Wellbeing in Irish Primary Schools: An Exploration of Educator Experiences of the Three-Tiered Continuum of Support Framework in Supporting Pupil Wellbeing Needs

By

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Abstract

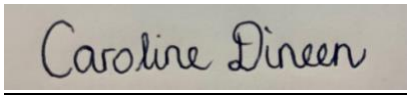
This study explores the experiences of school principals, class teachers, and special education teachers in implementing the three-tiered Continuum of Support framework (CoS) to address pupil wellbeing needs in Irish Primary Schools (Department of Education and Science , 2006). Guided by the second generation of the Cultural-Historical Activity Theory (Engeström, 1987), the research questions aim to explore the dynamics between these key educators and the components of the CoS, emphasising areas of tension, collaboration, and opportunity.

Employing a mixed-methods sequential explanatory design, an online survey was first used to gather quantitative data from a national sample (N=136). The descriptive statistics obtained were utilised to inform the subsequent qualitative phase. Semi-structured interviews were conducted with a subsample of nine participants across various educational contexts and analysed using reflexive thematic analysis (Braun & Clarke, 2021).

The findings revealed insights into existing wellbeing support practices and potential areas for improvement. Opportunities for a more inclusive support system in Irish primary schools are identified, contributing to evolving policy and practice discussions for students with wellbeing needs. By highlighting educators' experiences, this study identified actionable areas for consideration and improvement. It adds valuable perspectives to discussions on effective multi-tiered support on the ground, fostering holistic pupil development within a supportive educational environment.

Declaration

I hereby declare that this thesis is entirely my own work and has not been submitted for any other awards at this or at any other academic establishment. Where use has been made of the work of other people, it has been fully acknowledged and referenced.

Signed: 

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Abbreviations

BPS:	British Psychological Society
CAMHS:	Child and Adolescent Mental Health Service
CHAT:	Cultural-Historical Activity Theory
CoS:	Continuum of Support (framework)
CPD:	Continuing Professional Development
CSO:	Central Statistics Office
DCEDIY:	Department of Children, Equality, Disability, Integration and Youth
DCYA:	Department of Children and Youth Affairs
EP:	Educational Psychologist
DE	Department of Education (from 02/05/2021)
DES:	Department of Education and Science
DEIS:	Education for Persons with Special Educational Needs Act 2004
EPSEN:	Education for Persons with Special Educational Needs Act 2004
GAM:	General Allocation Model
HSE:	Health Service Executive
INTO:	Irish National Teachers Organisation
MIREC:	Mary Immaculate College Research Ethics Committee
MMAT:	Mixed Methods Appraisal Tool
MTSS:	Multi-tiered Systems of Support
NAM:	New Allocation Model
NCSE:	National Council for Special Education
NCCA:	National Council for Curriculum and Assessment

NCLB:	No Child Left Behind Act (USA)
NEPS:	National Educational Psychological Service
PDST:	Professional Development Support for Teachers
RTA:	Reflexive Thematic Analysis
RTI:	Response to Intervention
SET:	Special Education Teacher
SETAM:	Special Education Teacher Allocation Model
SPSS:	Statistical Package for Social Sciences
SSP:	Student Support Plan
SNA:	Special Needs Assistant
UNCRPD:	United Nation's Convention on the Rights of Persons with Disabilities
UNESCO:	United Nations Educational, Scientific and Cultural Organiser
WoE:	Weight of Evidence
WHO:	World Health Organisation

Glossary of Terms

At-risk:	Individuals or groups facing increased vulnerability to negative outcomes due to various factors.
Consultation:	A collaborative process where psychologists provide expertise, guidance, and support to individuals or organisations seeking assistance with specific issues or challenges.
DEIS School:	Delivering Equality of Opportunity in School (DEIS) schools in Ireland are those specifically identified as serving areas with higher levels of socio-economic disadvantage.
Early intervention:	Proactive measures implemented at the onset of challenges or developmental delays to address and mitigate potential issues.
Educational Psychologist/ School Psychologist/ NEPS Psychologist:	Scientist Practitioners, employed by the DE, who apply psychological theory and skills in educational settings to benefit children and young people. They perform duties such as assessment, consultation, intervention, research, and training across systems, groups, and individuals.
Eudemonic wellbeing:	A state of flourishing characterised by fulfilment, purpose, and meaningful engagement with life.
Evidence-based:	Grounded in empirical research and proven effectiveness through data and scientific enquiry.
Hedonic wellbeing:	Focus on pleasure, happiness, and satisfaction with life experiences.
Inclusion:	Where all individuals, regardless of differences, have equal opportunities for participation and belonging.
Mainstream primary school:	Educational institutions that cater to both typically developing children and those with special education needs, with class teachers employing differentiated teaching approaches and additional support provided by special education teachers.
Multi-tiered system of support:	A framework providing various levels of intervention and support tailored to individual needs, typically in education settings.

Protective factor:	Conditions, circumstances, or resources that enhance resilience and reduce the likelihood of negative outcomes occurring
Resilience:	The capacity to adapt, bounce back and thrive in the face of adversity or challenges.
Risk Factor:	Belief in one's ability to accomplish tasks and achieve goals, influencing motivation and resilience.
Socioeconomic disadvantage:	Lack of access to resources and opportunities due to economic and social factors.
Special education needs:	Barriers to participation and academic success, including physical, mental, health, sensory, and learning needs, that may require additional support, teaching, and resources for students to access equitable educational opportunities.
Supervision:	Supervision refers to the professional relationship where a more experienced professional provides guidance, support, and oversight to a less experienced colleague, aimed at enhancing clinical skills, ethical practice, and professional development.
Teacher agency:	The autonomy and ability of educators to make decisions and enact change within their professional roles.

1.0 Introduction Chapter

1.1 Research Area

Against the backdrop of high rates of challenges to the wellbeing of Irish children and young people (Cannon et al., 2013; Dooley & Fitzgerald, 2012; Dooley et al., 2019), the present study explores the implementation of the three-tiered Continuum of Support framework (CoS) to support pupil wellbeing needs in mainstream Irish primary schools (Department of Education and Science [DES], 2007a). Grounded in principles of early intervention and prevention, the CoS ensures that pupils with diverse needs receive the appropriate level of support through the equitable allocation of special education resources. The current study grants insight into the impact of the recently introduced Special Education Teacher Allocation Model (SETAM) (DES, 2017) on educators' efforts to support pupil wellbeing needs within the CoS. The SETAM signifies a departure from the previous diagnosis-based approach to within-school support, which situated additional needs within the child and involved the diagnosis of a condition or disability in order to ascertain individualised teaching support within the CoS (Farrell, 2010). Resource allocation under the SETAM is now needs-based, with school staff granted the autonomy to allocate resources and support based on the student's level of identified needs (DES, 2017). This shift aligns with the global move away from the medical model of disability and further underscores the education system's pivotal role in the prevention, early intervention, and support of holistic pupil needs (Howe & Griffin, 2020). The present study examines how wellbeing needs are prioritised and supported within the CoS under this new allocation model. Recognising the crucial importance of early intervention and prevention in childhood mental health and wellbeing (Weist et al., 2014), the present research has significant implications for shaping effective educational policies and practices. Importantly, this exploration underscores the

paramount role of educators in shaping and implementing support systems, acknowledging their experiences as central in the evolving landscape of pupil wellbeing.

1.2 Researcher's Reflexivity Statement

My passion for supporting childhood wellbeing developed during my years as a primary school teacher in a socioeconomically disadvantaged area between 2015 and 2019. This privileged position allowed me to experience first-hand the profound impact educators can have on the lives of vulnerable children. One moment stands out from my first year of teaching when a young girl from a particularly challenging background approached me and said, "Teacher, I know from your big smile that today is going to be a good day". That moment remains with me as a reminder of the crucial role educators play in fostering positivity and a sense of security in the lives of their pupils. This insight significantly shaped my priorities as an educator navigating the multi-faceted challenges of the classroom.

In my transition from teacher to trainee psychologist, my commitment to supporting pupils at risk of wellbeing difficulties has deepened and taken on a more systemic and solution-focused perspective. Through taught modules and professional placements, I have grown in appreciation of the range of theories, skills, and supports available to educators when addressing pupil wellbeing needs- supports that could have transformed my support of that vulnerable young girl. This journey has cultivated an evolved appreciation for collaborative work in my role as a trainee psychologist, recognising the broad systemic advantages that can stem from partnerships between psychologists, educators, and key stakeholders in the life of the child. Reflecting on my multi-faceted role as a teacher during my early career underscores the importance of understanding the experiences and perspectives of educators navigating daily challenges and expectations on the ground in order to enact meaningful change. Informed by my

personal experiences, evolving perspectives, and a commitment to understanding and enhancing support systems, my dedication to improving the wellbeing journey of ‘at-risk’ children propels the research presented in the current thesis.

1.3 Layout of Thesis

The present thesis structure aligns with Mary Immaculate College's recommendations, comprising three main sections: the review paper, empirical paper, and critical review paper. The review paper comprehensively examines existing literature on childhood wellbeing, the education system’s role, and the CoS as a multi-tiered system of support, considering policy and practice. Following a standard research article format, the empirical paper details the methodology and findings of the present study. The critical review paper encourages reflection and critical evaluation of research findings considering the empirical literature. The thesis will culminate with a discussion of the significance of the present study’s research findings for the future practice of both educators and educational and child psychologists.

2.0 Literature Review Chapter

2.1 Overview of Chapter

The present chapter begins with a brief overview of the research area, followed by an outline of central developments in the policy and practice of wellbeing in national and international education, particularly regarding the support of pupils with wellbeing needs through Multi-tiered Systems of Support (MTSS). The following section includes a systematic review of the literature exploring the perspectives of education staff regarding their use of MTSS to identify, monitor, and support pupil wellbeing needs in mainstream school settings. Lastly, the chapter concludes by elucidating the rationale of the current research project and stating the overarching research question to be explored.

2.2 Research Area

The current research explores the experiences of primary school class teachers (CTs), special education teachers (SETs), and principals regarding their implementation of the Continuum of Support framework (CoS) for pupil wellbeing needs (DES, 2007a). Although the CoS has been recently emphasised as a vital tool in supporting pupil wellbeing needs in Irish schools (DES, 2018), there remains a significant gap in understanding how this framework is practically applied within the diverse and evolving contexts of Irish primary education. Developed by the National Educational Psychological Service (DES, 2006), the CoS is a tiered support system designed to address a wide range of student needs, including academic, social, emotional, and behavioural challenges (DES, 2003, 2007, 2010a). The framework facilitates early intervention and prevention by operating on the premise that pupil needs exist along a continuum and is therefore structured into three distinct levels, with each tier corresponding to the intensity of the support required. In the first tier, Classroom Support, the focus is on general

classroom strategies and universal interventions aimed at early intervention and prevention (Griffin & Shevlin, 2011). The second tier, School Support, involves targeted interventions for pupils requiring additional assistance. The third tier, School Support Plus, is designed for pupils with complex and enduring needs, often requiring collaboration with external specialists (DES, 2007a; DES, 2018; Griffin & Shevlin, 2011). Interventions within the CoS are incremental, guided by ongoing progress monitoring, and supported by tools like the Student Support File (DES, 2017a; NEPS, 2007).

Despite the centrality of the CoS in Irish educational policy, significant gaps remain in the empirical literature regarding its real-world implementation and effectiveness. Specifically, there is limited research on how educators navigate the CoS in practice, particularly in addressing the increasingly complex and diverse needs of students (Curtin & Egan, 2021; Shevlin et al., 2013). While there is a growing global discourse advocating for Multi-tiered Systems of Support (MTSS) like the CoS to ensure equitable access to evidence-based interventions, much of the existing literature on MTSS has traditionally focused on academic needs (Averill & Rinaldi, 2011; Horner et al., 2015). More recent literature examines the application of MTSS to support social, emotional, and behavioural needs (McIntosh et al., 2023; Stodden et al., 2023). However, little is known about multi-tiered support of pupil wellbeing needs.

This gap in the literature is particularly pressing given the increasing complexity of pupil needs, which extend beyond academic challenges to encompass significant social, emotional, and mental health challenges. For instance, national statistics indicate that mental health difficulties often manifest early, with 50% of cases established by age fourteen, yet interventions remain largely inadequate (World Health Organisation [WHO], 2003). This is exasperated by global

concerns such as rising childhood obesity rates, which affect approximately 30% of school-aged children worldwide, and social isolation, reported by up to 20% of children and adolescents in various regions (WHO, 2018; Smith et al., 2020). These multifaceted challenges are increasingly recognised within Irish educational policy frameworks, as evidenced by the Wellbeing Policy Statement and Framework for Practice, which advocates for a more formalised approach to promoting wellbeing in schools (DES, 2018). This highlights the significant momentum currently surrounding the field of pupil wellbeing within educational settings, particularly in the context of Irish primary schools.

The recent shift from a diagnosis-based to a needs-based SETAM in Irish schools has further highlighted the gap in the literature regarding the CoS in Ireland. This new model, which grants educators greater autonomy over the allocation of special education resources, has introduced new complexities in resource distribution and support strategies within the CoS framework (DES, 2017). This shift raises important questions about the consistency and equity of support provided under the CoS. Despite these significant changes, the effective delivery of the CoS, particularly in addressing the increasingly diverse and complex needs of students, has not been thoroughly explored.

The present study seeks to fill these gaps by investigating the practical challenges and successes associated with the CoS framework in supporting the wellbeing needs of Irish primary school pupils. Focusing on the perspectives and experiences of CTs, SETs, and principals—who are pivotal in the CoS's implementation (DES, 2007a)—the study aims to provide a nuanced understanding of how the CoS operates in varying school contexts. Given that schools are dynamic and complex environments shaped by unique cultural, geographical, historical, and policy contexts (Menzies et al., 2021), the insights gained from key educators will be crucial in

initiating a comprehensive exploration of the CoS in supporting pupil wellbeing needs in Irish primary schools.

2.3 Wellbeing

2.3.1 Definition

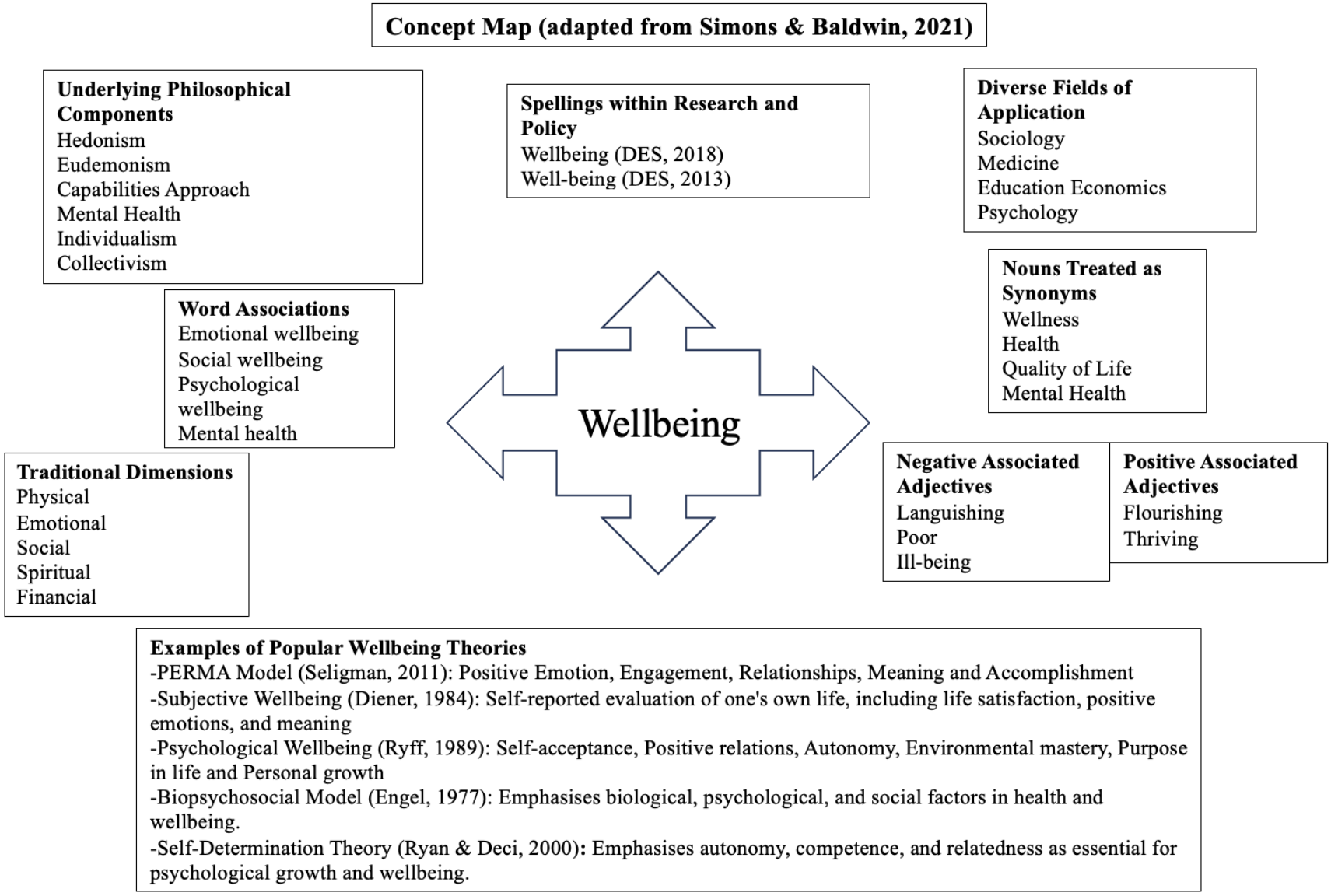
The present study adopts a definition used by the Department of Education (DE; formerly the Department of Education and Science [DES] prior to October 2020):

> Wellbeing is present when a person realises their potential, is resilient in dealing with the normal stresses of their life, takes care of their physical wellbeing, and has a sense of purpose, connection, and belonging to a wider community. It is a fluid way of being and needs nurturing throughout life. (WHO, 2001, as cited in DES, 2018)

While the DE's definition is adopted, it is essential to acknowledge the diverse conceptualisations of wellbeing present in global literature and cross-departmental policies (Bache et al., 2015; Farrell et al., 2024). This is captured in Figure 1, a conceptual map adapted from Simons and Baldwin (2021), outlining key challenges in defining wellbeing, including spelling discrepancies, synonyms, and philosophical and theoretical variations. These insights underscore the intricate nature of wellbeing research and its challenges for researchers and policymakers, "complicating efforts to plan for and monitor it effectively" (Gillet-Swan & Sergeant, 2015, p.146). The researcher acknowledges variations within the field of wellbeing research and adopts the DE's definition in line with recent education policy guidelines in Ireland (DES, 2018). This ensures that the present study's conceptualisation of wellbeing resonates with the population of interest.

Figure 1

Mapping the Complexity of Defining Wellbeing



Note: Adapted from Simons & Baldwin (2021)

2.3.2 Conceptualisation of Wellbeing

As outlined in Figure 1 above, wellbeing is a multifaceted concept that has been conceptualised in various ways across different disciplines. Wellbeing is often understood through dimensions such as physical health, emotional stability, social connectedness, and a sense of purpose. Physical wellbeing often refers to the absence of illness and the ability to maintain a healthy lifestyle (Dodge et al., 2012). Emotional wellbeing involves the ability to manage emotions and develop resilience, which are critical for coping with life's challenges (Ryff & Keyes, 1995). Social wellbeing emphasises the quality of relationships and a sense of belonging within a community (Keyes, 1998), while psychological or mental wellbeing encompasses the capacity to cope with stress, realise personal potential, and engage in meaningful activities (Seligman, 2011).

In educational settings, the conceptualisation of wellbeing often extends beyond these general dimensions to address the specific needs of students, including academic, social, emotional, and mental health challenges. As delineated above in Section 2.3.1, the present study aligns with the DE's definition, emphasising resilience, physical wellbeing, purpose, connection, and belonging (DES, 2018). Drawing on the NCCA's systematic literature, which examines the philosophical and educational foundation of wellbeing, as well as the specific curricular content and methodologies intended to promote pupil learning and development within the context of the new Primary Curriculum in Ireland (NCCA, 2023), the present study acknowledges that wellbeing encompasses physical, emotional, social, and mental health dimensions.

However, the present study places particular emphasis on the mental health dimension, informed by the recognition that mental health is a critical, though not exclusive, component of overall wellbeing. The World Health Organisation (WHO, 2001, 2003) conceptualises mental

health not merely as the absence of mental disorders, but as a state of wellbeing in which individuals realise their abilities, can cope with everyday stresses, work productively, and contribute to their community. This understanding underscores the importance of mental health within the broader framework of wellbeing, especially in educational settings where early identification and support for mental health issues can significantly influence long-term educational and life outcomes (NCCA, 2023).

Nonetheless, it is important to recognise that, while related, mental health and overall wellbeing are not synonymous. As Keyes (2009) noted, the absence of mental health issues does not necessarily equate to complete wellbeing. For instance, a child may not exhibit symptoms of a mental health disorder but may still experience diminished wellbeing due to factors such as social isolation or lack of physical activity. This complexity is heightened by concerns that closely linking wellbeing with mental health may result in pathologising childhood experiences, attributing difficulties solely to the child instead of considering broader environmental factors. (Banks et al., 2012; NCCA, 2023).

Given these considerations, while this study acknowledges the broader concept of wellbeing, it emphasises mental health due to its foundational role in influencing other wellbeing dimensions. For example, emotional wellbeing, closely linked to mental health, includes the ability to manage emotions and develop resilience—skills essential for navigating the challenges of school and life (DES, 2018). However, this emphasis is balanced with an awareness of the broader wellbeing context, ensuring that the study provides a nuanced understanding that can inform effective educational policies and practices, particularly within the context of Irish primary schools.

2.3.3 Wellbeing in Childhood

The present study focuses on the support of pupil wellbeing in Irish primary schools, recognising childhood's pivotal role in shaping lifelong wellbeing development (Bornstein et al., 2003; Davis et al., 2017). Longitudinal studies consistently demonstrate the significant influence of childhood wellbeing on outcomes in adulthood (Olsson et al., 2013; Richards et al., 2011; Wood et al., 2021). Appreciating the multifaceted nature of childhood wellbeing is essential, encompassing cognitive, emotional, social, and physical dimensions that collectively underpin the child's growth and development (Stodden et al., 2023). Existing literature emphasises the interconnectedness of these dimensions, highlighting the importance of adopting a holistic approach to promoting wellbeing development (OECD, 2023, p.23; Stodden et al., 2023). This holistic approach aligns with the DE's multidimensional definition, where cognitive, emotional, social, and physical dimensions interact dynamically (DES, 2018; Knudsen et al., 2006). However, these domains are susceptible to the influence of a range of biological, psychological, and social risk and protective factors which can hinder or enhance the development of wellbeing in childhood.

