (other volunteers also welcome)
- Revised materials to support clubs
- Find suitable tools to measure progress
- Set up formal evaluation of clubs
- Seek funding to support the above and to rollout clubs