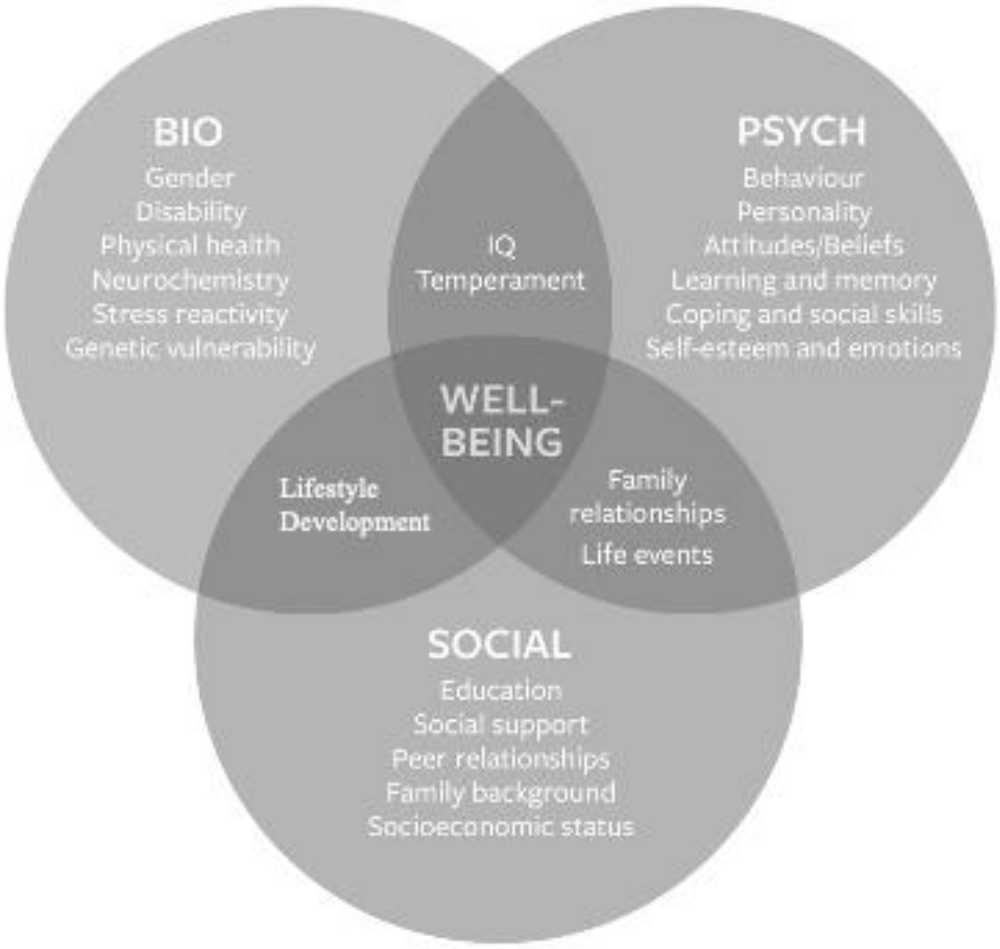
2.3.4 Risk and Protective Factors in Childhood Wellbeing

Wellbeing is inherently influenced by many risk and protective factors that shape children's experiences and developmental trajectories. Informed by the biopsychosocial model (Engel, 1980), these factors span various dimensions that interact dynamically to affect children's overall wellbeing. The National Educational Psychological Service (NEPS) and the DE in Ireland employ this framework to support pupils with social, emotional, and behavioural needs, acknowledging that "humans are complex beings whose functioning is determined by interrelated and interdependent biological, psychological and sociocultural factors" (DES, 2008,

p.3; DES, 2018). As children grow and develop, these risk and protective factors interact and may change in significance, highlighting the dynamic nature of childhood wellbeing (Schofield et al., 2005). An extensive body of research and theoretical perspectives has identified these factors as key drivers in determining children's wellbeing outcomes (Masten, 2014). This will be briefly outlined below, with the support of Figure 2.

Figure 2

Biopsychosocial Model of Wellbeing



From a biological standpoint, genetic predispositions, prenatal exposures, and neurological and physical health conditions can influence a child's wellbeing (Mitchel et al., 2015; Wichstrøm et al., 2012). For instance, hereditary factors may affect a child's susceptibility

to specific physical and mental health issues, such as obesity or anxiety disorders (Wade et al., 2010). Children with complex disabilities, encompassing a combination of biological, psychological, and social factors, are at high risk of co-occurring mental health conditions (Carr, 2015; Pinals et al., 2022). Psychological processes, such as a child's temperament and coping strategies, can affect their ability to adapt to life's challenges (Blatny et al., 2015). Rooted in the parent-child relationship, early attachment experiences significantly contribute to emotional wellbeing and resilience, influencing the child's emotional regulation and self-esteem, and acting as a protective buffer against life stressors (Sroufe, 2005; Cassidy et al., 2008). Intellectual, behavioural, and emotional complex needs arising from disability are linked with increased difficulties in a child's mental health and emotional resilience (Emerson, 2014; Mulvany, 2000).

The social dimension of risk and protective factors extends to the family, peer relationships, and broader community contexts. Adversity or maltreatment within the family may heighten the risk of emotional and behavioural challenges (Baumrind, 1967; Masten, 2011). Low socioeconomic status (SES) consistently emerges as a significant risk factor across various developmental domains (Ayala-Nunes et al., 2017), underscored by access to material and human resources, including adequate nutrition, healthcare, opportunities for intellectual stimulation, and interest in education (Conger et al., 2007; Leventhal et al., 2001). Children with complex needs arising from a disability often encounter barriers to inclusion, face stigma, and experience limited access to social activities, presenting as a risk factor in their overall wellbeing development (Bottcher et al., 2013). Moreover, experiences such as homelessness and refugee or displacement status are found to significantly exasperate the likelihood of mental health challenges, introducing additional stressors that are linked to increased wellbeing needs in various dimensions (Bassuk et al., 2014; Fazel et al., 2012). This is particularly pertinent to the

context of the present study, given reports of a record high of forcibly displaced people globally, half of whom are under 18 (United Nations High Commission for Refugees, [UNHCR], 2016), and Ireland's highest number of children experiencing homelessness since record-taking began in 2014 (Department of Housing, Local Government and Heritage [DoHLGH], 2023).

The school environment, positive relationships, strong social support networks, and access to high-quality education are protective factors that promote children's cognitive, social, and emotional growth (DES, 2018). World Health Organisation (WHO) policy documents underscore the critical role of the education sector in supporting children's wellbeing within the broader ecological context (e.g., 1996, 2001, 2003, 2020). This is unsurprising given the considerable amount of time spent at school during this critical development period, functioning as a crucial component within the microsystem of child development. This is recognised in policy and legislation, with schools uniquely positioned for societal intervention, promoting healthy wellbeing in childhood, providing support for those at risk of increased difficulties, and proactively addressing emerging needs before they escalate. The National Council for Curriculum and Assessment (NCCA, 2017) emphasises that "the day-to-day experience of teaching and learning within the classroom probably provides the greatest opportunity to contribute to student wellbeing" (p.32), with the recently commissioned literature review explicating key educational processes that are pivotal to the wellbeing development of primary aged pupils (NCCA, 2023). This is embodied in the recently revised Primary Curriculum Framework, which includes wellbeing as a central curriculum component, curricular competency, and one of the five broad areas of learning (NCCA, 2023), as outlined further in Section 2.4. With the education system seamlessly bridging ecological systems of development, offering a pathway to mitigate wellbeing risk factors while reinforcing protective factors

(Benard, 1991), it is imperative to consider the ecological nature of wellbeing in education across various systems within the child's life.

2.4 An Ecological Approach to Wellbeing in Education

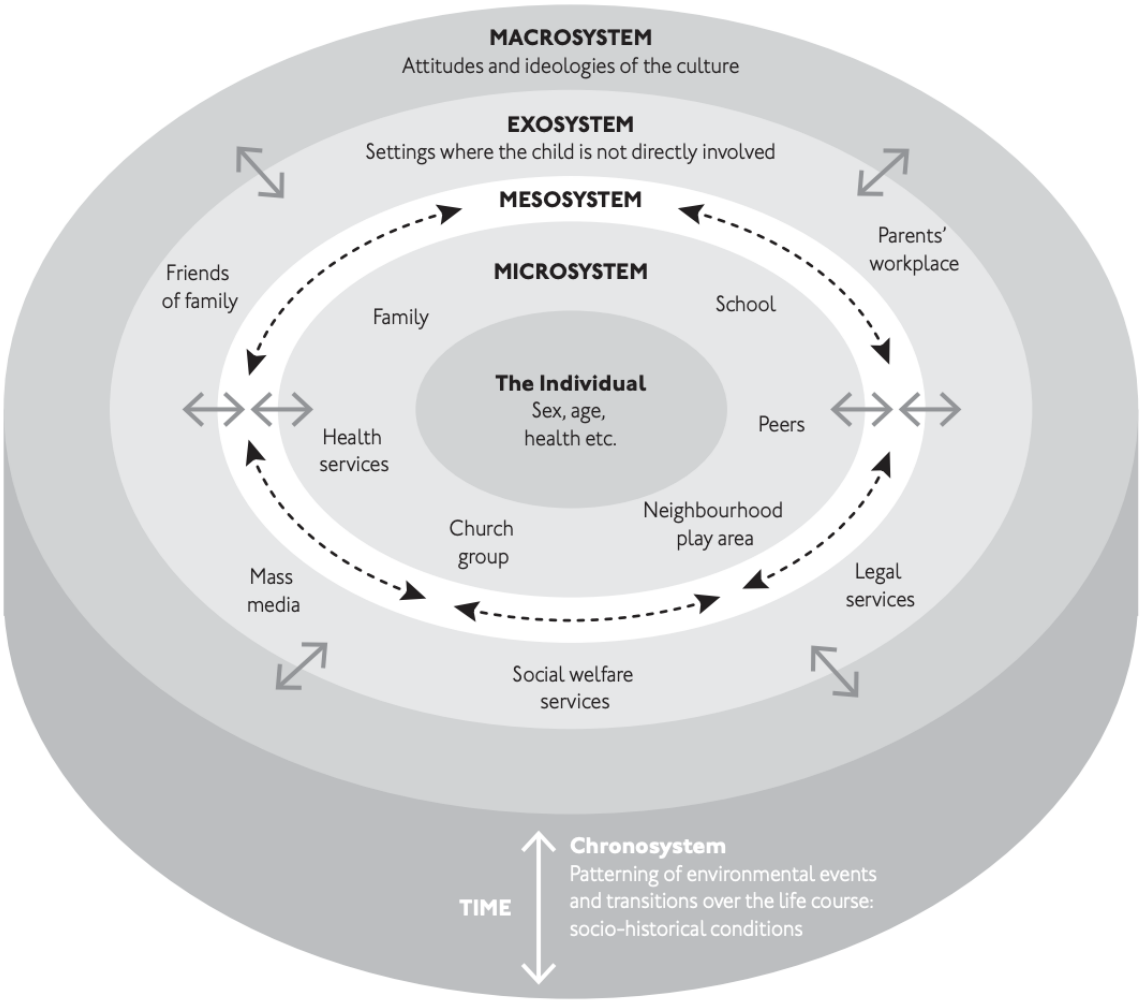
While research in developmental, sociological, and neuroscientific fields has considerably advanced what is known about wellbeing in the lives of children, there is a compelling argument that a more thorough understanding of the phenomenon necessitates an examination of the context in which child development unfolds (King et al., 2013). Set within a larger cultural backdrop, Bronfenbrenner's (2006) Ecological Systems Theory represents a paradigm to situate child development in the context of the multiple spheres of influence (See Figure 3). These spheres interconnect and extend from the microsystem, which involves daily interactions with the child and is recognised as the most critical sphere for development, to the broader and more indirect macrosystem, encompassing cultural and societal influences (Bronfenbrenner et al., 1979, 2006).

The ecological systems theory offers a valuable lens for understanding the dynamic interplay of wellbeing within the education system. It is frequently endorsed by the DE and underpins the Wellbeing Policy Statement and Framework for Practice (WPSFP) in Irish schools (DES, 2018), which provides guidance and direction to schools on supporting the development of pupil wellbeing across individual, relational, social, and community contexts, as illustrated further in Section 2.4.1. Understanding the interconnectedness of macro- and microsystemic influences can provide valuable insights into the dynamics shaping child wellbeing support through the three tiers of prevention within schools. Furthermore, examining the ecological context of the educators responsible for supporting pupils with various levels of wellbeing needs will enrich the subsequent exploration, creating a bridge between theoretical frameworks,

education policy expectations, and the lived experiences of educators using MTSS to support pupil wellbeing needs in Irish primary schools.

Figure 3

Bronfenbrenner's Ecological Systems

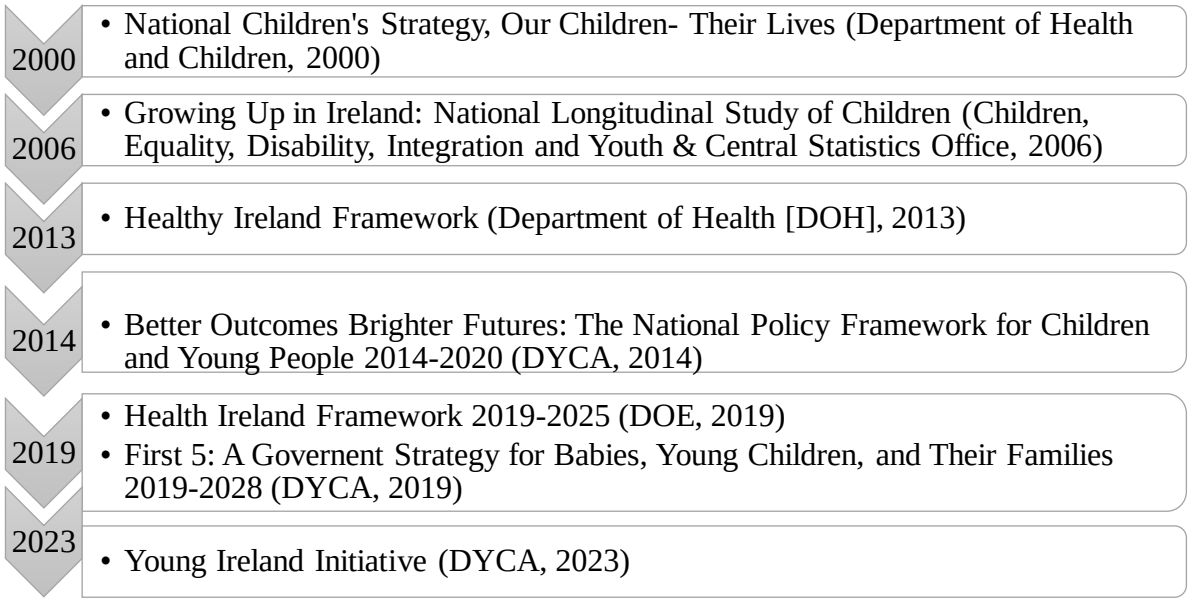


2.4.1 Wellbeing Education within the Macrosystem

Key national policies enacted within the macro-system recognise the connection between a child's wellbeing and overall development. Over the past few decades, various cross-departmental initiatives have focused on wellbeing and emphasised the need for evidence-based strategies to enhance child wellbeing (Figure 4).

Figure 4

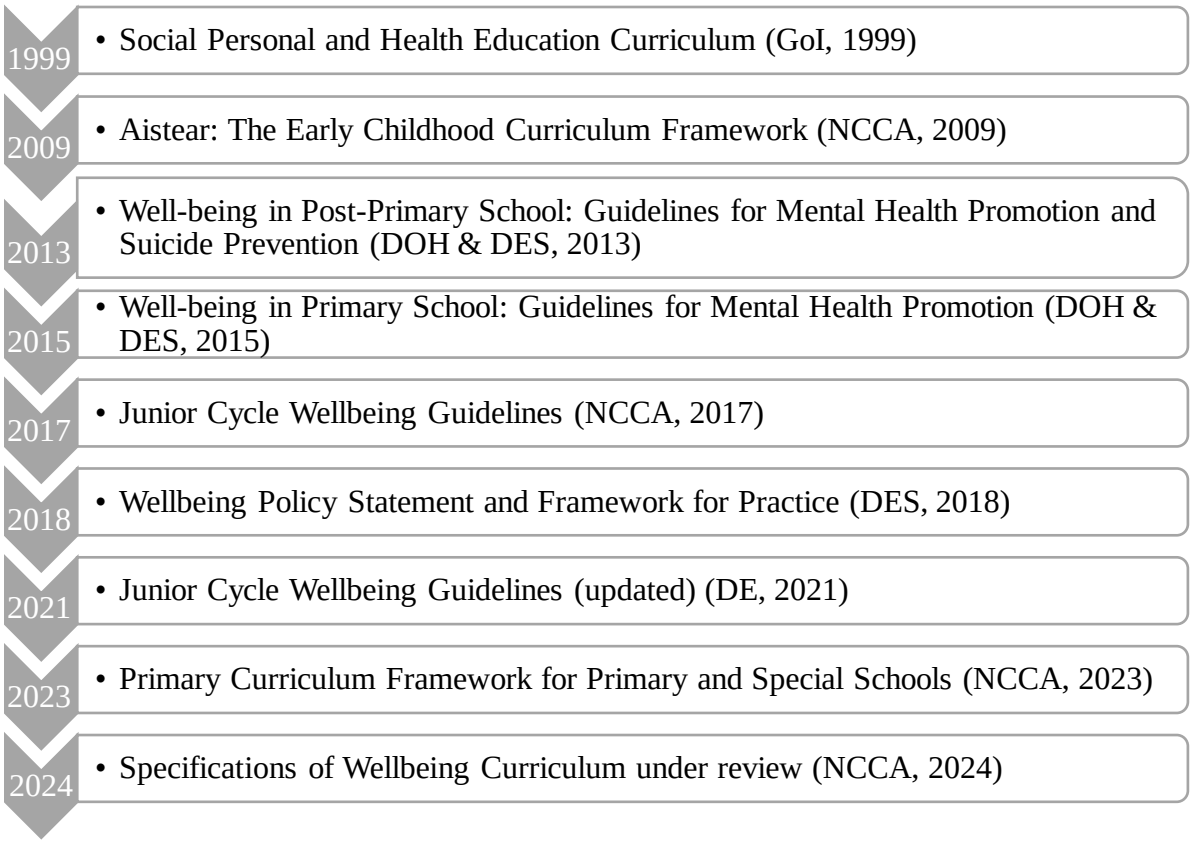
Timeline of National Wellbeing Policy Document



Similarly, wellbeing has become a prominent focus in educational initiatives over the last few years, recognising the inherent opportunity afforded by primary and secondary schools to promote the holistic development of children and young people, as seen in Figure 5. Education is vital in fostering the 'whole child', aligning with broader macrosystemic movements that challenge the medical model and incorporate psychosocial domains (OECD, 2014; Statham et al., 2010). From the national early childhood curriculum, Aistear, where wellbeing is included as one of four themes (NCCA, 2009), to the secondary school curriculum, where a comprehensive Junior Cycle wellbeing programme comprising 400 hours has been implemented (NCCA, 2017), the integration of wellbeing into the Irish curriculum is evident.

Figure 5

Timeline of Wellbeing-Related Developments in Irish Policy

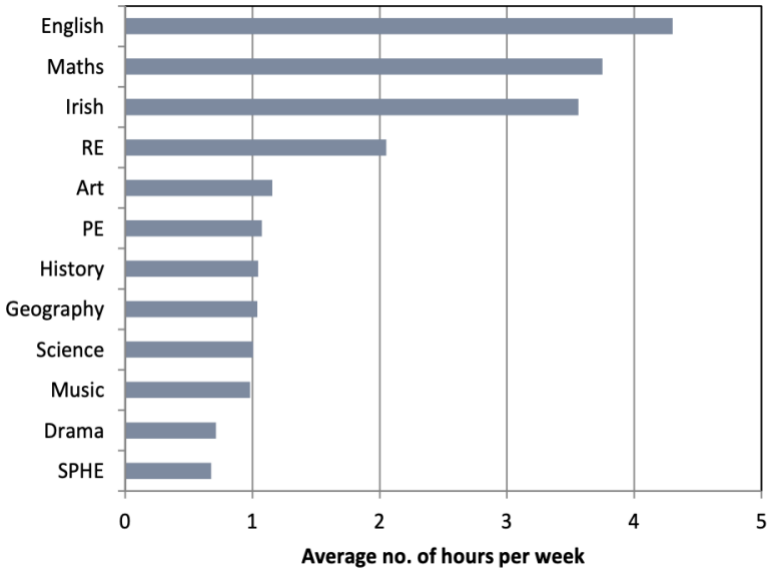


In the context of Irish primary schools, the central role of wellbeing in learning processes is recognised within the guiding principles of the 1999 Primary Curriculum Framework (DES, 1999). Social, Personal, and Health Education (SPHE), as a subject area, was deemed optimal to provide "particular opportunities to foster the personal development, health, and wellbeing of the individual child", covering relevant topics such as relationships, feelings, and friendships (DES, 2009, p. 3). However, research on educator experiences on the ground highlighted SPHE's limited time allocation, as evidenced in Figure 6, as a significant barrier to meaningful curriculum implementation (McCoy et al., 2012; NCCA, 2008). Additional challenges include educator reports of a lack of staff training in supporting mental health needs and limited support

from health services, leaving teachers “willing to help but needing guidance” (Clarke et al., 2010, p. 86).

Figure 6

Average Weekly Time Allocation of the 1999 Primary School Curriculum (McCoy et al., 2012)



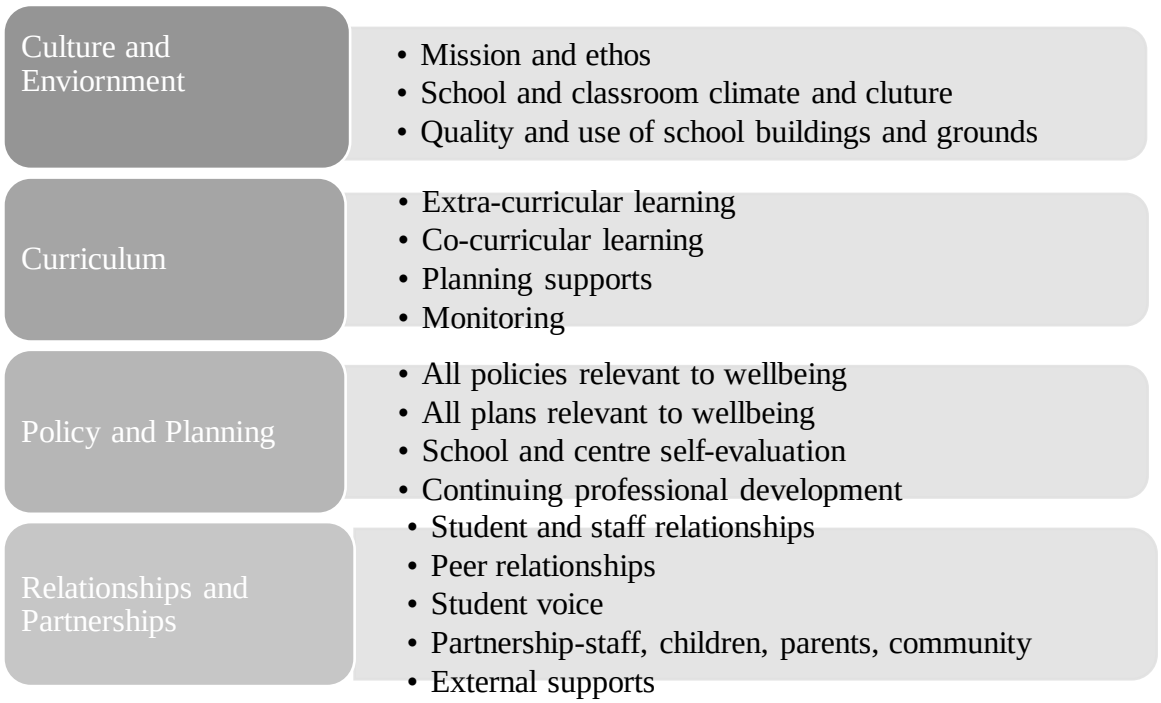
The recent revision of the primary school curriculum, currently under review with specifications recently released for the 2025/2026 academic year, underscores the growing recognition of the role of primary education in nurturing pupils’ lifelong wellbeing (NCCA, 2023). Updates include the inclusion of wellbeing as one of five broad curricular areas, a notable increase in the weekly time allocation for wellbeing education (two and a half hours at the infant level and three hours at the senior level), the creation of an online wellbeing toolkit for educators, and the emphasis on fostering wellbeing as a key competency across the entire curriculum and school community (DE, 2023a). SPHE and Physical Education (PE) are included within the overall Wellbeing curricular area, encompassing four strands: Movement Education, Emotional and Relational Education, Health Education, and Belonging. This acknowledges the

DE's multidimensional conceptualisation of wellbeing, as explored in Section 2.3.1 (NCCA, 2023).

The Wellbeing Policy Statement and Framework for Practice (WPSFP) was launched in 2018, further acknowledging the importance of wellbeing promotion in education (DES, 2018), with pupil wellbeing underlined as "everybody's business" (DES, 2018, p. 12). This policy entails a more formal approach to wellbeing practices in primary and post-primary schools, with schools mandated to integrate wellbeing into their School-Self Evaluation process (SSE) by 2025. This framework provides guidelines to promote a whole-school, multi-component approach to wellbeing through the four key areas of Culture and Environment, Curriculum, Policy and Planning, and Relationships and Partnerships (See Figure 7). The aim is to ensure the best quality and most appropriate wellbeing education is afforded to Irish students, thereby maximising the potential for prevention and early intervention of wellbeing needs in Irish youths (DES, 2018).

Figure 7

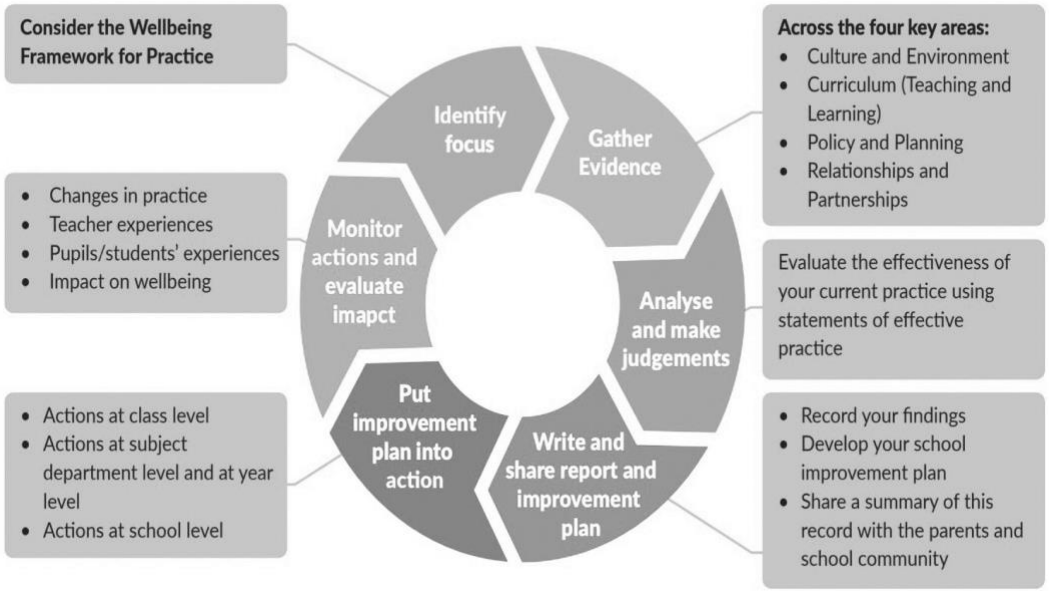
Key Areas of Whole-school Wellbeing Promotion



The six-step SSE has been underscored as a vehicle by which the WPSFP will become embedded in schools (DES, 2018). Initially designed for setting targets for a chosen curricular subject, the SSE process has evolved to include the evaluation, planning, and hopeful improvement of key areas of wellbeing (Figure 8). Schools are encouraged to define measurable targets aligned with their vision for wellbeing as per the WPSFP's key areas of wellbeing promotion and to adapt them to their unique vision for wellbeing. This collaborative internal review process allows schools flexibility to focus on priority areas of wellbeing within the specific school context. However, the inherent challenge in quantifying and measuring wellbeing for educators is explicitly acknowledged, emphasising that wellbeing is "not something that can be definitively achieved and tested" (DES, 2018, p. 22). This reinforces the complexity of implementing macrosystemic policy on the ground and the importance of understanding experiences at a microsystemic level (Ball, 1993).

Figure 8

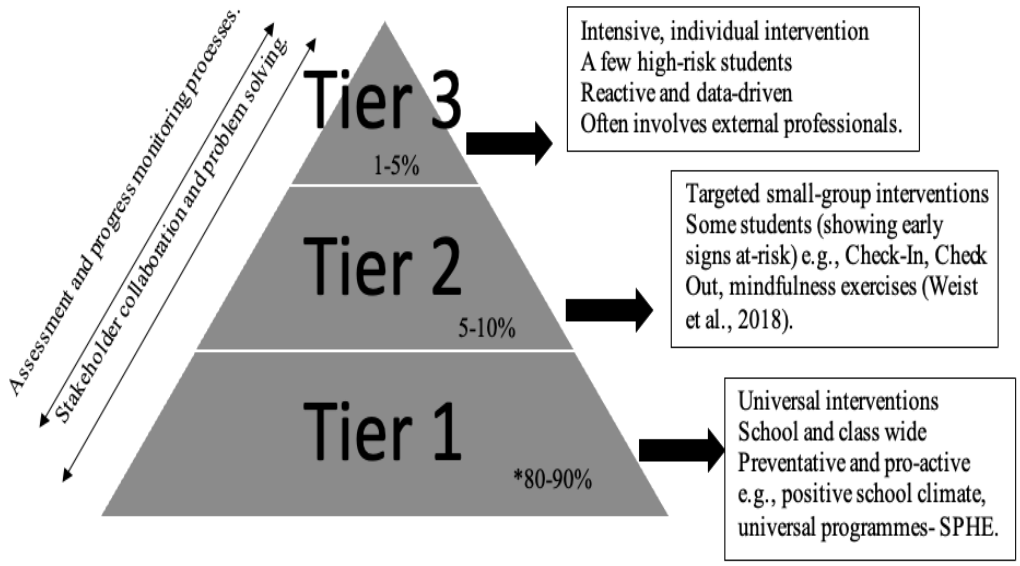
Mapping the WPSFP to the SSE Process (DES, 2018)



Further macrosystemic changes related to inclusion and resource allocation within Irish schools have had significant implications for pupils with more complex wellbeing needs. With schools increasingly recognised as an optimal setting for the provision of a full continuum of support and services to pupils (Rix et al., 2013), the Education Act (1998) stipulates that schools utilise their allocated resources to identify and cater for such needs. The ongoing review of the EPSEN Act (Government of Ireland, 2004) emphasises the commitment to ensuring responsive laws for children with special educational needs, incorporating systematic assessment, individualised education plans, and active parental involvement. The CoS framework, developed by the National Educational Psychological Service (NEPS) in 2007, offers a systematic approach to identifying, assessing, and addressing students' diverse needs to ensure equitable access to support services in Ireland (DES, 2007a). Aligning with Multi-Tiered Systems of Support used in schools internationally, support is structured across different tiers, including 'Support for All,' 'Support for Some,' and 'Support for Few' (See Figure 9).

Figure 9

Multi-Tiered System of Support



Note: *Proportion of student body typically receiving this level of support.

While represented in various forms (e.g., response to intervention [RTI] and positive behavioural interventions and supports [PBIS]), MTSS has emerged internationally as the umbrella term for frameworks that emphasise a tiered continuum of evidence-based practices within the context of prevention science and implementation research (PBIS Implementation Blueprint, 2023). MTSS involve a data-driven process that aims to assist educators in identifying, monitoring, and providing targeted, evidence-based intervention for struggling pupils (Lane et al., 2020; Sugai & Horner, 2009). In recent years, the CoS has also been highlighted as a valuable tool in delivering appropriate wellbeing support to pupils with varying levels of need in Irish schools (DES, 2018). This mirrors international educational research and policy, which advocates for expanding MTSS from primarily academic and behaviour-focused to integrating social-emotional competencies and mental health support (Arora et al., 2019; DES, 2018; Kilgus et al., 2022). To implement the CoS effectively, key educators utilise a problem-solving approach, considered a cycle of "assessment, target setting, intervention and review" (DES 2017a, p.28). The Student Support File emerges as a crucial tool in this process, allowing educators to collaborate with parents and external agencies (where necessary) and document pupil progress and needs over time. These files enable teachers to provide appropriate support aligned with the pupils' evolving needs (DES, 2017).

While historically the General Allocation Model (DES, 2005) required a formal diagnosis for access to special education teaching resources within the CoS, the revised SETAM acknowledges the multifaceted nature of student needs, considering biological, psychological, and social factors influencing learning (DE, 2017, 2022). The SETAM further highlights the macrosystemic shift from a medical model to a needs-based approach to understanding and supporting special education needs in Irish schools (Howe & Griffin, 2020). This means that

children with wellbeing needs are entitled to receive within-school support at tier two or tier three of the CoS, as deemed appropriate by the school. This paradigm shift promotes a more inclusive and equitable allocation of resources using the three-tiered CoS (Kenny et al., 2020). This transformation has altered how needs are identified and supported at the micro-level within the school system, granting educators more autonomy in deploying special education teaching resources and placing multi-dimensional wellbeing needs among the spectrum of educational needs in Irish schools.

The allocation of SETs to mainstream schools, central to the equitable allocation of resources to those with the most significant level of need, is guided by the school's educational profile (DE, 2017, 2024). This profile is a comprehensive assessment tool used to evaluate various factors influencing school resource allocation. It is subject to regular evaluation to ensure the school's educational profile reflects the current needs of the school (DE, 2022). Traditionally, resource allocation models have considered various school factors, including enrolment numbers, literacy and numeracy test results, and the social context of the school (DES, 2017), recognising the impact of social disadvantage on the incidence of SEN (McCoy & Banks, 2012) as elucidated in the previous section on wellbeing risk factors. While these considerations have remained consistent over time, recent revisions have brought about a significant change, with the updated criteria now excluding the consideration of the number of pupils with complex disabilities and the number of male pupils (DE, 2024). Concerns arise about the equity of the revised criteria, particularly given the heightened prevalence of wellbeing needs among individuals with complex difficulties (Emerson, 2001). This prompts further examination of potential limitations and implications for educators on the ground.

A national study of the SETAM highlighted positive outcomes related to educator autonomy and flexibility in resource allocation (Curtin & Egan, 2021). Similarly, 90% of participants in a pilot study of the model deemed it effective in meeting student needs promptly (DES, 2016). The study also found improved educator awareness of the CoS and diagnostic assessments for more accurate identification of student needs (DES, 2016). However, challenges were noted, particularly for schools that did not receive additional teaching resources to accommodate the increased diversity of pupil needs (DES, 2016). This underscores the significance of providing adequate resources to enable teachers to effectively support pupil wellbeing, as recently highlighted in Irish research (NCCA, 2023). Furthermore, educators involved with implementing the allocation model on the ground expressed a need for ongoing professional development in differentiation, target setting, and monitoring pupil progress within the CoS, reporting an associated increased workload (Curtin & Egan, 2021; DES, 2016).

The lack of a national training programme to accompany the introduction of the SETAM was noted in the Association of Secondary Teachers in Ireland's (ASTI) response to the DES' Statement of Strategy 2021-2023 (ASTI, 2021). The gap in co-ordination between national initiatives and support services was also highlighted, with teachers not recognised as the central audience for communication, support, and pre-planning within the reform model despite being primarily responsible for implementing classroom change. This underscores the need for role clarification as "an indispensable dimension of effective policy implementation" (ASTI, 2021, p.5). International literature underscores that unclear policies limit educators' ability to take direct action in the classroom, leading to short-term goals and reduced agency (Biesta et al., 2015). Clear policy visions and support mechanisms are therefore pivotal to help educators understand the requirements of policy, particularly when related to the complex realm of

wellbeing (NCCA, 2023). Given the diversity of needs present in schools and the evolving responsibilities of educators under the SETAM, research dedicated to understanding the effectiveness of the SETAM in supporting pupil wellbeing needs will provide valuable insights into the equity and inclusivity of the current educational model.

2.4.2 Wellbeing Education within the Exosystem

Collaboration between educators and key figures within the exosystem of the child's environment is essential in supporting optimal wellbeing development (Epstein, 2018; Smith et al., 2020). Collaboration between home and school enables teachers to understand pupils' wellbeing needs, express concerns about a child's presentation, ensure appropriate support through MTSS, and initiate referrals to external agencies (Reardon et al., 2017). However, this process faces complexities, with the stigma associated with mental health issues and concerns about how their child's challenges may be perceived by others documented in the literature (Corrigan, 2004; Rüsch et al., 2005). Cultural beliefs, past experiences, and personal attitudes towards mental health can significantly shape parent attitudes (Graham et al., 2021; Sue et al., 2009), with mental health discussions viewed as a sign of weakness in some cultures (Abdullah et al., 2011) or as a critique of one's parenting (Eaton et al., 2016). This contributes to challenges in parental reactions to discussions on mental health and wellbeing.

Educators serve as "the gateway provider" in linking families with clinical services, such as Child and Adolescent Mental Health Services (CAMHS), Primary Care, and the National Educational Psychological Service (Ní Chorcora et al., 2022, p. 736; Farmer et al., 2003). Despite this crucial role, persistent barriers impede access for numerous pupils and families. Resource constraints pose a formidable challenge, with limited funding and staffing shortages often resulting in lengthy wait times and inadequate service provision (Thornicroft et al., 2016).

Cultural factors can influence help-seeking behaviours, with certain communities experiencing higher levels of stigma or cultural norms that discourage seeking professional mental health support (Chen et al., 2020). Language barriers can also hinder access for immigrant or non-English-speaking families, limiting their ability to navigate the complex mental health system (Gee et al., 2009). These barriers are not unique to Ireland but are prevalent in various jurisdictions, highlighting systemic challenges requiring multifaceted solutions to ensure equitable mental health services for all pupils and families (Kutcher et al., 2016).

In response to these challenges, the provision of specialist services within school settings has gained prominence in the literature (Duong et al., 2021; Kern et al., 2017; National Association of School Psychologists [NASP], 2020). Over half of public schools in the United States of America reportedly employ a mental health provider to support pupil mental health needs, primarily at tier three of the MTSS (US Department of Education, 2021). Meanwhile, in Ireland, the National Educational Psychological Service (NEPS) has shifted towards increased support and development work within a consultative model of service to empower educators (DES, 2007a). According to Wagner (2002), the aim of consultation in school psychology is to empower teachers and parents to enact change across all tiers of the CoS (Wagner, 2000), recognising that educators can be as effective as external clinicians in implementing programmes and interventions (Durlak et al., 2011). The significance of the NEPS psychologist in aiding school staff with "non-child ecosystemic factors," including policy development, teaching quality, and resource utilisation, is underscored in the literature (Desforges & Lindsay, 2010, p. 185). However, this can be hindered by perceptions of the predominantly assessment-focused role of the EP, limiting the broader contributions they can make to the school ecosystem and

potentially influencing the effectiveness of their collaborative efforts towards pupil wellbeing needs (Hart et al., 2020).

2.4.3 Wellbeing Education within the Microsystem

Research has highlighted on-the-ground practices that enhance protective factors and support pupil's wellbeing needs in microsystemic contexts. This involves implementing a preventative, evidence-informed, multi-component approach across the school (Cefai et al., 2021; DES, 2018).

2.4.3.1. Educators in the Microsystem. Within the microsystem of schools, educators present as crucial protective factors for pupil wellbeing (OECD, 2017), with the NCCA asserting that "wellbeing starts with the staff" (NCCA, 2017, p. 29). Research underscores the profound impact of 'one good adult' during one's formative years (Dooley et al., 2012). This term refers to a compassionate, reliable, consistent, and supportive adult offering emotional support, guidance, encouragement, and stability to a child, fostering their overall wellbeing and resilience. This highlights the great opportunity afforded by educators to positively impact the wellbeing development of pupils (Dooley et al., 2012). Leadership support is key in steering wellbeing support initiatives, providing wellbeing training and resources (Burke & Dempsey, 2021; Cherkowski et al., 2020) and fostering a supportive whole-school ethos (Beatty et al., 2020; Follari, 2022). Positive educator experiences and perspectives are crucial for successfully implementing whole-school wellbeing promotion initiatives (Byrne et al., 2018), with research demonstrating that policy implementation significantly depends on the educators in each respective school (Eisenhart et al., 2009). Research consistently emphasises positive educator attitudes and buy-in in fostering commitment and engagement in wellbeing promotion initiatives (Dancy & Hamilton, 2016; Quinlan & Hone, 2020). Perceived competence (Berger et al., 2014)

and access to training, resources, and coaching have been found to shape educators' efficacy in supporting pupil wellbeing (Reinke et al., 2011; Skaalvik & Skaalvik, 2007). Recognising the evolving nature of the role of the Classroom Teacher (CT), influenced significantly by increased autonomy under the SETAM, the National Council for Special Education (NCSE, 2013) and the Irish National Teachers' Organisation (INTO, 2020b) assert the essential need for ongoing continuous professional development (CPD) for educators to fulfil their evolving roles and responsibilities effectively. This becomes particularly pertinent as educators endeavour to identify, support, and monitor holistic pupil needs using the three tiers of the CoS under the SETAM (DES, 2017).

However, barriers to the fulfilment of responsibilities are evidenced within a systematic literature review of teacher-reported obstacles to assessing social, emotional, and behavioural difficulties, highlighting that less than one-quarter of school staff believe appropriate support is available to help teachers identify mental health issues, and only 35% feel confident in assisting children after identification (Childs-Fegredo et al., 2021; O’ Farrell et al., 2023). Further barriers to the early intervention and prevention of increased wellbeing needs include concerns about inaccurate identification, the fear of exasperating existing needs, and the low availability of specialist support in schools (Farrell et al., 2023; Shelemy et al., 2019; Soneson et al., 2020). Research further indicates that educators feel least prepared to support students with the most intensive social-emotional and behavioural needs at tier three of the MTSS, revealing a significant gap in training and perceived competence for pupils with higher levels of need (Sugai & Horner, 2020). This is compounded by additional barriers to effective microsystemic wellbeing support, including curriculum overload, a lack of familiarity with evidence-based practices, and stress with the demands of implementing a formalised wellbeing curriculum

alongside the more prioritised core subjects (Byrne & Carthy, 2021; O' Higgins et al., 2013). Despite the significance granted to educators in the microsystem of wellbeing development, the above underscores the gap between theory and practice within schools, particularly concerning students with more complex wellbeing needs.

2.4.3.2. Programmes and Interventions in the Microsystem. The value of using interventions that promote pupil wellbeing development is also recognised (NCCA, 2023; Paulus et al., 2016; WHO, 2005)- under the auspices of 'wellbeing promotion,' 'social-emotional learning' (SEL), 'health promotion', and 'mental health promotion'. The national roll-out of training in evidence-based preventative initiatives, including 'Friends for Life' (focusing on emotional resilience, coping skills, and positive mental health) and 'Incredible Years' (enhancing social and emotional skills), continues in Irish disadvantaged schools participating in the Delivering Equality of Opportunity (DEIS) programme (DES, 2006). The high participation rate afforded by such universal interventions is favourable, providing an accessible early intervention to many children who otherwise might not receive services, for example, due to socio-economic client-level barriers (Ross et al., 2015). Many meta-analytic reviews emphasise the positive impact of well-designed and implemented universal school-based programmes on personal wellbeing-related outcomes at tier one of MTSS (Anderson et al., 2015; Clarke et al., 2014; Durlak et al., 2011; Gutman & Schoon, 2015). One study specifically highlights that 'at-risk' pupils experienced the most significant reduction in anxiety following participation in the universal Friends for Life programme (Iizuke et al., 2015). Similarly, targeted programmes at tier two and tier three levels of MTSS can effectively address emerging anxiety and mental health concerns of at-risk student groups through interventions like mental health literacy, mindfulness, sense of belonging, and social-emotional learning (Debnan et al., 2012; Simonsen et al., 2011;

Walker et al., 1998). This is promising, given that research demonstrates that schools are a more acceptable place for disadvantaged children and those who do not typically access specialist services to seek this increased level of support (Weist & Evans, 2005).

Circular 0042/2018 underlines the importance of such programmes being needs-based, evidence-informed, and regularly monitored (DES, 2018). However, the professional development of educators has been recognised as the primary challenge in implementing MTSS in schools, particularly in providing evidence-based instruction (Kratochwill et al., 2007). This is reflected in research findings indicating that integrating curricular change with appropriate resources and teacher training resulted in enhanced teacher knowledge, confidence, and positive attitudes to mental health (Askell-Williams & Lawson, 2013). Although maintaining fidelity is critical to a programme's efficacy (Durlak & DuPre, 2008), a systematic literature review highlighted that this is not often the reality on the ground (Herlitz et al., 2020). Furthermore, as interventions like 'Weaving Wellbeing' and other manualised programmes aimed at promoting the positive mental health and wellbeing of Irish primary school pupils are gaining popularity in Irish schools (Ní Chorcoara & Swords, 2022), concerns persist about their use as a substitute for the delivery of the SPHE curriculum, potentially resulting in shortcomings in comprehensive health education (Nohilly & Tynan, 2022). Despite potential benefits, research asserts that manualised SEL interventions may sometimes replace educators' pedagogical content knowledge, potentially limiting the depth of support for pupil wellbeing (Brann et al., 2021; Hogan et al., 2018). Further arguments exist about the 'commercialisation of SEL' and the associated decrease in teacher agency, with educators refuting that such resources meaningfully contribute to their SEL "toolbox" (Hogan et al., 2018, p.617). Ensuring that a programme aligns with the local context is essential for successful implementation (Cramer & Castro-Olivo, 2016).

This is highlighted by qualitative research suggesting that the international social-emotional learning programmes, synonymous with wellbeing in the American context (NCCA, 2023), currently implemented in Irish primary schools might lack cultural appropriateness (Rutledge et al., 2016; Wigelsworth et al., 2018).

2.4.3.3. Collaboration in the Microsystem. A collaborative culture among education stakeholders is protective when supporting pupil wellbeing needs within MTSS (Ainscow & Miles, 2009; Yang et al., 2018). Effective collaboration, especially between CTs and SETs, serves as a "vehicle through which legislative expectations can be met" (Friend et al., 2010, p.10). Achieving this collaboration necessitates an "explicit recognition of the complementary roles of all involved" (Beveridge, 1999, p.128). Special education policies underscore the central role of the CT in identifying and planning for the needs of all pupils within the CoS, supported by the SET "as appropriate" (DES, 2007a, p.1). Despite these policy directives, research points to a dichotomy where these educators often operate as "dual and parallel rather than integrated enterprises" (Winzer, 2009, p.203). This phenomenon can be elucidated through the lens of Cultural-Historical Activity Theory (CHAT), which posits that within communities, there exists a "division of labour" involving the "continuously negotiated distribution of tasks, powers, and responsibilities" (Cole & Engeström, 1993, p.7). To fully realise the potential of MTSS, collaboration at all framework levels is necessary to ensure cohesive implementation of all elements; including collective enquiry, data-driven decision-making, and ongoing professional development (Coffey & Horner, 2012; McIntosh et al., 2013; Hoover et al., 2019).

This underscores the complexities inherent within the microsystem and the multiple factors influencing educators' implementation of policies, guidelines, and practices on the ground (Benard, 1991). Compounded by increased autonomy under the SETAM (DES, 2017),

educators are endowed with considerable responsibility, emerging as the linchpin through which comprehensive wellbeing support, early intervention, and prevention can be achieved.

2.5 Conclusion

Within the evolving landscape of education, there is a growing emphasis on fostering students' holistic development. Multitiered Systems of Support (MTSS), encompassing universal and targeted tiers of intervention, have become instrumental in this endeavour (Hoover et al., 2019). However, despite emerging evidence of the effectiveness of MTSS for a range of wellbeing outcomes (Battal et al., 2020; Bradshaw et al., 2019; Weist et al., 2022), there is a noticeable gap in the literature regarding the experiences and insights of educators responsible for implementing these systems to support pupil wellbeing (Menzies et al., 2020). Exploring the ‘what’, ‘how’, and ‘why’ from the educators' viewpoint can yield valuable insights into the impact of tiered support on student wellbeing (Seidman, 1998). Given the increasing adoption of MTSS and its related policies and initiatives in schools (SAMHSA, 2019), it is paramount to delve into educators' perceptions within these frameworks. Therefore, the following section presents a systematic review that aims to fill this research gap by synthesising existing studies on educator experiences of MTSS in supporting pupil wellbeing needs. By delving into the experiences and viewpoints of educators, the review seeks to uncover practical implications and potential improvements in delivering these support systems, thus contributing to the broader discourse on student wellbeing within educational settings.

2.6 Systematic Review

2.6.1 Review Question

What is known about the experiences and perspectives of educators implementing multi-tiered systems of support to support pupil wellbeing needs?

2.6.2 Search Strategy

In July 2023 and February 2024, a systematic literature search was conducted across databases relevant to educational psychology research, including APA PsycArticles, APA PyscInfo, APA PsychNet, Academic Search Complete, ERIC, and Education Source. The search sought to identify studies investigating educator experiences implementing multi-tiered systems of support to support pupil wellbeing needs in mainstream primary and secondary school settings. Accordingly, the search terms encompassed core dimensions of wellbeing and diverse iterations of MTSS incorporated internationally. For example, the term ‘mental health’ was included within the search terms, given its interchangeability with wellbeing within national and international educational guidelines (DES, 2013). Additionally, terminologies used in a recent systematic literature review commissioned by the NCCA to inform the development of the wellbeing curriculum were included (NCCA, 2023) (See Table 1). This approach was adopted to comprehensively address the diverse aspects of wellbeing, considering its various conceptualisations and synonyms identified in scholarly literature and educational policies, as discussed in section 2.3.1. Search syntax, including phrases (“), truncation (*), wildcards (?), parentheses, and Boolean operators, were also incorporated to enable the precise retrieval of relevant information. While this review endeavoured to maintain rigorous standards, the researcher acknowledges that limitations arising from international variations in key search terms and the application of exclusion criteria, such as restricting studies to English language and peer-

reviewed publications, may have resulted in the exclusion of relevant research. The utilisation of ‘reference chaining’, wherein the reference lists of relevant studies were scrutinised for relevance, was therefore pivotal in ensuring a comprehensive exploration of pertinent literature (Bates, 1989).

Table 1

Search Terms

Title, subject terms, and abstract search: (“school" or "educat*" or "teacher")
AND
("multi?tiered system of support" or “mtss” or "Response to intervention" or “rti” or "tiered system" or "PBIS" or “positive behavio?ral intervention? and support?" or "interconnected system? framework" or “universal and targeted”)
AND
("wellbeing" or "mental health" or "social emotion* behav*" or “psychological health” or “SEL” or “social emotional learning” or “soci*?emotion*” or “physical health”)

An initial search yielded 619 articles. Search filters were subsequently applied in line with the inclusion and exclusion criteria outlined in Table 2, and duplicates were removed, limiting results to 163 peer-reviewed journal articles published in English. A screening process was then employed to assess the relevance of the titles and abstracts to the review question, ultimately retaining 39 studies for full-text examination. Three additional studies were identified by reading the references section of retained studies. Following a comprehensive analysis of these studies following the inclusion and exclusion criteria, eight studies were selected for review (See Table 3). For a detailed list of the included and excluded studies, please refer to Appendices A and B, respectively. The search process is visually depicted in Figure 10, adhering to the methodology proposed by Liberati and colleagues (2009).

Table 2

Inclusion and Exclusion Criteria

Study Feature	Inclusion Criteria	Exclusion Criteria	Rationale
1. Year published	Conducted and published between the years 2000 and 2024.	Not conducted and published between the years 2000 and 2024.	The selected timeframe ensures a comprehensive review of all up-to-date literature.
2. Language of publication	Study published in English.	Study not published in English.	This criterion was selected as the researcher has no access to a translator.
3. Type of publication (Peer-reviewed)	Research article published in a peer-reviewed journals.	Research articles from sources other than peer-reviewed journal.	Peer-reviewed articles have been rigorously evaluated to ensure a high overall standard.
4. Research design	Study provides primary, empirical data.	Study does not provide primary, empirical data (e.g., reviews).	This criterion ensures that data is original.
5. Participants (Education Staff)	Study investigates the perspectives of education staff implementing a MTSS in a mainstream education setting. This includes teachers, special education teachers, principals, and other core members of MTSS team.	Study does not investigate the perspectives of education staff implementing a MTSS in a mainstream education setting. This includes teachers, special education teachers, principals, and other core members of MTSS team.	Ensures the population relevant to the review is targeted.

6. Model of service delivery (Multi-Tiered System of Support)	Study investigates educator perspectives on their implementation of multi-tiered systems of support (e.g., Response to Intervention, Positive Behavioural Intervention System, Continuum of Support) to support pupil wellbeing needs.	Study does not investigate educator perspectives on their use of an MTSS. Includes exploration of programmes or interventions adopted at one level only.	The current review is interested in appraising perspectives of school staffs who have experience implementing MTSS to support pupil wellbeing needs.
7. Study Focus (Supporting Pupil's Wellbeing)	Study involves the use of MTSS to support pupil wellbeing, including core dimensions of wellbeing (e.g., social and emotional development, mental health).	Study does not involve the use of MTSS to support pupil wellbeing or a core dimension of wellbeing.	Pupil wellbeing needs is the focus of the current review.
8. Measures/ Results	Study investigates the perceptions of education staff.	Study does not investigate perceptions of school staff.	The current review is interested in perspectives of education staff.

Figure 10

PRISMA Chart Depicting Literature Search and Screening of Articles

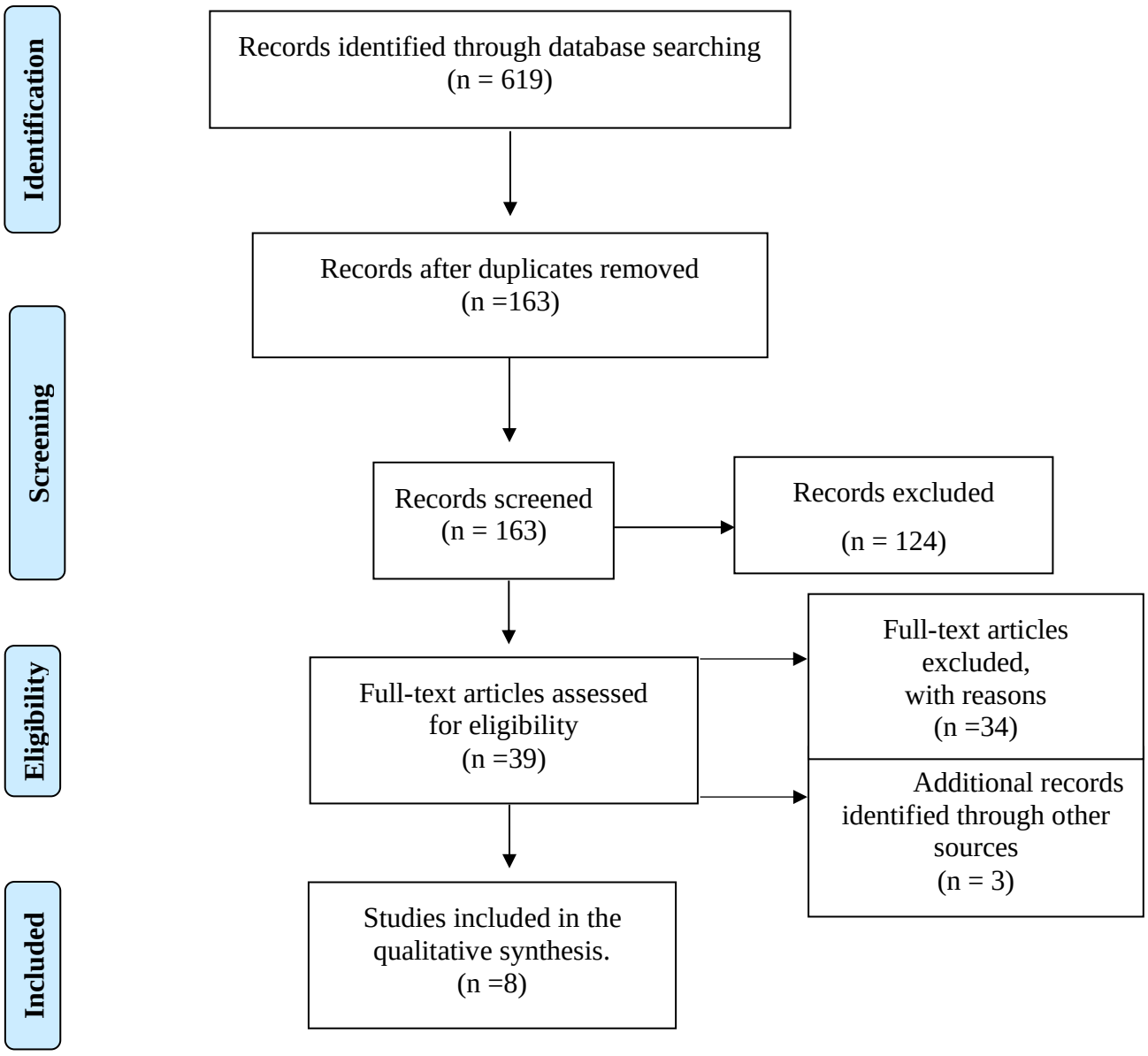


Table 3

Studies Included in the Present Review

Askell-Williams, H., & Lawson, M. J. (2013). Teachers' knowledge and confidence for promoting positive mental health in primary school communities. *Asia-Pacific Journal of Teacher Education*, *41*(2*),* 126-143. doi.org/10.1080/1359866X.2013.777023

Brann, K. L., Naser, S. C., Splett, J. W., & DiOrio, C. A. (2021). A mixed-method analysis of the implementation process of universal screening in a tiered mental health system. *Psychology in the Schools, 58*(11), 2089-2113. Doi.org/10.1002/pits.22579

Cane, F. E., & Oland, L. (2015). Evaluating the outcomes and implementation of a TaMHS (Targeting Mental Health in Schools) project in four West Midlands (UK) schools using activity theory. *Educational Psychology in Practice, 31*(1), 1-20. doi:10.1080/02667363.2014.975784

Eiraldi, R., Lawson, G. M., Patel, A., McCurdy, B. L., Wolk, C. B., Khanna, M. S., & Jawad, A. F. (2023). Integration of Mental Health Interventions Within PBIS: a Mixed-Methods Analysis. *Contemporary School Psychology, 1-15.* https://doi.org/10.1007/s40688-023-00472-6

Menzies, H. M., Oakes, W. P., Lane, K. L., Royer, D. J., & Buckman, M. M. (2022). Understanding Teachers' Adoption of a Comprehensive Reform Program. *Leadership and Policy in Schools, 1-16.* doi.org/10.1080/15700763.2022.2081213

Pavri, S. (2010). Response to intervention in the social-emotional-behavioral domain: Perspectives from urban schools. *Teaching Exceptional Children Plus*, *6*(3), n3. Retrieved from http://escholarship.bc.edu/education/tecplus/vol6/iss3/art4

Romer, N., Green, A. L., & Cox, K. E. (2018). Educator perceptions of preparedness and professional development for implementation of evidence-based practices within a multi-tiered system of supports. *School Mental Health, 10*, 122-133. doi.org/10.1007/s12310-017-9234-3

Splett, J. W., Perales, K., Miller, E., Hartley, S. N., Wandersman, A., Halliday, C. A., & Weist, M. D. (2022). Using readiness to understand implementation challenges in school mental health research. *Journal of Community Psychology, 50*(7), 3101-3121. https://doi.org/10.1002/jcop.22818

2.6.3 Critical Appraisal

Critical appraisal using Gough's (2007) Weight of Evidence (WoE) Framework was undertaken to evaluate the quality and relevance of the chosen studies concerning the review's question. This approach enabled the researcher to determine the significance of each study's contribution to the final synthesis of evidence, thereby promoting a rigorous, unbiased, and well-informed assessment of the available research and its findings.

2.6.3.1 Critical Analysis Framework. The eight studies were critically appraised using Gough's (2007) Weight of Evidence (WoE) Framework, encompassing three main categories: methodological quality (WoE A), methodological relevance (WoE B), and topic relevance (WoE C). The WoE A evaluates the coherence and integrity of the research design and methodology against established standards (Gough, 2007) and is not review-specific. Given that qualitative, quantitative, and mixed-method studies were encompassed in the present review, the Mixed Method Appraisal Tool (MMAT) (Hong et al., 2018) was employed to ensure an equitable and consistent assessment of methodological quality for diverse research designs. This tool offers distinct yet equivalent sections within a unified framework and was therefore deemed more favourable than scoring protocols from multiple tools and frameworks. A detailed summary of WoE A scores for each of the included studies can be found in Appendix C.

WoE B focuses on evaluating the methodological relevance of each study to the research question by using flexible appraisal methods, which align with research guidelines advocating for flexibility against the use of rigid models (Sandelowski et al., 2002). This assessment is review-specific, and therefore, several factors were considered concerning the research design adopted, provision of relevant information regarding participant demographics, experience with

MTSS implementation, and participating school contexts. A comprehensive overview of WoE B scores assigned to the included studies can be found in Appendix D.

Lastly, WoE C constitutes a review-specific judgment of the suitability of the study focus and the evidence obtained in addressing the present review question. Criteria developed by the reviewer are used to guide the scoring process, including the primary focus of the study, the categories of educators included in the sample, the extent to which MTSS is investigated within the review findings, and the inclusion of wellbeing as an outcome. WoE C results can be found in Appendix E.

The three sets of criteria described above collectively contributed to the overall WoE D score. This score assesses the degree to which each included study contributes to addressing the review question (Gough, 2007). WoE D scores can be found below in Table 4, and a delineation of the scoring process is documented in Appendix F.

Table 4

Overall WoE Scores of Included Studies

Study	WoE A Methodological Quality	WoE B Methodological Relevance	WoE C Topic Relevance	WoE D Overall Relevance
Askell-Williams et al. (2013)	Medium (2)	High (3)	Medium (2)	Medium (2.33)
Brann et al. (2021)	Medium (2)	High (3)	Medium (2)	Medium (2.33)
Cane et al (2015)	High (3)	Medium (3)	Medium (2)	High (2.67)
Eiraldi et al. (2023)	Medium (2)	High (3)	Medium (2)	Medium (2.33)
Menzies et al. (2022)	High (3)	High (3)	Medium (2)	High (2.67)
Pavri (2010)	Medium (2)	High (3)	High (3)	High (2.67)
Romer et al. (2018)	Medium (2)	Medium (2)	Medium (2)	Medium (2)
Splett et al. (2021)	High (3)	High (3)	Medium (2)	High (2.67)

2.6.4 Mapping the Field

Mapping the research field allows the reader to understand the context of studies pertinent to the research area. Delineating the respective study aims, designs, participant characteristics, and data collection and analysis methods facilitates the interpretation of study findings by providing the backdrop in which existing studies have been conducted. An overview of the included studies is presented in Appendix A.

2.6.4.1 Design. Eight studies with qualitative, quantitative, and mixed-methods designs were incorporated in the present review, with the qualitative design proving to be the most prevalent. Each design was deemed appropriate in addressing the present review purpose, which aimed to gain insight into the perspectives of educational staff. Qualitative studies received a higher score in the WoE B rating, with the ability to effectively garner comprehensive participant viewpoints (Cane et al., 2015; Menzies et al., 2022; Pavri, 2010; Splett et al., 2021). Mixed-methods studies also received a higher score in the WoE B rating (Askell-Williams, 2013; Brann et al., 2021; Eiraldi et al., 2023), allowing for both quantitative and qualitative information to be gathered and therefore providing a more complete understanding of the review question (Bryman, 2006). Quantitative studies were included in the present review due to their distinct contribution to the field; however, only one study met the inclusion criteria (Romer et al., 2018). This study investigates educators' perceptions of the extent to which they feel prepared and supported in implementing multi-tiered mental health supports, making the quantitative design appropriate and highly relevant to the present review. A ‘medium’ WoE A criterion score was awarded to this study design in recognition of its relevance to the research question and its relative limitation in capturing the depth and richness of participant perspectives compared to qualitative or mixed-methods approaches.

2.6.4.2 Participants. The eight studies incorporated in the present review included a total of 2,323 education staff, most of whom participated in Askell-William and colleagues' (2013) mixed-method research (N=1,397) and Romer and colleagues' (2018) quantitative research (N= 822). Among the eight studies examined, six were conducted in the United States, one in Australia (Askell-Williams et al., 2013), and one in the United Kingdom (Cane et al., 2015). According to Gough (2007), it is imperative to investigate if the study sample is from an appropriate context to answer the review question. Samples primarily composed of class teachers (CTs) and special education teachers (SETs) from both primary and secondary schools were prioritised to receive a 'High' WoE C score on this criterion (Askell-Williams et al., 2013; Menzies et al., 2022; Pavri, 2010), as these roles are typically involved with the day-to-day implementation of MTSS on the ground (Blackburn & Witzel, 2018). A 'Medium' criterion score was granted to studies wherein at least half of the sample were CTs or SETs (Eiraldi et al., 2023), while 'Low' criterion scores were given to studies that incorporated various in-school professionals beyond teaching roles, such as school psychologists and mental health specialists (Brann et al., 2021; Cane et al., 2015).

Given global variations in in-school access to specialist services (Baltag et al., 2015; Jimerson et al., 2006), this criterion was selected to enhance the findings' applicability to international educational contexts (Cane et al., 2015; Pavri, 2010). The provision of sufficient information regarding the socio-economic status of schools studied was also deemed central to WoE B scores, with five studies sharing the percentage of economically disadvantaged students (Menzies et al., 2022; Romer et al., 2018), type of school funding (Brann et al., 2021), and the number of students eligible for free lunch (Pavri, 2010; Splett et al., 2021). Despite contention surrounding the accuracy of such proxies for socio-economic status (Cabrera, 2018), this

information was deemed relevant to the present review due to implications for resource allocation and associated levels of pupil wellbeing risk (Bradley et al., 2002; DES, 2017).

To maximise generalisability and enable comparisons with the broader education staff population, studies that reported participant demographic information received higher scores on one WoE B criterion (Schreier, 2018). This was achieved to a 'high' standard by five of the studies reviewed, who reported information regarding years of teaching experience (Askell-Williams et al., 2013; Menzies et al., 2022; Pavri, 2010), age range (Menzies et al., 2022; Pavri, 2010), and gender (Askell-Williams et al., 2013; Eiraldi et al., 2023; Menzies et al., 2022; Pavri, 2010; Splett et al., 2021). The absence of information regarding the specific roles of participants reviewed resulted in two studies receiving 'Low' WoE B and WoE C criterion ratings, limiting data interpretation and transferability (Cane et al., 2015; Romer et al., 2018; Sifers et al., 2002).

The provision of participant information regarding years of MTSS experience (Menzies et al., 2022; Pavri, 2010; Splett et al., 2022), readiness (Brann et al., 2021; Splett et al., 2021), implementation fidelity (Menzies et al., 2022), training (Cane et al., 2015; Pavri, 2010; Splett et al., 2021) and self-rated MTSS progress (Askell-Williams et al., 2013), was highly pertinent to the review-specific WoE B rating, offering diverse perspectives and enabling the reader to contextualise the perspectives shared. For example, participants in one study received extensive training on the implementation of the three-tiered Interconnected Systems Framework, including two full days at the beginning of each school year, bimonthly training, on-site coaching, and ongoing supervision, with district-employed and community mental health coaches playing a pivotal role in supporting the implementation of the innovation (Splett et al., 2021). In contrast, schools in other studies primarily adopted RTI for academic intervention and were significantly less experienced with tiered wellbeing support (Pavri, 2010). Studies providing this information

were granted higher WoE B scores, facilitating nuanced interpretations of participants' diverse experiences of MTSS.

2.6.4.3 Aims. As part of the WoE C criteria, the study must seek to understand the experiences and perspectives of education staff regarding the implementation of multi-tiered systems of support for pupil wellbeing needs. General MTSS featured in two studies (Brann et al., 2021; Romer et al., 2018), with the remaining studies incorporating specific models including Targeting Mental Health in Schools (Cane et al., 2015), Positive Behaviour Intervention Support (Eiraldi et al., 2023), Response to Intervention (Pavri, 2010), KidsMatter (Askell-Williams et al., 2013), Comprehensive, Integrated, Three-Tiered (CI3T) Model of Prevention (Menzies et al., 2022) and Interconnected Systems Framework (Splett et al., 2021). While all eight studies considered education staff's viewpoints according to the inclusion and exclusion criteria outlined in Table 2, three focused on specific aspects of MTSS implementation, including educator preparedness (Romer et al., 2018), readiness (Splett et al., 2021) and knowledge and confidence (Askell-Williams et al., 2013). This narrowed focus resulted in a lower WoE C score, as the present review aims to gleam insights into education staff's general attitudes and perspectives toward MTSS. The current review underscores the limited body of literature evaluating tiered approaches to addressing pupil wellbeing needs, with no studies yielded that explicitly explore wellbeing needs within MTSS. Six studies focused on mental health (Askell-Williams et al., 2013; Brann et al., 2021; Cane et al., 2015; Eiraldi et al., 2023; Romer et al., 2018; Splett et al., 2021) and one investigated socio-emotional development (Pavri, 2010). The remaining study aligns with the conventional role of MTSS in catering to the multifaceted needs of students, focusing on social and emotional wellbeing within a broader range of needs (Menzies et al., 2022). This influenced the overall scores obtained in the WoE B.

2.6.4.4 Sampling and Recruitment Methods. The quantitative study in the present review utilised non-probability sampling methods, limiting the generalisability of results beyond these participants (Taherdoost, 2016). Convenience sampling was used by Romer and colleagues (2017), wherein schools that had received state funding to develop a multi-tiered system of mental health support with a high number of pupils at risk of mental health difficulties were recruited. This reduced WoE A scores for methodological rigour (Romer et al., 2018). However, a 'medium' overall WoE A score was ultimately obtained due to the inclusion of information regarding the response rates of participants for the survey, which was deemed sufficient based on the survey study literature.

Transparency in sampling resulted in high WoE B ratings for all four qualitative studies included in the review, with each study employing purposive sampling and providing detailed descriptions with accompanying rationale for the sampling process utilised. Two studies investigated perspectives of MTSS implementation within the context of a more extensive study. Splett and colleagues (2021) examined eight schools participating in the MTSS condition of a more extensive randomised control trial. Menzies and colleagues (2022) selected interview participants from an IES-funded Researcher-Practitioner Partnership study of teacher efficacy and burnout. Although secondary data can sometimes result in misinterpretation of findings due to the researcher's understanding of the original data set (Cheng et al., 2014), the WoE A rating in these studies remains the same as the original data collectors were involved in both studies.

Integrating quantitative and qualitative components in mixed-methods studies adds increased complexity to sampling procedures (Onwuegbuzie & Collins, 2017), with a recommended combination of sampling methods (Palinkas et al., 2013). As well as purposive sampling, Askell-Williams and colleagues (2018) utilised stratified random sampling to ensure

state, school size, and sector representation. Schools were selected for Eiraldi and colleagues' (2021) mixed-methods study based on fidelity to tier one PBIS implementation according to the Pennsylvania Positive Behaviour Support (PAPBS) Network, with school principals subsequently nominating a PBIS Leadership team member for focus group participation. A lack of transparency regarding sampling methods resulted in a lower WoE B score for one study (Brann et al., 2022), which explored staff of two private schools within the Midwestern USA that expressed interest and readiness to adopt screening for mental health practices. All mixed-methods and quantitative studies, except one, had limitations in disclosing non-response bias, which impacted the rigour of the quantitative data phase and, consequently, the generalisability of the questionnaires (Berg, 2005). No difference was detected between average class size or expenditure per student between participating and non-participating schools in Eiraldi and colleagues' (2023) study, implying that results generalise to different contexts.

2.6.4.5 Data Collection. The qualitative studies examined in the present review incorporated focus groups as a research method. However, only one study justified this methodological choice based on its alignment with the study's theoretical perspective, Activity Theory, which involves a community of multiple viewpoints (Cane et al., 2015; Engeström, 1987). Several studies described the process undertaken by the research team in developing interview questions (Askell-Williams et al., 2013; Eiraldi et al., 2023; Cane et al., 2015; Menzies et al., 2022), enabling researchers to assess the questions for potential bias, in line with NICE Guidelines (2014). The utilisation of pre-existing focus groups (Cane et al., 2015; Splett et al., 2021) and a researcher who was familiar with the educational staff when conducting focus group interviews (Splett et al., 2021) may have introduced social desirability bias to two qualitative studies (Bergen, 2020). However, 'within methods' methodological triangulation of both focus

groups and semi-structured interview data enhances the credibility and depth of the collected data (Splett et al., 2021), with one-to-one interviews found to be particularly effective in elevating the authenticity and quality of the data gathered (Guest et al., 2017). This, in turn, positively influenced the ratings for WoE A.

The mixed-methods research reviewed utilised sequential explanatory (Eiraldi al., 2023) and convergent designs (Brann et al., 2021). One study did not specify the mixed-methods design being implemented and, therefore, received a lower WoE A score (Askell-Williams et al., 2013). The provision of a rationale for this methodological choice played a role in enhancing the WoE A rating of these studies, demonstrating that the research was conducted thoughtfully and systematically, adding transparency and credibility to the study. Mixed-methods offered a valuable means to explore the research topic in one study (Eiraldi et al., 2023), while the convergent parallel mixed-methods case study design facilitated the identification of both measurable outcomes and details of implementation processes in another (Brann et al., 2021). One study did not justify their selection of a mixed-methods design, which had implications for their WoE A score (Askell-Williams et al., 2013).

Several steps were taken to enhance the rigour of qualitative findings in the qualitative and mixed-methods studies reviewed. The use of both first-level and second-level member checks (Brann et al., 2021; Cane et al., 2015; Pavri, 2010; Splett et al., 2021), researcher reflexivity (Menzies et al., 2022), discrepant case analysis (Menzies et al., 2022), rich detailed quotes (Menzies et al., 2022; Pavri, 2010), and inter-rater reliability checks (Askell-Williams et al., 2013; Brann et al., 2021; Cane et al., 2015; Menzies et al., 2022; Splett et al., 2021) contributed to the credibility of the studies examined, therefore earning higher WoE A scores.

Quantitative data collection in quantitative and mixed-methods studies involved established assessment tools and custom questionnaires. Studies providing details about psychometric properties received higher WoE A ratings (Romer et al., 2018; Brann et al., 2021), while the absence of reliability statistics and information about the custom Teacher Questionnaire's psychometric properties resulted in lower WoE A ratings (Askell-Williams et al., 2013). In a mixed-methods case study by Brann et al. (2021), implementation reach was assessed using the School Mental Health-Quality Assessments tool, which two participants completed. Due to the context-specific nature of this case study, its findings may not be readily generalisable to diverse educational settings.

2.6.4.6 Data Analysis. Using analytical frameworks specific to the research context resulted in improved WoE A scores, enhancing the credibility of qualitative studies. The socio-cultural activity theory was employed to guide analysis in one study (Cane et al., 2015; Engeström, 1987), while the theoretical framework of organisational readiness was used to guide analysis in another (Splett et al., 2021; Weiner, 2009). Menzies and colleagues (2022) reflexively employed sensemaking to understand the meaning participants themselves make of the Comprehensive, Integrated, Three-Tiered Model of Prevention. While Pavri (2010) incorporated member checks and the use of Grounded Theory in data analysis, the absence of a clear rationale for adopting grounded theory and a lack of evidence demonstrating efforts to establish dependability or transferability of findings resulted in the study receiving a 'medium' WoE A rating.

Integrating qualitative and quantitative components during data analysis is pivotal in elevating the WoE A rating of mixed-methods studies (Fetters et al., 2013; Hong et al., 2018). Both Brann et al. (2021) and Eiraldi et al. (2023) successfully demonstrated integration, resulting in more

cohesive and unified conclusions (Fetters et al., 2013), while the study by Askell-Williams et al. (2013) did not. This was noted in the WoE A criteria, assessing rigour in answering the review question. Descriptive analysis was conducted in each quantitative and mixed-methods study to present means and standard deviations of the data. Both parametric (Romer et al., 2018) and non-parametric (Eiraldi et al., 2023; Romer et al., 2018) tests were also conducted.

2.6.5 Synthesis of Findings

The Joanna Briggs Institute (JBI) approach to the synthesis of mixed-methods systematic reviews was employed in the present review (Stern et al., 2021). This involved a convergent segregated synthesis approach, wherein qualitative and quantitative data were synthesised independently first and then integrated together, providing a rigorous framework for handling the diversity of data types included in the review (Lockwood et al., 2015; Stern et al., 2021). Rooted in the pragmatic paradigm, this approach seeks to summarise and accurately represent the primary author's original findings without extensive re-interpretation, thereby minimising the potential impact of researcher bias (Hannes et al., 2011; Lockwood et al., 2015). This methodology recognises interpretive phenomena' complexity and contextual nature and aligns with the present review's objective of uncovering participant experiences and perspectives (Gough et al., 2013). This process enabled the synthesis of multiple studies to answer the review question more comprehensively and accurately than could be achieved by one study alone (Gough et al., 2013).

Step one involved identifying qualitative findings through repeated readings of the study's results sections. The review's conclusions revealed several themes across multiple studies, such as 'the value of leadership', 'competing priorities', and 'support from external clinicians'.

Step two involved comparing the findings from different papers to identify similarities in meaning and then establishing categories. These categories were subsequently brought together in Step Three to create a synthesised finding, encompassing an overarching description of a group of categories deemed similar in meaning (Lockwood et al., 2015). In contrast with the process of identifying findings, interpretation was required to establish categories.

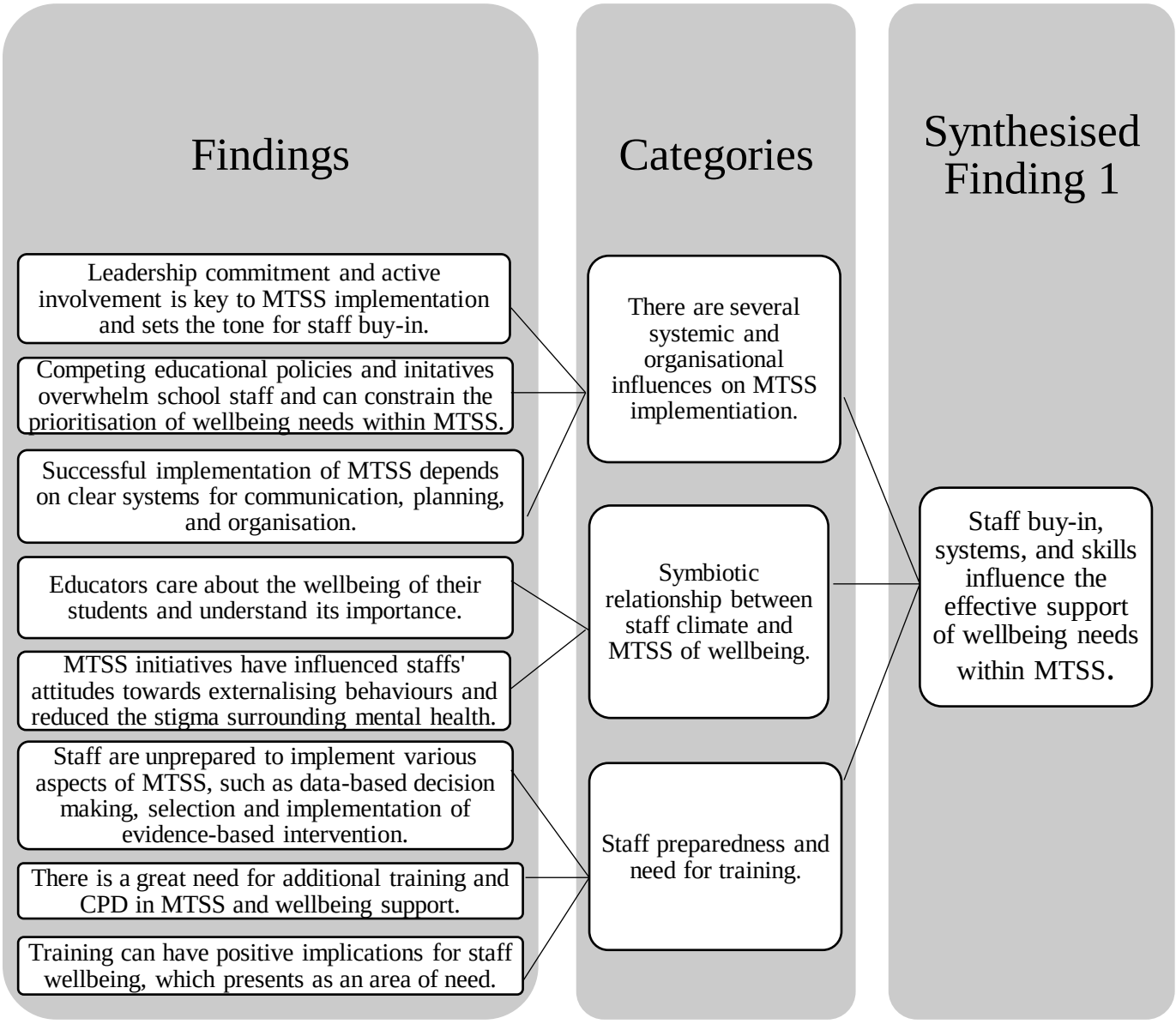
Step four involved repeating this process to generate synthesised outcomes from the quantitative findings of mixed-methods and quantitative studies reviewed. Subsequently, quantitative and qualitative synthesised outcomes were reviewed and integrated (Stern et al, 2021). Weight of Evidence (WoE) D scores obtained during the preceding critical analysis phase were utilised to guide the extent to which individual study results contributed to the ensuing synthesis. Studies with higher weightings were considered more pertinent to the objectives of the present review.

2.6.5.1 Qualitative Studies

2.6.5.1.1 **Synthesised Finding One.** The first synthesised finding relates to how staff buy-in, systems, and skills impact the effective support of wellbeing needs within MTSS across the schools participating in the reviewed studies. To present this synthesised finding more clearly, the categories, along with their corresponding findings, are outlined (See Figure 11).

Figure 11

Synthesised Finding One



2.6.5.1.2 Category One. Organisational and systemic factors are pivotal for successful MTSS implementation. Educators believe that strong leadership commitment and involvement are essential for successfully establishing MTSS as an accepted philosophy within the school (Pavri, 2010). Committed administrators who set clear expectations and allocate resources facilitate Response to Intervention (MTSS) practices (Pavri, 2010). Conversely, lacking senior

leadership positions can diminish MTSS' effectiveness (Cane et al., 2015). The importance of leadership stability was highlighted, with turnover in leadership hindering staff buy-in (Splett et al., 2021). Teacher perceptions of leadership actions significantly influence reform acceptance (Menzies et al., 2022), supporting the 'do what I do' leadership approach highlighted in the literature (Datnow & Castellano, 2001; Rowan et al., 2009).

Competing educational policies emerged as a theme that challenges staff in their ability to prioritise wellbeing needs within MTSS. Frequent changes in programmes and initiatives by district leadership, often without communication or rationale (Splett et al., 2021), hinder staff buy-in. Additionally, educators reported that pressures such as scrutiny from regulatory bodies like Ofsted (the Office for Standards in Education, Children's Services and Skills) in the UK (Cane et al., 2015) or NCLB (No Child Left Behind) legislation in the USA (Pavri, 2010) force a shift from wellbeing to academic outcomes. Reactive responses to high-need students can divert resources from proactive interventions, thus challenging the principles of MTSS (Cane et al., 2015).

Furthermore, clear communication, planning, and organisation systems were presented as vital for MTSS success. According to the school staff interviewed, mental health teams with designated co-ordinators and defined roles enhance MTSS school-wide implementation (Cane et al., 2015; Pavri, 2010; Brann et al., 2021). Collaborative decision-making fosters buy-in and consistency, while collaborative planning was deemed essential for a well-structured MTSS approach, discouraging hasty implementation without established systems (Brann et al., 2021; Pavri, 2010; Splett et al., 2021)

2.6.5.1.3 Category Two. The symbiotic relationship between staff climate and tiered wellbeing support emerged as a key theme in the reviewed studies. Education staff consistently

demonstrated a deep commitment to the wellbeing of their students, highlighting their fundamental recognition of its significance (Askell-Williams et al., 2013; Brann et al., 2021; Cane et al., 2015; Menzies et al., 2022). Several studies reported that embedding wellbeing within MTSS led to a transformative shift in staff attitudes toward externalising behaviours, prompting them to view these behaviours through a more holistic lens and, therefore, gain a deeper appreciation of the social and emotional dimensions of student behaviour (Menzies et al., 2022). Furthermore, the process encouraged an open and constructive dialogue about mental health, demystifying and destigmatising the topic within the school community (Askell-Williams et al., 2013; Pavri, 2010). Educators' commitment to student wellbeing influences the integration of wellbeing within MTSS, which, in turn, fosters a supportive school climate that values and actively promotes the mental and emotional aspects of student development.

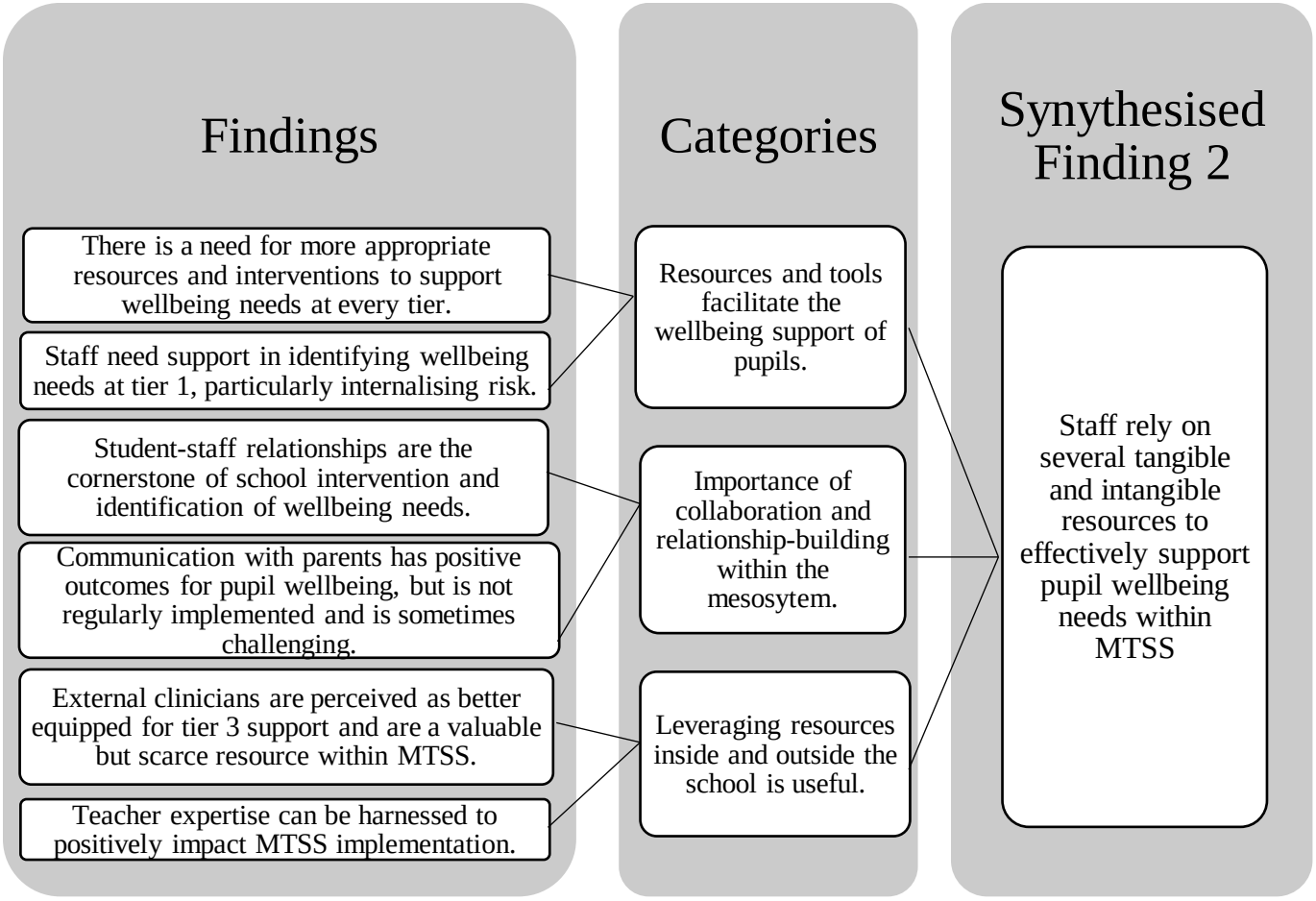
2.6.5.1.4 Category Three. Effective multi-tiered wellbeing support hinges on staff preparedness and training, a pressing need highlighted in the studies reviewed. Many staff members must gain skills in key MTSS aspects, such as identifying at-risk pupils, data-based decision-making, and selecting appropriate evidence-based interventions (Eiraldi et al., 2023; Brann et al., 2021). There is an apparent demand for precise guidance, especially for CTs navigating their role according to SETs (Pavri, 2010), and a pervading fear that "if you're not trained properly, you can cause more harm than good" (Cane et al., 2015, p12). Many advocated for comprehensive whole-staff awareness training, with an urgent call for a deeper understanding of mental health issues within MTSS (Cane et al., 2015; Eiraldi et al., 2023; Pavri, 2010). The desire for more flexible and dynamic training formats emerged, such as synchronous video training (Eiraldi et al., 2023), ongoing coaching and consultation (Eiraldi et al., 2023; Pavri, 2010), cascading training (Cane et al., 2015) and in-service days (Eiraldi et al., 2023).

Finally, staff training was reported to enhance professional competence and staff wellbeing (Cane et al., 2015). It increases self-awareness, helping staff understand and cope with stressors. Skills acquired in training extend to the personal lives of school staff, positively impacting their own wellbeing.

2.6.5.2 Synthesised Finding Two. The second synthesised finding concerns the various tangible and intangible resources staff use to support pupil wellbeing effectively needs within MTSS (Figure 12). The categories and corresponding findings are outlined to present this synthesised finding.

Figure 12

Synthesised Finding Two



2.6.5.2.1 Category One. Implementing whole-school interventions has proven effective in fostering a common language around social-emotional health among students (Brann et al., 2021). However, the reviewed studies reveal a pressing need for more contemporary, outcome-aligned interventions, especially at tier three of the MTSS (Eiraldi et al., 2023; Menzies et al., 2022). Some educators view their school's evidence-based programmes as outdated and ineffective in promoting students' social and emotional wellbeing (Menzies et al., 2022) and advocate for more developmentally appropriate interventions that consistently build essential skills, such as emotional regulation (Eiradi et al., 2023). Studies revealed that the scope, sequence, content, and recommended pedagogical approaches of wellbeing programmes can essentially direct the teacher's approach to whole-class mental health and wellbeing support, implying a lack of knowledge and training among teachers (Askell-Williams et al., 2013; Brann et al., 2021).

Findings also emphasise the critical need for standardised tools to identify social-emotional needs, particularly internalising behaviours that can go unnoticed due to their subtle nature (Brann et al., 2021; Eiraldi et al., 2023; Pavri, 2010). Observation remains a primary method for identifying social-emotional needs (Pavri, 2010). The limited availability of screening instruments raises concerns about students silently struggling with their mental health within the school environment (Brann et al., 2021).

2.6.5.2.2 Category Two. The importance of ongoing teacher-parent communications and parent-school relationships was highlighted in several studies (Cane et al., 2015; Pavri, 2010). However, teachers reported a tension between the need to possess comprehensive knowledge of learners, especially regarding mental health, and the limited availability of relevant information (Askell-Williams et al., 2013). While teachers believe that a stigma and difficulty talking about

mental health among parents may explain this (Cane et al., 2015), several outreach strategies targeting parents and the community were highlighted in the studies reviewed to increase buy-in and open channels of communication about mental health, such as monthly newsletters, home-visits, parent evenings and training (Brann et al., 2021; Cane et al., 2015). Student-staff relationships serve as the bedrock of school interventions and the identification of wellbeing needs. Present across seven studies was the prevalence of positive relationship-building techniques in schools, including checking in with students, informal consultations, and showcasing students' strengths and talents (Askell-Williams, 2013; Brann et al., 2021; Menzies et al., 2022; Pavri, 2010). Menzies et al. (2022) illuminate how teachers' perceptions of practices, their impact on students, and their reception by students are integral in driving teacher buy-in.

2.6.5.2.3 Category Three. Within MTSS, the strategic allocation of resources inside and outside the school emerged as a critical factor in supporting pupil wellbeing. Teachers shared positive experiences when collaborating with external clinicians, with the educational psychologist emerging as a valuable resource (Cane et al., 2015; Pavri, 2010). One study emphasised the importance of forming mental health teams that contain “all invested parties”, including school-employed mental health professionals, a practice that might deviate from international approaches where such support remains external to the school (Brann et al., 2021, p. 2101). Despite teachers' belief in the suitability of external professionals such as mental health therapists, educational psychologists, school counsellors, and social workers for tier two or tier three mental health interventions, their limited availability poses a significant challenge (Eiraldi et al., 2023). Teachers believe that staff members, even without traditional mental health backgrounds, can effectively deliver interventions with the proper training and personal qualities, such as patience and empathy (Brann et al., 2021; Eiraldi et al., 2023). Nevertheless, resource-

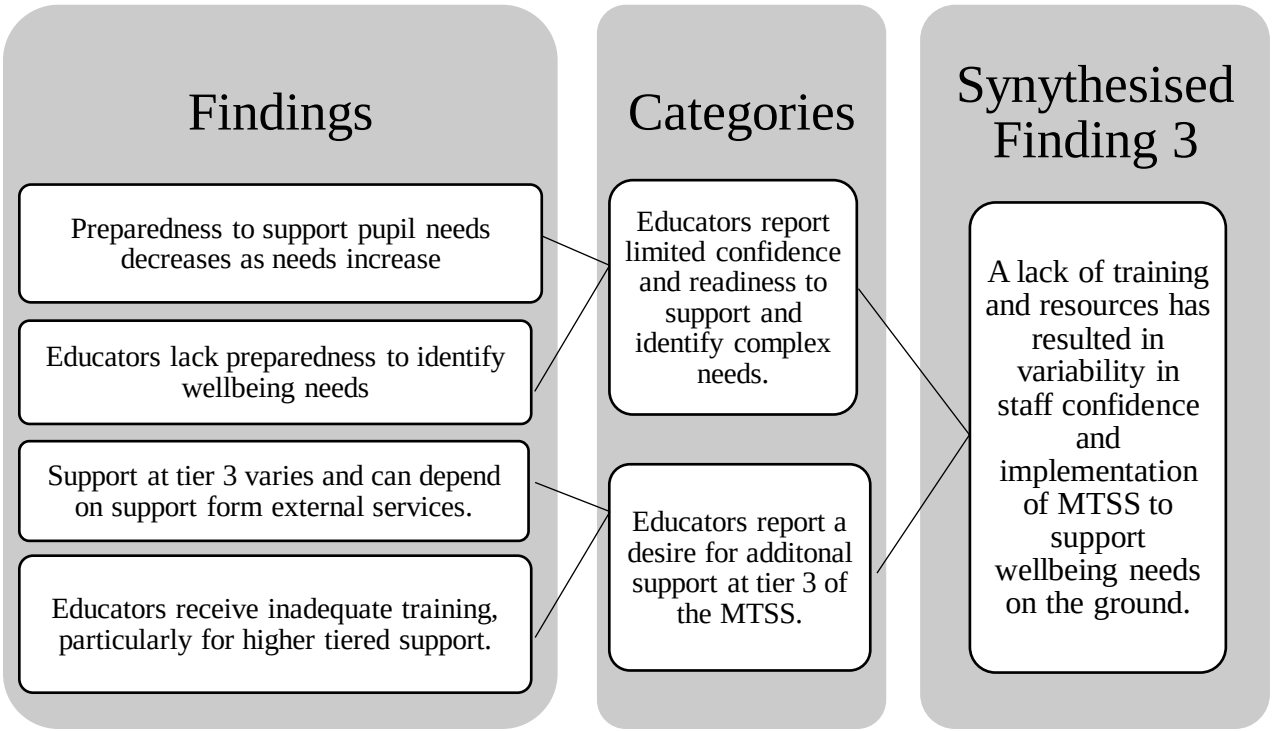
related challenges, encompassing staffing, budget constraints, and professional development, exacerbate resource allocation difficulties in tiered wellbeing support (Brann et al., 2021; Eiraldi et al., 2023; Pavri, 2010; Splett et al., 2021).

2.6.5.3 Quantitative Findings

2.6.5.3.1 Synthesised Finding Three. A review of the quantitative findings from the four studies included (Askell-Williams, 2013; Brann et al., 2021; Eiraldi et al., 2023; Romer et al., 2021) revealed a notable alignment with the qualitative findings delineated above. Findings relate to inadequate training and resources contributing to variability in staff confidence and MTSS implementation for pupil wellbeing. To present this synthesised finding more clearly, quantitative data was "qualitized" (Stern et al., 2021, p.3). The categories, along with their corresponding findings, are outlined in Figure 13.

Figure 13

Synthesised Finding Three



2.6.5.4 Integration of Qualitative and Quantitative Finding.

Qualitative and quantitative findings were integrated to fully synthesise the results of the reviewed studies (Harden & Thomas, 2010). The quantitative findings support themes highlighted within the qualitative synthesis. This includes findings related to teacher perceived competence in their ability to support and identify wellbeing needs of varying severity, the value and need for additional external professional support and collaboration, and the impetus for whole-staff training and resources. Findings from a large sample (N=822) within the sole quantitative study (Romer et al., 2018) corroborate these findings. Potential associations emerge by combining qualitative and quantitative results. For instance, synthesised findings one and two align with the need for staff training and high-quality resources to enhance teacher confidence and capacity, supported by quantitative data. The quantitative study's regression analysis indicates that access to training, resources, and coaching significantly predicts educators' preparedness (Romer et al., 2018).

Additionally, the drop in confidence captured by descriptive statistics at tier three of the MTSS (Romer et al., 2018) echoes qualitative concerns about the complexity of addressing internalising behaviours (synthesised finding two). Qualitative voices also emphasise the value of external clinicians for tier three, a finding substantiated by quantitative data. This integrated approach reveals tentative yet valuable insights into the factors influencing educators' effective wellbeing support within MTSS.

2.7 Conclusion

The present systematic review sheds light on the experiences and perspectives of education staff implementing MTSS to support pupil wellbeing needs. Findings from five qualitative, three mixed-methods and one quantitative study highlight the need to enhance staff

buy-in, system effectiveness, and staff skills. Findings further underscore the need to provide effective, actionable tangible and intangible resources to address disparities in staff confidence and MTSS implementation for wellbeing support. Limited preparedness to address more complex wellbeing needs and external clinician resource constraints have led to a reported gap in tier three provisions. Consequently, pupils with the highest level of wellbeing needs may receive the least appropriate support, revealing a fundamental misalignment with the core principles of multi-tiered systems of support and a need for additional investigation.

While the present review offers valuable insights into the experiences of education staff supporting pupil wellbeing through MTSS in the USA, Australia, and the UK, it emphasises the need for additional research within the Irish context of the CoS framework. It is essential to note that in-school on-site specialist clinicians, common in the reviewed studies, significantly differ from the Irish education system, where such professionals operate externally. This distinction underscores the importance of tailoring research to the specificities of the Irish educational landscape. Furthermore, the noteworthy dearth of studies explicitly focusing on wellbeing support within the framework of MTSS reveals a significant gap in the current literature, reflecting the tendency to study wellbeing within siloed disciplines (Stodden et al., 2023). As MTSS continues to evolve as a practice within educational systems, research must similarly advance to explore its real-world applications and effectiveness in promoting holistic wellbeing (DES, 2018). This aligns with advancements in biopsychosocial research of human development and the increased emphasis on wellbeing within Irish educational policy and guidelines (DES, 2018; DE, 2023a).

Given the global emphasis on addressing children’s social and emotional needs, early intervention during these formative years has become more crucial than ever in safeguarding this

population's wellbeing. Therefore, understanding wellbeing support practices in the primary school context is essential. Moreover, investigating MTSS implementation in disadvantaged and non-disadvantaged schools is imperative, considering the distinct challenges and differences in resource allocation in Irish DEIS (disadvantaged) schools under SETAM (DES, 2017). This is particularly important since, under the SETAM (2017), educators have been granted the responsibility of identifying and supporting diverse pupil needs, while schools' resource allocation and support capacity are contingent upon the school's educational profile. As this profile currently includes consideration of the school's social context and enrolment figures (DE, 2024), valuable insights can be gained to enhance the equity and efficacy of wellbeing support practices by exploring MTSS implementation across diverse educational contexts. Amid ongoing transformations in the Irish educational landscape, educators' narratives and insights emerge as paramount as they assume broader roles within the SETAM (DES, 2017). The experiences of educators implementing the CoS at the micro-level can offer valuable perspectives that inform future policy refinements and enhance the effectiveness of wellbeing support systems within the Irish educational context.

3.0 Empirical Paper Chapter

3.1 The Present Study

The present study aims to provide practical recommendations for educators addressing the wellbeing needs of primary school pupils in Ireland during their crucial formative years. The researcher recognises the pivotal role of early intervention initiatives in addressing early indicators of wellbeing needs and acknowledges the lasting impact of childhood wellbeing on adulthood outcomes (Richards & Huppert, 2011). The investigation will explore the experiences and perspectives of class teachers (CTs) and special education teachers (SETs) central to the day-to-day implementation of the Continuum of Support framework (CoS) (DES, 2007a). Additionally, school principals will be included, recognising their role in championing multi-tiered systems of support, as revealed in Synthesised Finding One from the present systematic review (See Section 2.6.5.1.2). DEIS (disadvantaged) and non-DEIS schools will be investigated to elucidate practices across diverse educational contexts with varying school educational profiles under the SETAM (DES, 2017) (See Section 2.4.1).

The following research questions (RQ) are addressed to gain a comprehensive understanding of the multi-faceted factors involved in the implementation of the CoS, guided by results from the systematic review of the literature and derived using the second generation of the Cultural-Historical Activity Theory (CHAT) framework (Engeström, 1999, 2001) (See Table 5). The CHAT framework provides a fitting lens for exploring policy intentions and on-the-ground practices, recognising that various social, cultural, and historical factors shape collective actions. Additional information highlighting the role of the CHAT framework in formulating RQs can be found in Section 3.2.1 and Appendix G.

Table 5

Research Questions

Number	Research Question
One.	What are the roles and responsibilities of each key educator implementing the CoS framework to support pupil wellbeing needs?
Two.	How are structures, resources, and supports used to support wellbeing needs within the CoS framework?
Three.	What expectations or rules influence the multi-tiered support of wellbeing through the CoS framework?

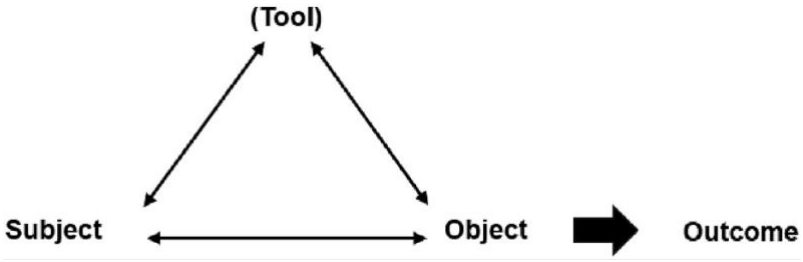
3.2 Methodology

3.2.1 Theoretical Framework: Cultural-Historical Activity Theory

The present study is grounded in the CHAT framework, as developed by Engeström (2000) and influenced by Vygotsky (1987). CHAT focuses on "historically evolving collective activity systems" and recognises that collective learning experiences are shaped by various social, cultural, and historical factors (Engeström, 2000, p. 960). CHAT has informed educational research on the experiences of educators implementing MTSS within school settings (Gomez-Najarro et al., 2020; Snyder & Witmer, 2024) and has gained prominence as a critical theoretical framework for examining activities in social settings, offering researchers the capability to address disparities between individual and collective actions (Roth et al., 2007). Initially, the first generation of the Activity Theory focused on the mediating role of social and cultural components between the subject and the desired outcome of collective learning experiences (Vygotsky, 1987) (See Figure 14).

Figure 14

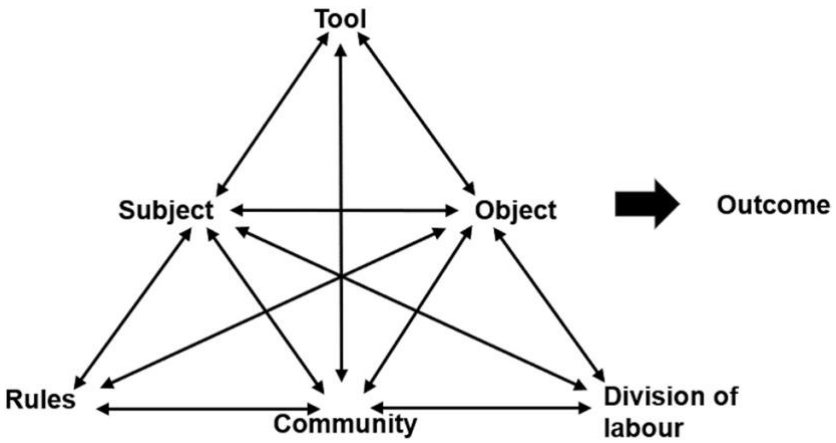
First Generation Activity Theory



This was further developed by Leontiev (1978) and Engeström (1987), giving rise to its Second Generation. This updated framework offers a more extensive perspective on activity systems, encompassing several 'analytical components' (Hashim & Jones, 2007), including the subject, object, mediating artefacts or tools, community, rules, and division of labour (Cole & Engeström, 1993) (See Figure 15). Additionally, the second generation emphasises the value of contradictions or tensions within and between the nodes of the activity system, functioning as catalysts for change and evolution (Hashim & Jones, 2007). The enhanced analytical capabilities offered by the second generation of the CHAT were deemed more suited to the present study, aligning with the complexities inherent within MTSS implementation elucidated in Section 2.4.3.

Figure 15

Second Generation Activity Theory Model



As elucidated in the systematic literature review outlined in Section 2.6, these nodes play a central role in the present study, offering a valuable framework to understand the multifaceted influences on MTSS implementation. Within the activity system of mainstream Irish schools implementing the CoS framework, subjects, CTs, SETS, and school principals, engage in goal-oriented actions aimed at achieving the outcome of supporting diverse student wellbeing needs. The division of labour between these stakeholders dictates the distribution of their tasks and responsibilities, impacting the negotiation of roles and expectations as they work collectively to implement the CoS effectively. Subjects rely on mediating artefacts, such as curricular materials, resources, knowledge, collaboration, and training, as tools to shape their approach to supporting wellbeing needs. The community, which encompasses the broader social and cultural group to which the subjects belong, is governed by explicit rules and social norms that regulate and influence behaviour, ultimately affecting how educators interact and collaborate to support student wellbeing. Engeström (1999) outlines five central principles when investigating activity systems, delineated in Table 6.

Table 6

Principles for Investigating Activity Systems (Engeström, 1999)

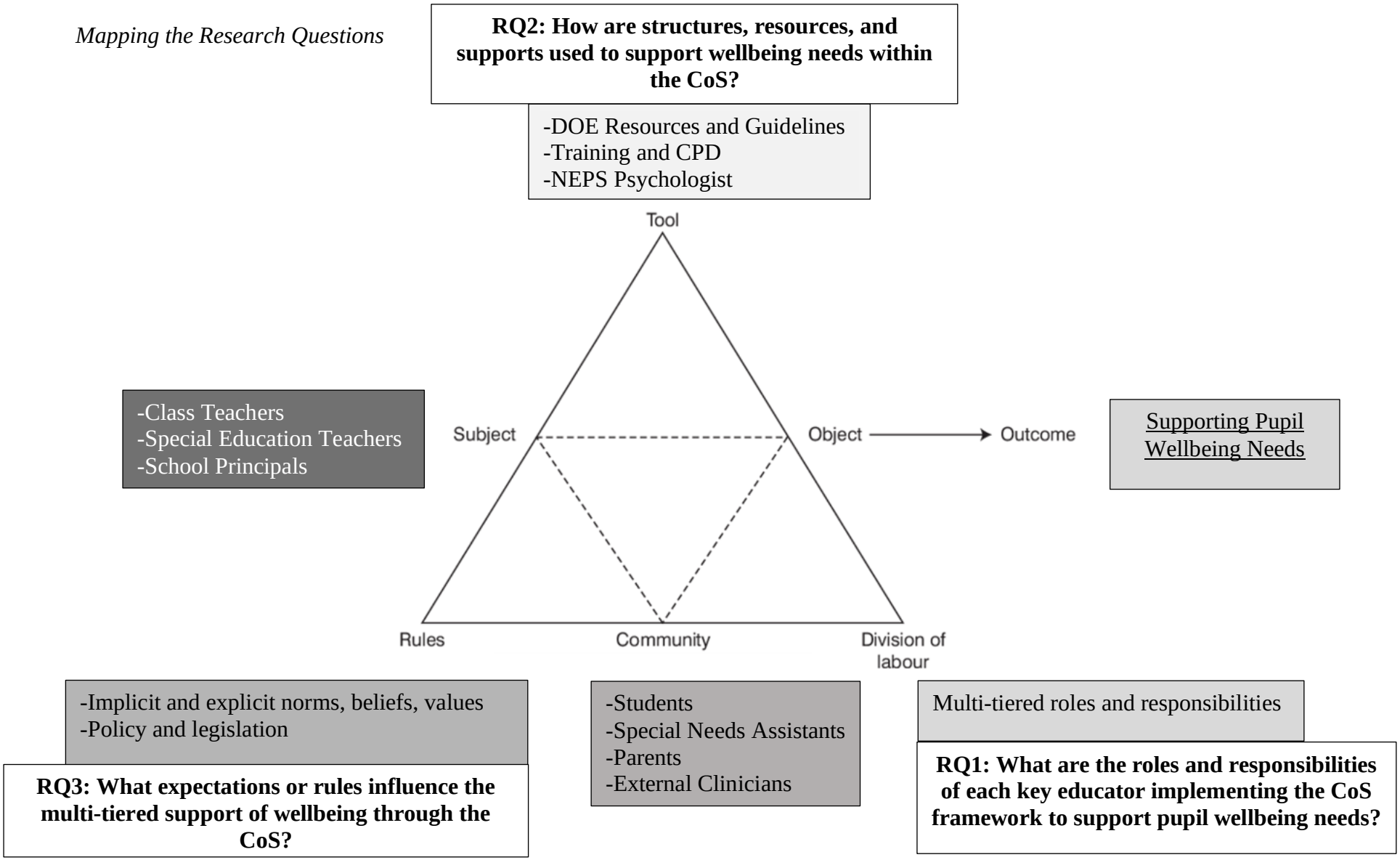
Number	Principle
1.	The primary focus of the study is an object-oriented activity system, which is mediated by tools and maintains interconnectedness with other activity systems in the wider context. The present study investigates the collaborative efforts of school principals, CTs and SETs, utilising tools such as evidence-based interventions and assessment materials within the three tiers of the Continuum of Support framework to support pupils with diverse wellbeing needs. These initiatives unfold within the dynamic context of the school's activity system and its intricate web of interactions with external systems.

2.	Activity systems inherently encompass a wide array of perspectives, known in the literature as 'multi-voicedness' (Engeström 2001). The present study predominantly examines the experiences of key participants, namely school principals, CTs, and SETs. Nonetheless, it is crucial to recognise the presence of various other voices within the system, including parents, students, and external professionals, all of whom collectively contribute to shaping the dynamics of the studied activity system.
3.	A comprehensive understanding of the activity system being explored requires careful consideration of its historical evolution and interactions with other systems. In relation to the present study, it was imperative that analysis of the collaborative work of school principals, CTs, and SETs takes place within the context of evolving educational policies and practices overtime, such as the Special Education Teacher Allocation Model (DES, 2017).
4.	The significance of contradictions within and between systems serves as a driving force for evolution and progress within activity systems. In the present study, the introduction of novel elements into the activity system, such as the Wellbeing Policy Statement and Framework for Practice (DES, 2018) may spark contradictions that challenge established practices, ultimately necessitating adjustments to align with the principles and objectives of supporting diverse wellbeing needs.
5.	Contradictions within the activity system can trigger 'expansive learning', a process outlined by Engeström (2001). When inconsistencies and challenges emerge in how the system operates, it has the potential to undergo substantial positive changes. This transformative learning may bring the system closer to achieving its intended collective goal, which, in the context of the present study, pertains to the effective support of pupils with diverse wellbeing needs.

Considering the five principles for examining activity systems, the present research will analyse the experiences of principals, CTs, and SETs to uncover any potential contradictions within the activity system of mainstream Irish schools implementing the CoS (See Figure 16).

Figure 16

Mapping the Research Questions



3.2.2 Research Paradigm

As the chosen paradigm for the present study, pragmatism aligns with the evolving landscape of educational research (King, 2022). This paradigm emphasises practicality and the search for solutions to real-world issues, resonating with the current call for actionable insights in the field of education (Bridges & Bridges, 2017; Kelly & Cordeiro, 2020). Pragmatism encourages researchers to transcend rigid philosophical boundaries and integrate diverse methods and perspectives to obtain the most optimal answers for the study's research questions (Tashakkori et al., 2010). Therefore, the present study incorporates a mixed-methods design to provide a comprehensive and multi-perspectival overview of the perspectives of key stakeholders within the school system. This was deemed optimal in answering the research questions. The flexibility afforded by pragmatism enabled qualitative and quantitative data integration, offering a comprehensive understanding of the subject matter.

Furthermore, pragmatism as the chosen paradigm aligns with the present theoretical framework, the second generation of CHAT (Engeström, 2001). Pragmatism's emphasis on practical solutions resonates with CHAT's focus on understanding and improving the CoS activity system. Specifically, CHAT's emphasis on identifying contradictions within the CoS framework reflects a shared pragmatic orientation towards recognising areas for improvement and offering practical recommendations. By adopting a pragmatic stance, the present study aims to bridge the gap between theory and practice in understanding the experiences of educators involved in implementing the CoS.

Acknowledging the role of positionality is crucial in understanding the researcher's perspective within the present study (Bourke, 2014). Considering the researcher's background as an educator, the present study benefits from a practical and problem-solving mindset cultivated

in the field. However, it is essential to acknowledge that the researcher's background may introduce a certain level of insider perspective, potentially influencing the interpretation of findings. To address this, reflexivity will be a crucial aspect of the research process, ensuring transparency about the researcher's role, experiences, and potential impacts on the study's outcomes (Corlett & Mavin, 2018). This dual focus on the implications of pragmatism for the research design and the researcher's positionality contributes to the overall robustness and transparency of the study.

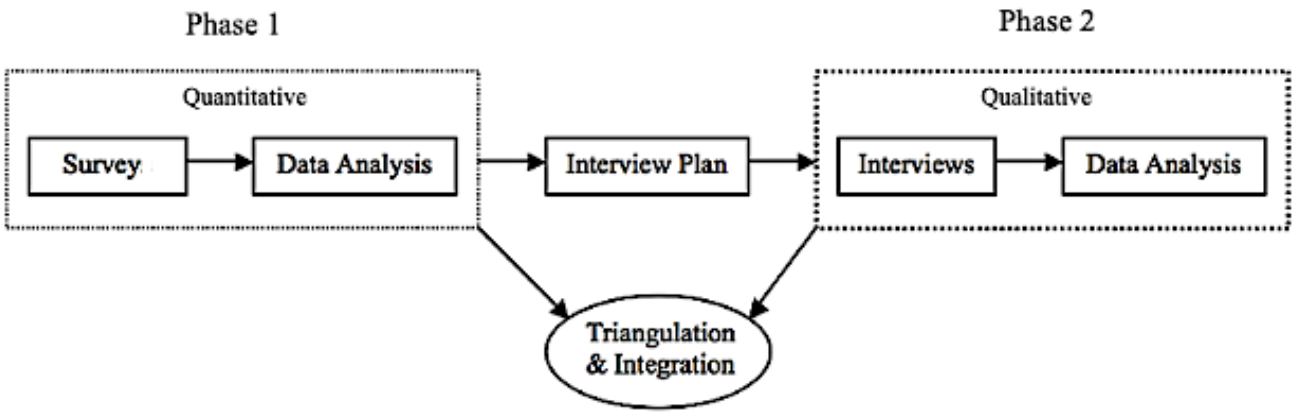
3.2.3 Research Design

The present study employed a mixed-methods sequential explanatory design with a primary focus on qualitative enquiry, combining the collection, analysis, and integration of qualitative and quantitative data (Doyle et al., 2016) (See Figure 17). In line with the study's pragmatic paradigm, this research design was chosen to facilitate a more complete, well-rounded understanding of the present research topic than could be achieved by stand-alone methods (Johnson et al., 2007; Mertens, 2023; Teddlie & Tashakkori, 2011). Initially, a national cross-sectional survey was conducted to collect quantitative data from a diverse sample of mainstream primary school principals, CTs, and SETs across Ireland. This facilitated the exploration of "large-scale patterns in education reform on a representative sample" of educators (Desimone & LeFloch, 2004, p. 2). Findings from this quantitative data informed the subsequent qualitative phase, which involved administering semi-structured interviews with a smaller subset of participants. Interviews were selected for their versatility, serving as a powerful and flexible data collection tool that allows for spontaneity and flexibility in conversation (Brinkmann, 2014) while opening multi-sensory channels to capture participants' detailed descriptions and experiences (Cohen et al., 2018; Golafshani, 2003). The 'Follow-Up Explanatory Model' of

mixing data was employed, using qualitative data to explain, enrich, and triangulate the quantitative findings (Creswell & Plano Clark, 2017). The qualitative component played a vital role in triangulating, clarifying, and expanding the quantitative findings, providing a more comprehensive and nuanced understanding of the phenomena under investigation (Bryman, 2006; Creswell & Plano Clark, 2017). This was deemed vital to address the complex research questions thoroughly.

Figure 17

Sequential Explanatory Mixed-Methods Design (Wu, 2011)



3.2.4 Ethics

Before commencing data collection, ethical approval was granted by the Mary Immaculate Research Ethics Committee (MIREC) in January 2023 (See Appendix H), adhering to the ethical codes of the Psychological Society of Ireland (PSI) and the British Psychological Society (BPS). Information sheets and consent forms were provided, and anonymity and data confidentiality were maintained in line with Mary Immaculate College's data retention policy. In approaching sensitive topics during the research, the study prioritised effective interpersonal communication models to ensure participant wellbeing. The process drew inspiration from models such as the empathic listening model proposed by Rogers (1952), which emphasises

understanding and reflecting participants' feelings during interviews, fostering a supportive environment. Additionally, the study incorporated principles from the trauma-informed communication model (Harris & Fallot, 2001) to create a space that acknowledges potential trauma and addresses it with sensitivity.

If signs of upset or distress arose during the research interview process, the researcher was prepared to ensure that participants were aware of available resources, such as the Employee Assistance Service (EAS), and encourage them to access this professional support platform if needed. The EAS, managed by the Department of Education, offers confidential counselling for teachers, covering various issues, including health, relationships, stress, and trauma. This service aligns with best practices in participant care during research involving sensitive topics, ensuring ongoing support beyond the scope of the study (PSI, 2019; Silverio et al., 2022)

3.2.5 Participants

The study population included mainstream primary school principals, CTs and SETs. Primary schools were chosen due to their significance in early wellbeing development and early intervention, while the perspectives of CTs and SETs were prioritised due to their central roles in supporting pupils with additional needs within the three tiers of the CoS, as delineated within guidance documents (DES, 2007a). Recognising the highly influential role of school leaders in spearheading multi-tiered support, as emphasised in the present systematic review of the literature, the perspectives and experiences of school principals were also sought. A total of one hundred and thirty-six participants completed the online survey (See Appendix I), while a subsample of 9 participants participated in semi-structured interviews, including one principal, one CT, and one SET from three diverse school settings (See Table 7).

Table 7

Demographics of Semi-Structured Interview Participants

Name	Current Role	Gender	Years of teaching experience	Highest Level of Qualification	School Type
P1	Principal	Female	15 years or more	Master's Degree	Non-DEIS (Urban)
P2	Principal	Male	15 years or more	Bachelor of Education	DEIS Band 2 (Urban)
P3	Teaching Principal	Male	15 years or more (1 year in current role as principal)	Master's Degree	Non-DEIS (Rural)
CT1	2nd class teacher	Female	11-15 years	Bachelor of Education	Non-DEIS (Urban)
CT2	Senior infant teacher	Female	5-10 years	Bachelor of Education	DEIS Band 2 (Urban)
CT3	Junior class teacher (Junior infants to 1st class)	Female	15 years or more	Bachelor of Education	Non-DEIS (Rural)
SET1	Special education teacher for 3rd class	Female	15 years or more	Postgraduate Diploma in SEN	Non-DEIS (Urban)
SET2	Special education teacher for senior infants	Female	15 years or more	Postgraduate Diploma in SEN	DEIS Band 2 (Urban)
SET3	Special education teacher for whole school	Female	5-10 years	Bachelor of Education	Non-DEIS (Rural)

3.2.6 Quantitative Phase

3.2.6.1 Questionnaire Design. The initial phase of data collection involved the distribution of a web-based survey (See Appendix J). This was developed using Qualtrics and sent to participants via email, as outlined in Section 3.2.6.3. Both categorical and open-ended questions were included, which aligned with the pragmatist research stance. Questions were developed by the researcher, drawing from the CHAT framework, departmental guidelines

(DES, 2007a, 2007b, 2011, 2015, 2017), and insights from the present systematic literature review. For instance, respondents were presented with examples of assessment tools sourced in the departmental guidelines on wellbeing support (DES, 2015), offering a multiple-choice format for indicating tools used to identify and monitor wellbeing needs within the CoS, along with an option add ‘other’ tools used.

Additionally, questions were influenced by findings from the systematic review of the literature; for example, one study referenced potential contradictions among educators implementing a Response to Intervention framework to support pupil mental health needs, prompting the question of the articulation of roles within the CoS (Pavri, 2010). To further enhance the alignment of the survey questions with the CHAT framework (Engeström, 1987), the research process involved adapting Mwanza's (2002) Eight-Step Model of Activity-Oriented Design Methods. This model guided the identification of critical components, such as the activity of interest, objectives, subjects, tools, rules and regulations, division of labour, community, and desired outcomes, ensuring a comprehensive exploration of participants' experiences implementing the CoS in Irish primary schools (See Appendix G).

3.2.6.2 Pilot. In February 2023, a pilot study was conducted to refine the survey instrument. The pilot was carried out with seven qualified and practising volunteers, including three CTs, two SETs, one deputy principal, and one principal from various schools in the Munster region of Ireland. The primary purpose of the pilot study was to test the clarity and effectiveness of the survey questions, identify any ambiguities or issues in the questionnaire, and gather feedback from participants to ensure that the final data collection process would be efficient and yield valuable results (Brooks et al., 2016). During the pilot study, the researcher was present with several volunteers as they interacted with the survey form on the screen. This

allowed for real-time observation of their engagement, provided insights into their comments, and facilitated identifying and documenting any misconceptions or misunderstandings that arose during the survey completion process. As Wyatt and White (2000) recommended, this hands-on approach proved invaluable in evaluating the precision and clarity of the questionnaire's wording and structure. One notable addition resulting from the pilot was a visual representation of the CoS at the beginning of each survey page. This visual aid aimed to provide participants with a clear reference point regarding the CoS tiers, enhancing their understanding and facilitating a more accurate and informed response to the survey questions. Participants were also allowed to select "No NEPS allocation" when discussing NEPS psychologist engagement, acknowledging the possibility that not all schools may have NEPS allocations and ensuring that participants could accurately represent their school context. Skip logic in Qualrics was also employed to ensure participants were not presented with irrelevant questions, thereby maintaining survey accuracy and relevance. Following the incorporation of the appropriate improvements, a stepped approach to survey distribution was followed, as outlined in section 3.2.6.3.

3.2.6.3 Recruitment and Data Collection. Quantitative data collection for the present study followed a non-probability self-selection sampling method. The DE database, which lists primary schools enrolled for the 2022/2023 academic year, served as a sampling frame. The survey invitations and reminders were forwarded to all mainstream primary school principals whose email addresses were registered on the Primary School Database (n=3,096). Consecutive sampling was employed, with school principals acting as gatekeepers to CTs and SETs. Given this consecutive approach, a specific response rate could not be determined, but efforts were made to maximise participation by incorporating a stepped approach to survey distribution. This approach involved (a) sending an introductory email to schools; (b) sending subsequent emails

containing survey links and information sheets; and (c) two reminder emails sent at two and four-week intervals (Dillman, 2011). Data collection occurred from March to May 2023.

3.2.6.4 Data Analysis. Quantitative data analysis was conducted using Statistical Package for the Social Sciences (SPSS) to generate descriptive statistics, such as frequencies and averages, providing valuable insights and initial trends related to the research questions. This aligned with the present research's primarily qualitative focus and pragmatic paradigm. Statistics generated facilitated the identification of emerging key areas and contradictions for further in-depth exploration during the subsequent qualitative phase (Engeström, 1999). Qualitative survey responses were gathered to support quantitative information and to allow for 'other' responses within pre-defined multiple-choice options. This data was analysed utilising Step One and Step Two of Braun and Clarke's (2022) Reflexive Thematic Analysis. Multiple readings of the qualitative data in Step One and the assignment of initial codes in Step Two unveiled emerging patterns and areas of interest, laying the foundation for subsequent exploration in the interviews. Descriptive statistics and notable information highlighted during this initial quantitative phase informed the qualitative interview schedule.

3.2.7 Qualitative Data

3.2.7.1 Semi-structured Interview Protocol Development. The subsequent qualitative stage served as the primary method for data collection in the present research and involved conducting semi-structured interviews with nine participants. Consistent with the preceding quantitative phase, the initial draft of the semi-structured interview protocol was developed utilising the Second Generation of the CHAT framework and an adapted version of Mwanza's (2002) Eight-Step Model of Activity-Oriented Design Methods (See Appendix G). Departmental

guidelines (DE, 2007, 2011, 2015, 2017) and insights from the literature review further influenced the creation of the draft protocol.

Following the sequential explanatory mixed-methods design, the draft protocol was refined following the initial online survey analysis to better understand the preliminary quantitative findings of interest (Teddlie & Tashakkori, 2009). For example, many respondents identified 'pressure to prioritise other special educational needs' as a major barrier affecting their support for pupil wellbeing needs. This finding was unexpected considering the shift from diagnosis-based to needs-based support under the SETAM and prompted further investigation. Additionally, 35% of survey participants were uncertain whether legislation or professional guidelines guided their practice implementing the CoS for pupil wellbeing. This underscored the necessity for more explicit inquiries into key developments in the educational landscape, such as the SETAM. Moreover, a qualitative survey response emphasising the impact of 'teacher wellbeing as the most impactful form of support' prompted further exploration of stakeholder experiences and perspectives on teacher wellbeing and its significance when supporting pupil wellbeing needs. The interview protocol can be found in Appendix K.

3.2.7.2 Semi-structured Interview Pilot. Two pilot interviews were conducted in May 2023, involving the simulation of a real-world interview situation with three volunteers: a principal, CT, and SET (See Appendix K). Adjustments were made to the interview protocol based on these pilots, including refining the wording and re-ordering the questions. This was conducive to a more naturally flowing, purposeful conversation (Brinkmann et al., 2015). For instance, it was observed that the CT sometimes referred to her use of the CoS to explore needs in general without specific reference to pupil wellbeing needs. To address this, the wording of relevant questions was refined to explicitly inquire about experiences related to addressing

wellbeing needs within the CoS. Additionally, both teachers lacked knowledge of the policy when probing about the participants' awareness and understanding of the Wellbeing Policy Statement and Framework for Practice and its alignment with the CoS. This question was revised to avoid assumptions and encourage more open-ended responses. Furthermore, recognising the need for a standardised understanding of wellbeing among participants, an outline of the Department of Education's definition of wellbeing, as incorporated in the present study, was introduced at the outset of the semi-structured interviews. This prelude ensured a common foundation for discussing wellbeing and its integration with the CoS.

3.2.7.3 Semi-structured Interview, Recruitment, and Data Collection. Semi-structured interviews took place with nine participants in three mixed, mainstream primary schools in the southwest of Ireland. The three schools in the qualitative study were selected independently of the survey sample, utilising convenience sampling. Consistent with the first data collection phase, the interview sample included principals, CTs, and SETs, who were “purposely sought out" (Reed et al., 1996, p. 149) to facilitate the later triangulation of participant data. The educational profile of each school was considered when selecting schools to participate in the interviews, with interviews conducted in three contexts, as outlined in the table below (DES, 2017).

Table 8

Characteristics of Selected Schools

School Pseudonym	School Context	Enrolment Numbers
School One	DEIS Band 1: Urban	252
School Two	Non-DEIS: Urban	439
School Three	Non-DEIS: Rural	49

This criterion was crucial to represent school types and resource allocations under the SETAM (DE, 2017, 2023). By deliberately including diverse school types, the study aimed to

capture a comprehensive understanding of how different educational contexts, with varying resource capacities, interpret and implement the CoS to support student wellbeing needs. This approach enhances the transferability of findings across different school settings, enriching the overall depth of insights gained from the interviews. Interviews took place in-person in June 2023. All interviews were audio-taped, with audio files later imported into NVivo 12 software for transcription.

3.2.7.4 Data Analysis. Following orthographic transcription, technical member checking was conducted by posting a copy of the interview transcript to each participant to verify the accuracy and credibility of qualitative data (Sandelowshi, 2002). While none of the participants raised concerns or reservations regarding the interview content, two participants expressed surprise at the frequency of fillers used, aligning with similar concerns voiced by participants in the literature (Forbart & Henderson, 2005). These participants were content to leave the transcript unchanged.

The qualitative analysis employed a nuanced ‘hybrid approach’ involving two stages (Braun & Clarke, 2021; Fereday & Muir-Cochrane, 2006). Firstly, an initial inductive coding process was used to authentically capture participant experiences without predetermined categories, allowing themes to emerge organically from the data. This was followed by deductive coding, wherein data analysis occurred through the theoretical lens of the CHAT framework (Braun & Clarke, 2021; Krause & Lynch, 2020). This facilitated a structured interpretation of the data within the context of the key nodes or ‘analytical components’ of the study’s theoretical framework (Hashim & Jones, 2007), offering a comprehensive lens through which to understand the dynamic interplay of elements shaping the landscape of pupil wellbeing in Irish primary schools. Peer debriefing was utilised for one anonymised interview, whereby the researcher and

an external party, a recent doctoral graduate familiar with RTA and the CHAT framework, independently coded the transcript and subsequently discussed decisions and discrepancies, ensuring corroboration and alignment with the CHAT framework (Lincoln & Guba, 1985).

To navigate the complexity of the data, Reflexive Thematic Analysis (RTA) was chosen as the analytical framework for both the inductive analysis of open-ended survey responses and the subsequent semi-structured interview data (Braun & Clarke, 2022). RTA's systematic yet flexible structure aligned with the interpretive and reflexive nature of the present research (Braun & Clarke, 2006, 2019). This facilitated a thorough data exploration across iterative phases, as delineated in Table 9, following the 'Good Thematic Analysis Checklist' (Braun & Clarke, 2006) (See Appendix L). An overview of the phases involved in RTA can be found in Appendix M, a sample of code, subtheme, and theme generation can be found in Appendix N, and Thematic Maps corresponding to each research question can be found in Appendix O.

The systematic use of a researcher's reflective journal throughout the research process also provided valuable insights, emerging points of interest, and reflections on the evolving research journey (See Appendix P) (Nowell et al., 2017).

Table 9

Phases of Reflexive Thematic Analysis

Phase	Description
1. Familiarisation	Immersion in the data to gain a holistic understanding of its content. This involves reading and re-reading the data, noting initial thoughts, and identifying potential themes.
2. Generating Initial Codes	Systematically coding the data to capture relevant features, patterns, and meanings. This phase involves breaking down the data into meaningful segments and assigning descriptive codes.

3. Searching for Themes	Identifying overarching patterns and connections between codes to form preliminary themes. This step involves constant comparison and consideration of how codes relate to each other.
4. Reviewing Themes	Refining and defining the themes, ensuring they accurately represent the data. This phase involves revisiting the coded data, reviewing thematic maps, and assessing the coherence of identified themes.
5. Defining and Naming Themes	Articulating clear and meaningful descriptions for each theme and assigning representative names. This step involves a conceptual refinement of themes to capture the essence of the data.
6. Writing the Report	Constructing a coherent narrative that communicates the findings. This final phase involves synthesising themes, integrating illustrative quotes, and providing a nuanced interpretation of the data

3.3 Findings

As indicated above, findings are organised into themes for each research question, derived through the iterative RTA process. These themes are further broken down into subthemes to capture the nuances and complexities within educator experiences. Direct participant quotes, and descriptive statistics depicting quantitative survey findings are provided. Reflective boxes featuring excerpts from the researcher's research diary are placed throughout the findings section to offer insightful perspectives and enhance the depth of understanding of research findings (Wagstaff et al., 2014). The following key describes the meaning of the terminology used throughout the findings section, indicating the breadth of agreement between educators.

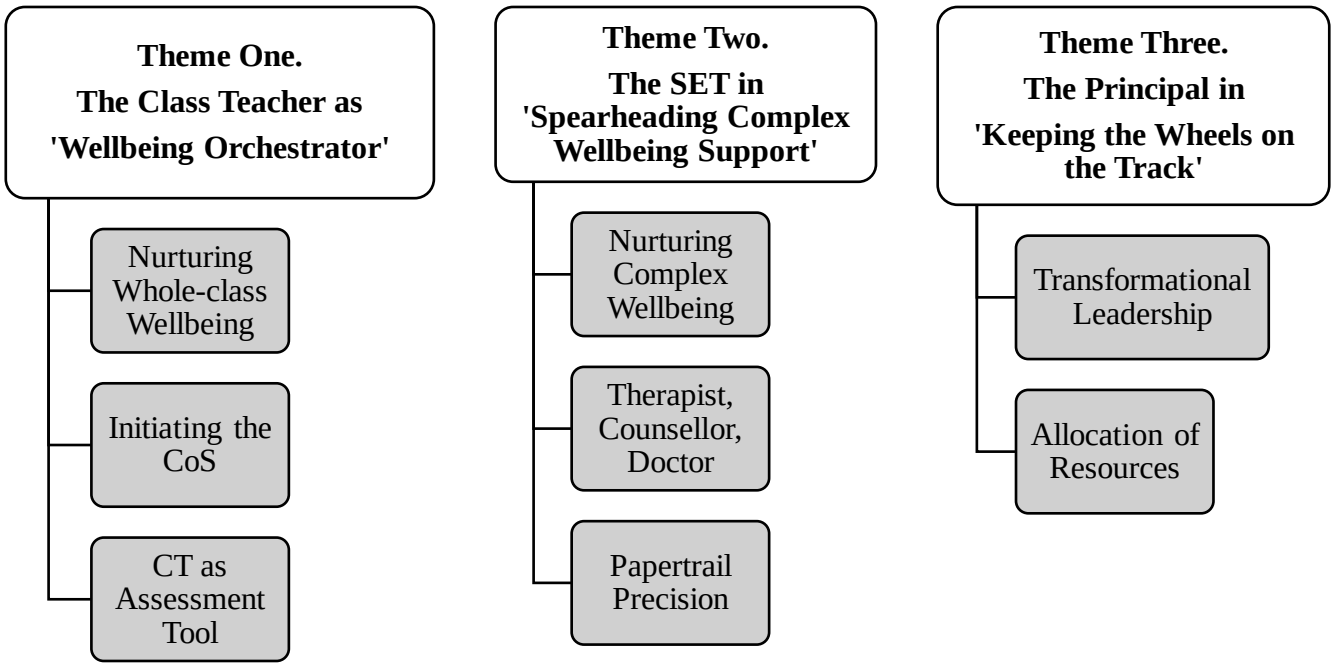
2-3 participants: 'Some educators/ interviewees'	4-6 participants: 'Many educators/ interviewees'	7-8 participants: 'Most educators/ interviewees'
9 participants: 'All educators/ interviewees'	2 CTs/SETs/ Principals: 'Most CTS/ SETs/Principals'	3 CTs/SETs/ Principals: 'All CTS/ SETs/Principals'

3.3.1 Research Question One: What are the Roles and Responsibilities of each Educator using the CoS framework to Support Pupil Wellbeing Needs?

RQ1 delves into the dynamic interplay of roles and responsibilities within CoS to address student wellbeing needs. This exploration aims to understand how each educator contributes to the comprehensive support structure outlined in the CoS framework. Considering recent macrosystemic changes in the Irish education policy landscape, discussed in Section 2.4.1, this was deemed highly relevant. Specifically, RQ1 investigates the pivotal roles played by CTs, SETs, and principals in supporting pupil wellbeing needs, with distinct themes emerging for each respective educator. Overall themes, along with their subthemes, are portrayed in Figure 18.

Figure 18

Visual Depiction of RQ1 Themes and Subthemes



3.3.1.1 Class Teachers as Wellbeing Orchestrators. The first theme describes the role of CTs as wellbeing orchestrators. Subthemes include nurturing whole-class wellbeing, initiating the CoS problem-solving process, and working as assessment tools to identify pupil wellbeing needs.

3.3.1.1.1 Subtheme One: CT in Nurturing Whole Class Wellbeing. Engaging in positive, supportive interactions was seen as crucial to the CT's role, with all interviewees discussing the opportunity within daily routines and interactions with pupils to foster pupil wellbeing. CT1 noted that "opportunities can be endless once you consciously try", while CT2 similarly stated that "it's that little bit that counts and the little practices that you do as a teacher that you hope is working". This was mirrored in SET and principal responses, with CTs

described as “pivotal…in fostering a positive classroom culture that benefits every student” (SET1) and “a major influence in the life of the child” (P2), with their role extending “beyond the academics” (P3) by ensuring strategies that foster pupil wellbeing are in place even during academic subjects. CT3 described how “it's not just what we teach, but how we teach that will make a difference to our children's wellbeing”. Most CTs described their responsibility to establish trustful relationships. CT1 reported wanting her pupils to feel that her classroom is “a place where they can open up and that their feelings and problems can be spoken about”. This extended to a duty of care for the DEIS-1 CT2, who stated:

> I make sure that they know there's a teacher that cares about them. And if they're worried, they know we're here to help them and feel comfortable approaching us. So really, it’s about creating a safe classroom environment for them. (CT2)

SET2 supported this perspective, noting that “CTs can build that sense of belonging and willingness to come to school, laying the groundwork for their engagement with school”. CT1 further described an "environment of inclusion," perceiving the CT’s role as ensuring that all children “feel listened to, valued, and treated fairly”. Survey findings underscore the pivotal role of CTs in nurturing pupil wellbeing, with 82% of respondents emphasising the CTs’ significance as ‘very important’ contributors to pupil wellbeing development, and 71% of CTs reporting that they use the CoS to address wellbeing needs either ‘often’ or ‘very often’.

3.3.1.1.2 Subtheme Two: CT as an Assessment Tool. Most educators interviewed highlighted the time and trusting relationship afforded by the role as a "vital" facilitator for identifying "those subtle signs" (SET3) that indicate pupil wellbeing needs. This is captured by CT2, who stated, "I work with the children every single day, and as a teacher, you spend a lot of time with them. The relationship obviously builds up, and they definitely become more comfortable speaking to their teacher" (CT2). Similarly, P3 noted that "teachers can tell very quickly if someone needs extra support by observing them and chatting with them from one day to the next".

This led to a sense of pressure for most CTs interviewed, who reported:

> Spotting wellbeing needs is crucial—it's not just a job, it's a moral duty. The risk of missing something isn't just about tests and results; it's about a child's happiness and development. Overlooking a wellbeing concern could have serious consequences beyond school. (CT2)

Similarly, CT1 reported that "it's a huge responsibility to identify if there are any concerns," with CT3 remarking that "it's (identifying needs) a constant pressure."

While all interviewed SETs highlighted observation as essential to the CT's role when identifying wellbeing needs, as discussed later in Section 3.3.2.2.2, most SETs stressed the importance of CTs keeping 'records' of such unstructured observation to "provide evidence that the most significant level of support is being granted to the pupil with the most significant level of need" (SET2). This was emphasised by SET1, who noted that "a quick chat at the door just isn't enough'.

3.3.1.1.3 Subtheme Three: CT in Initiating the COS. All interviewed CTs reported taking a leading role in driving the CoS, prompting them to initiate problem-solving processes to

advance pupils to the second tier of support. Responsibilities include using one's professional judgment and collaboration with the SET, with CT2 reporting, "It's like a gut feeling when it comes to wellbeing because you know the child so well. Then you bring your concerns to the SET".

This was mirrored by interviewed SETs and principals, who noted that CTs could "get the ball rolling" (P1) and highlighted that "the CT holds ultimate responsibility for ensuring the child's needs are met" (SET3). The burden of responsibility felt by most CTs to prioritise pupils for support is evident, with CT1 noting that "often it's those who shout the loudest get moved on" and CT2 stating that "wellbeing can be so hidden compared to, say, challenging behaviour, making it hard to prioritise for SET time."

Some SETs noted challenges in this process, with SET1 reporting that more subtle wellbeing needs can be "overlooked" by CTs in the "hustle and bustle of the mainstream class". CT3 reported a need for additional support at the whole class level, saying, "Diagnostic observations from SETs to help to identify some of the more hidden needs would be a huge help". Several unspoken rules emerged that influence the prioritisation of pupils for additional wellbeing support within the CoS and will be discussed with RQ3 in Section 3.3.3.

3.3.1.2 SETs in Spearheading Complex Support. The second theme describes the role of SETs in spearheading complex wellbeing support. Subthemes include the responsibility to nurture complex wellbeing needs, act as 'therapists, counsellors, doctors', and maintain a precise, up-to-date paper trail.

3.3.1.2.1 Subtheme One: SET in Nurturing Complex Wellbeing. All interviewees reported that the SET's role lies in providing "intensive wellbeing support to children with more significant needs" (P2) at the 'Support for Some' and 'Support for a Few' levels of the CoS.

Survey findings underscore the central role of SETs in nurturing pupil wellbeing within the CoS, with 94% of respondents emphasising the SETs' significance as 'very important' contributors to pupil wellbeing development, and 79% of SETs reporting that they use the CoS to address wellbeing needs either 'often' or 'very often'. All interviewed SETs highlighted that "pupils receiving additional support for literacy and numeracy often have underlying wellbeing needs" (SET2), emphasising the interconnectedness of academic and wellbeing support provision. SET1 described her approach to wellbeing support as an "add-on" to academic intervention in the form of a "chat, mindfulness activity, or fun game to end the session" (SET1). Further insights from SETs revealed that explicit support for wellbeing is primarily provided at the Support for Some tier. For example, SET1 explained, "At the 'Support for Some' level, we do daily check-ins to see how everyone feels and create a safe space for students to discuss their day and worries. It's done in small-group settings". However, when addressing the needs of pupils at the 'Support for Few' level, most SETs acknowledged the perceived necessity of external support, with SET3 noting, "For that, I would need the support of a trained professional".

These findings suggest a reliance on external clinicians to support some schools' most complex wellbeing needs. Despite this, most CTs interviewed noted that SETs are "best placed to provide intensive 1:1 intervention" (CT2) due to their "specialised skills" (CT3) and benefit from "the luxury of time" (CT2), suggesting a disconnect between CTs' and SETs' perceptions regarding the role of SETs in tier three intervention. In the DEIS-1 school, additional support was extended to the 1:1 'Support for a Few' level, where SET2 discussed her role in providing personalised interventions, such as teaching individualised emotion-regulation tools and giving relational support to students navigating challenging situations.

3.3.1.2.2 Subtheme 2: SET as "Therapist, Counsellor, Doctor". Most interviewees reported perceiving SETs as crucial figures in addressing the complex needs of students. This is captured by CT3, who "looks to the SETs to guide the support", and P2, who reported that "the SETs are primarily equipped to handle student needs beyond the usual. Their role is invaluable."

However, a dichotomy emerges among SETs. Some feel valued and relied upon by CTs, while many express a burden of responsibility, resulting in a sense of isolation and injustice. SET1 commented, "It's not what they (CTs) think. We (SETs) don't have a silver bullet to magic away these needs." SET1 also observed an "almost 'you figure it out' approach to resource teaching." Additionally, SET2 described the situation, saying, "Sometimes it's like the resource room is a sort of 'catch-all' for the ones they (CTs) can't manage in class."

In their interviews, SETs reported feeling pressured to respond to students with multiple needs without having the expertise or support from external clinicians, indicating a perceived transfer of responsibility from outside agencies to schools. SET3 described her role as encompassing multiple functions, saying, "I see myself as a therapist, a counsellor, and a doctor." Similarly, SET2 noted that "we (SETs) are expected to act as primary responders to mental health needs."

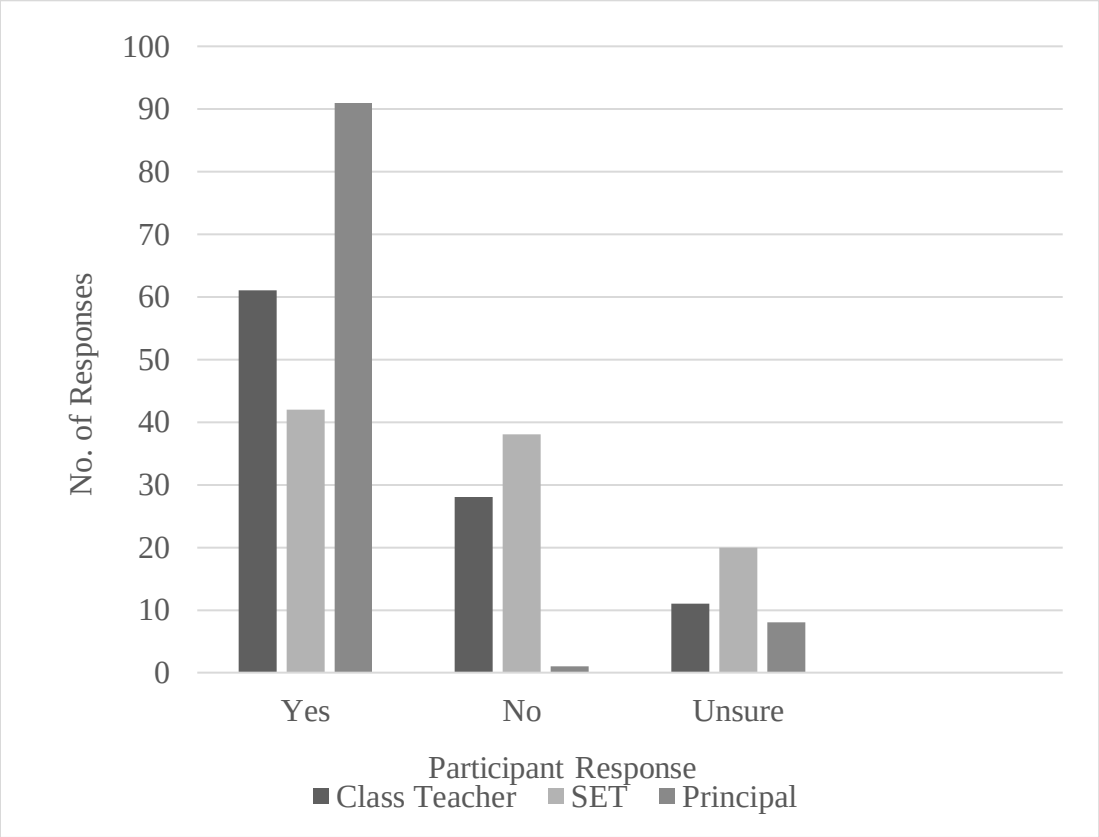
Reflective Box 1: During the interview, SET3's positive tone of voice and the emphatic declaration, indicated a sense of commitment to her role. This positive affect suggests a genuine willingness to support students' wellbeing needs. It is crucial to note this enthusiasm, as it contradicts any assumption of unwillingness on the part of SETs, emphasising their advocacy for additional integrated support within schools and collaboration with external agencies.

Despite the perceived importance of SETs in addressing complex student needs, it is noteworthy that 58% of SET and 39% of CT survey respondents expressed uncertainty and disagreement surrounding the articulation of responsibilities within the CoS, as illustrated in

Figure 19. This indicates a potential lack of clarity and consensus concerning the roles and responsibilities of SETs within the CoS.

Figure 19

Participant Belief that Roles and Responsibilities within the CoS are Clearly Articulated



3.3.1.2.3 Subtheme Three: Paper Trail Precision. Most interviewed SETs viewed themselves as primarily responsible for the formulation of 'Student Support Plans', with 'paperwork' highlighted as a defining role by all SETs. All SETs appeared very mindful of their duty to ensure that pupils have specific learning targets, with progress regularly monitored and reviewed, ensuring a "paper trail" of evidence (SET1). This is corroborated by survey findings, where 74% of SETs reported feeling 'confident', 'very confident', or 'extremely confident' in their understanding of SSPs and their role in their formulation and implementation, in contrast to

58% of CTs. The weight of such documentation for pupils when applying for accommodations and support was discussed in interviews, with SET3 noting that “the more bulk of paper that a child has, the better”. CT1 and P2 reiterated this, emphasising the importance of SETs upholding “detailed and meticulous records showcasing a pupil’s response to intervention. This is key for our ability to secure resources and accommodations” (P2).

While SET 2 reported that SETs can feel obliged to “cover themselves” by keeping a “written record” of all work undertaken within the CoS, challenges arise in the difficulty of assessing and “quantifying” wellbeing, as discussed below in Section 3.3.2.2.2.

3.3.1.3 Principal in Keeping the Wheels on the Track. The third theme describes the role of principals in keeping the wheels on the track in promoting pupil wellbeing needs. Subthemes include working as transformational leaders and the responsibility to allocate resources across the school.

3.3.1.3.1 Subtheme One: Principals as Transformational Leaders. Throughout the interviews, all principals emphasised the importance of exemplifying best practices to promote positive wellbeing among both staff and students at a whole-school level. P2 highlighted his active involvement, stating, “I’m not locked away in the office. I’m hands-on, walking around the school, catching teachers and students being good, and engaging with them in the yard.” Similarly, P3 remarked, “As a principal, you’re leading the change; it’s important that people see it’s coming from a genuine place, and that you’re bringing everyone along with you.”

3.3.1.3.2 Promoting ‘buy-in’ from staff members was seen as a vital role at the whole-school level. CT2 noted that “the approach taken by management has a ripple effect throughout the entire school”, while SET3 reflected on the impact of the current principal’s arrival at the school, stating, “When *P3 started, he really brought energy and knowledge to the school about

the whole wellbeing culture. Thanks to him, we actually ‘get it’ and want to go along with it”. This is captured in P3’s assertion: "If the staff believe in it, it's far easier to implement it within the classroom, whereas if it's a box-ticking exercise, they feel they have no choice in the matter”. The importance of maintaining an “open-door policy” was highlighted by both P2 and P3, who emphasised the role of the principal in promoting not only pupil but also teacher wellbeing. Furthermore, within a DEIS-II school that has faced “a phenomenal amount of tragedy”, P2 stressed the importance of creating a safe, secure school culture, saying:

> I’m responsible for creating a safe, secure environment, especially considering the challenges we've faced. I try to be available and accessible to students and their families because, as they say, school is to the disadvantaged what home is to the advantaged child. (P2)

Reflective Box 2: During interviews with DEIS staff, the emotional impact of working with pupils from disadvantaged backgrounds was very clear. All DEIS educators were highly empathetic when speaking about their pupils’ adverse circumstances and were great advocates for prioritising wellbeing education for these children. At times, I found it difficult to remain in an interviewer role and not adopt a more therapeutic role.

Despite the qualitative emphasis on the pivotal role of principals as transformational leaders in cultivating a positive school culture, 51% of survey respondents rated principals’ contribution to pupil wellbeing development as only ‘slightly’ important. This perception contrasts with principals' own reports, where 79% indicated that they use the CoS to support pupil wellbeing needs either ‘often’ or ‘very often’. Qualitative insights shed light on this discrepancy, with CT1 suggesting it may arise from the difference in principals' direct, day-to-day involvement with students compared to their broader administrative responsibilities.

3.3.1.3.3 Subtheme Two: Principal in Allocating Resources. All interviewed principals reported playing a crucial role in resource allocation across various levels of the CoS, involving tasks such as timetabling SET, allocating SNAs, appointing post-holders, collaborating with external agencies, and investing in programmes and training. However, decision-making and timetabling present significant challenges, especially in ensuring the fair distribution of SET hours in the face of limited resources. P1 highlighted this issue, saying "the needs are increasing, but that is not at all reflected by the allocations we receive". Similarly, P3 noted that "the only way to balance them (pupil needs) all is to absolutely stretch our SET."

This leads to growing complexity in prioritising students for additional support, as captured by P2:

> The 'Support for Some' tier is getting bigger, making it next to impossible to prioritise students for additional support. We're facing challenges in narrowing down and focusing on the most critical needs. It's becoming wider and wider, making the decision-making process under the New Model more complex. (P2)

Principals discussed the implications this has on the support of pupil wellbeing, with P1 noting that "wellbeing needs are more hidden and carry little weight when applying for SNA hours". P3, the principal of the Rural non-DEIS school, discussed the effects of the SETAM, which grants schools the duty of identifying and prioritising students in need, meaning that the school's agency to fulfil this responsibility is intricately tied to the resources available under their educational profile:

> It's a constant battle to ensure our pupils get the support they need. In smaller rural schools, it's like we have to fight to get any support. There's this constant fear lingering being deemed over-resourced could mean losing SET hours or our only SNA. (P3)

This leads to principals feeling burdened by the pressure of prioritising pupils for resources, as captured by P2:

> It's like playing God. The responsibility of deciding who gets prioritised for psychological support is immense. Knowing that these decisions can shape a child's trajectory weighs on me. It's a heavy burden we carry as principals. (P2)

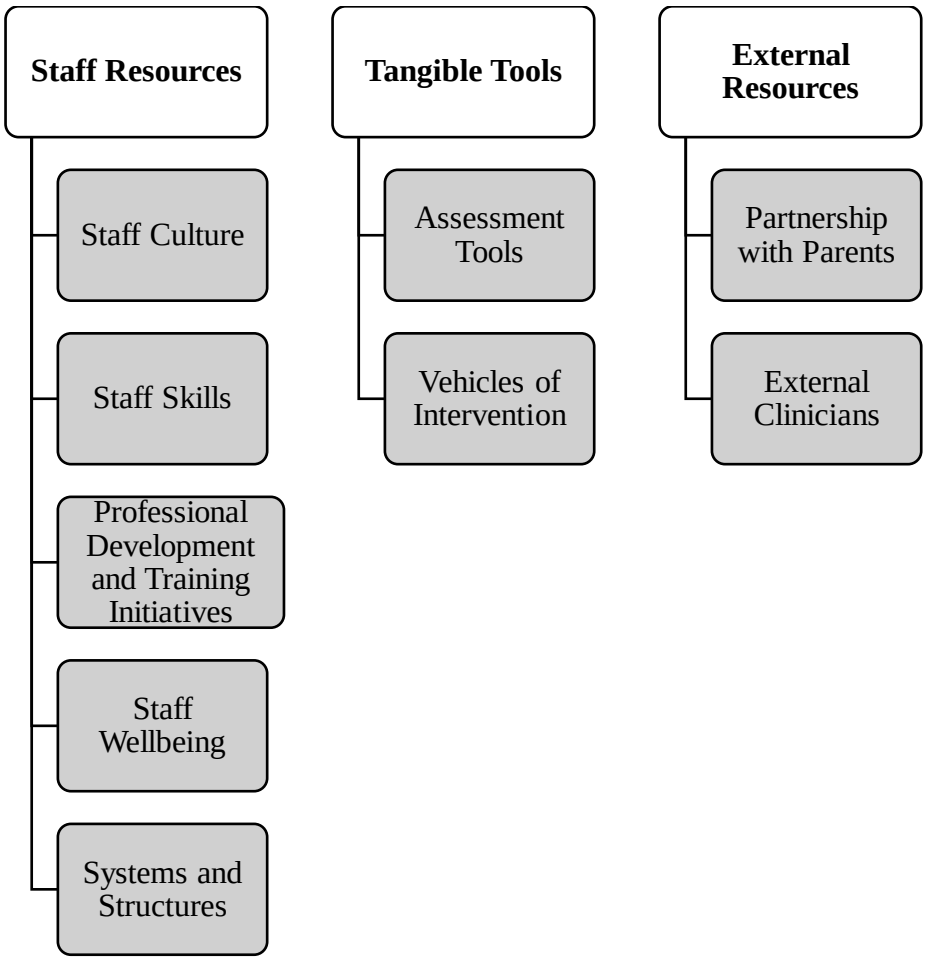
Some CTs and SETs expressed frustration over their perceived lack of involvement in the principal's resource allocation process during their interviews, believing it resulted in neglecting wellbeing needs observed on the ground. CT1 highlighted this by stating, "Our principal most often prioritises the more stand-out things like difficult behaviour", with SET2 noting, "Very often, support is given to either the youngest or oldest classes- leaving the middle classes sort of in limbo". SET1 urged for CTs and SETs to have "a seat at the table" during meetings between principals and school psychologists, saying "our deep, day-to-day understanding of what's going on for the pupils most definitely qualifies us for involvement". Expectations and rules have a clear influence on the role of the principal and the related division of labour. This will be elucidated further in Section 3.3.3.

3.3.2 Research Question Two: How do Educators use Structures, Supports, and Resources to Support Pupil Wellbeing Needs within the CoS framework?

RQ2 investigates how structures, resources, and supports within the CoS interact to facilitate the support of pupil wellbeing needs. Guided by the second generation of the CHAT framework (Engeström, 2001), which suggests that learners interact through mediated artefacts, including material tools and social relationships, the findings from qualitative interviews were organised into three main themes: 'Staff Resources', 'Tangible Tools,' and 'External Resources'. Overall themes, along with their subthemes, are portrayed in Figure 20.

Figure 20

Visual Depiction of RQ2 Themes and Subthemes



3.3.2.1 Staff Resources. The first theme, ‘Staff Resources', explores how staff resources, structures, and supports mediate the creation of an environment conducive to pupil wellbeing support. Five subthemes emerged, including ‘Staff Culture’, ‘Staff Skills’, ‘Professional Development and Training Initiatives’, ‘Staff Wellbeing’, and ‘Systems and Structures’.

3.3.2.1.1 Subtheme One: Staff Culture. Staff played a pivotal role in fostering a culture attuned to wellbeing needs, with a child-centred mentality emerging as a primary catalyst among most participants. This was captured by CT3, who noted that “if your whole attitude revolves

around minding and caring for the child, and you're passionate about their wellbeing and happiness, then that's more than half the battle".

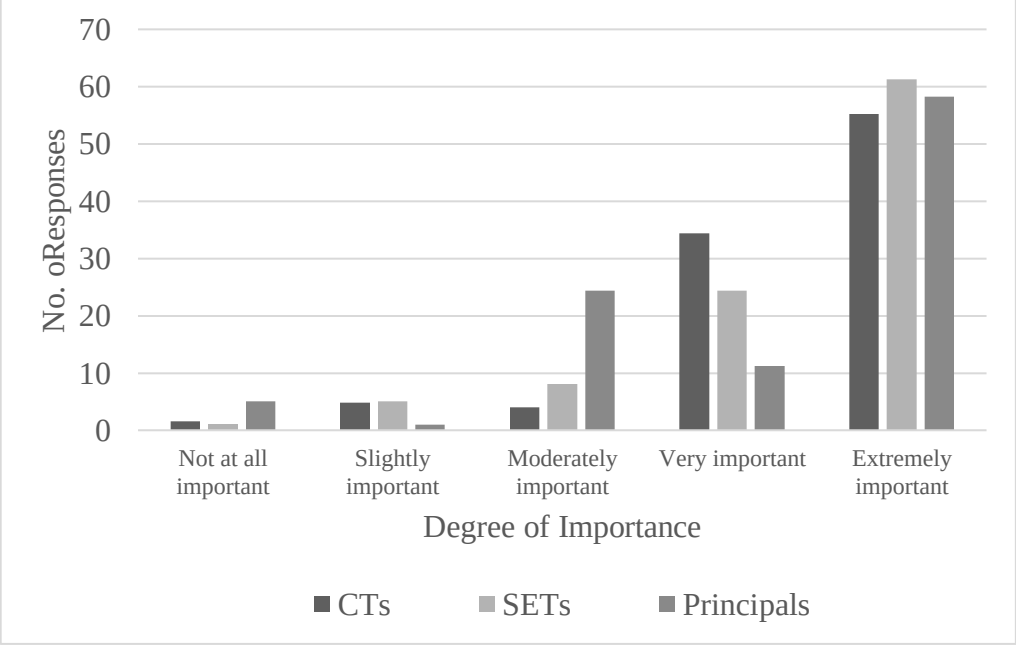
Staff buy-in was underscored as a pivotal resource. SET2 emphasised its impact, saying, "when we're all in, it makes a substantial difference." Similarly, P3 remarked, "the genuine buy-in among our staff is electrifying and makes the whole thing so much more achievable."

The importance ascribed to wellbeing was highlighted by many interviewees as a relative strength of school staff, aligning with survey findings, which demonstrated that 87% of survey respondents think it is 'very important' or 'extremely important' to prioritise the wellbeing needs of pupils (See Figure 21).

The role of the school ethos emerged among some educators as intricately linked to staff culture and buy-in, with P1 stating, "The ethos is more than words on paper; it's a commitment and kind of code of conduct. As a staff, its number one".

Figure 21

Perceived Importance of Prioritising Wellbeing by Educator



3.3.2.1.2 Subtheme Two: Staff Skills. Many interviewees highlighted specific skills within the teaching staff as invaluable resources. P1 noted that "having staff with a master's degree in Psychotherapy and extensive experience in grievance counselling has been very useful". Additionally, P1 reported the utility of "strategically assigning post responsibilities to teachers with skills and expertise in specific areas, such as healthy eating or physical exercise."

Increased appreciation of 'the wellbeing lens" (CT3) emerged as a transformative resource among many educators interviewed, revolutionising staff understanding of pupils. CT2 noted, " It's embarrassing to think about how little we understood challenging behaviour back then". Despite the importance of expertise, most interviewees reported lacking confidence in supporting pupil wellbeing. SET1 reflected on this, saying, "Honestly, I can't say I'm very confident in my actions. Sometimes, I worry that I might be doing more harm than good, say, for example, when giving support in specialised areas like trauma". Similarly, when asked about their confidence in supporting pupil wellbeing needs, SET3 responded, "Not confident at all, but I suppose I have an interest in it. But you always second-guess yourself and wonder if you're actually doing the right thing". The lack of confidence among interviewees is reflected in survey findings, with over half of survey respondents (56.10%) reporting to be only 'slightly confident' when supporting pupil wellbeing needs.

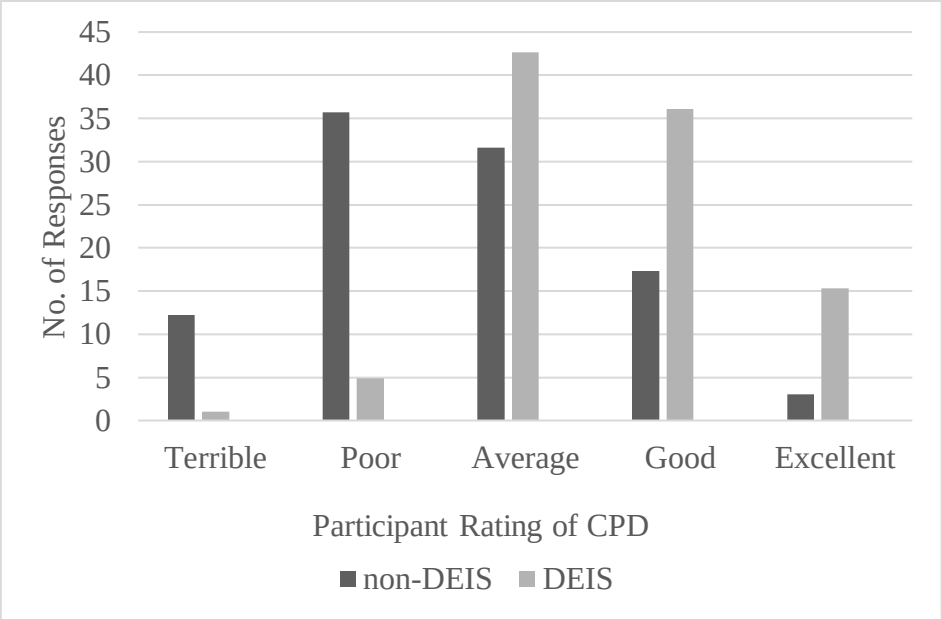
3.3.2.1.3 Subtheme Three: Professional Development and Training Initiatives.

Professional development through training programmes is crucial in developing skills to support pupil needs effectively. All DEIS-I educators interviewed reported the positive effects of Roots of Empathy, Friends for Life, Incredible Years, and Dinah training. P2 noted that, for his staff, "the 'Incredible Years' training was a game-changer". Compared to staff in the DEIS school, most staff interviewed in both non-DEIS schools reported limited exposure to staff training in wellbeing, with some accessing self-sought CPD courses for professional development. These individuals primarily undertook CPD summer courses aimed at supporting pupil wellbeing. Some educators described the value of strategies they learned, not just for supporting students, but for their own personal wellbeing as well. SET3 reflected on this, noting that “these skills are useful even for myself. They’re applicable at any age.” Similarly, CT2 mentioned that “I learned things about myself that are helpful for me. Even though it was targeted at student wellbeing or whatever, it was actually relevant for the grown-ups too.”

The lack of formal training discussed by interviewees is reflected in survey results, with DEIS educators reporting higher satisfaction with wellbeing training than non-DEIS educators (See Figure 22). The significance of limited wellbeing training initiatives at a departmental level was underlined, with CT1 saying that “the lack of emphasis on wellbeing sends a message about priorities to teachers”.

Figure 22

Rating of Wellbeing CPD in DEIS and non-DEIS schools



3.3.2.1.4 Subtheme Four: Staff Wellbeing. All participants interviewed stressed that educators must maintain their own wellbeing to support their students effectively. CT3 captured this, saying, "If your wellbeing isn't being catered for, how are you going to bring happiness into your classroom? If you're miserable, you'll pass that on to the kids". A survey respondent reiterated this sentiment, saying, “You can’t draw water from an empty well”, with 23% of participants identifying ‘burnout’ among the barriers that influence their support of wellbeing needs**.**

Many interviewees shared feelings of “worry” and “guilt” and expressed feeling overwhelmed by pupil needs and burdened by insufficient time, resources, and expertise to address them. This, in turn, had a significant impact on their own wellbeing. P2 reflected on his experience in a DEIS-1 school, saying, “There's a guilt with us all the time. Your hands are tied, and you see kids falling through the cracks without the support they need. It's tough to park it when you go home”.

Most teachers reported strong emotional responses and close relationships with pupils, especially those with adverse backgrounds. CT3 said, “You can’t just leave your emotions at the door after school,” and CT2 noted, “It can be hard to accept that you can’t right every wrong. This can be hard as a human to deal with”.

During their interviews, educators in the DEIS-1 school vividly described the profound impact of working with trauma-exposed pupils. CT2 shared, “I honestly lie awake at night thinking about those kids,” highlighting the emotional toll that lingers beyond school hours. SET2 echoed this sentiment, stating, “When a child opens up about something traumatic like that, you cannot just shake it off or take it off your mind... it’s just not possible.” P2 also reflected on the emotional challenges of the role, recalling, “I’ve had TUSLA take children from their families during school. That stays with you. It’s a very emotional part of our role.”

3.3.2.1.5 Subtheme Five: Systems and Structures. Regular collaboration between SET, CT, and previous teachers was highlighted as a key means of identifying and monitoring pupil wellbeing needs among all participants. This was evident in survey findings, with 94% of participants reporting collaborating with school staff when identifying wellbeing needs and 97% when monitoring them. Collaborative structures emerged as essential resources within the CoS, promoting a unified approach to student wellbeing support. While the value of structured processes, such as regular team meetings, was acknowledged during the interviews, many educators noted that the predominant mode of collaboration unfolded organically through informal discussions throughout the school day. CT3 noted, "Chatting with other team members, such as the SET and SNA, helps me keep an eye on pupil wellbeing”. Similarly, SET1 praised how “Working together as a team allows us to pool our expertise and resources, ensuring a comprehensive approach to wellbeing”.

3.3.2.2 Tangible Tools. The theme 'Tangible Tools' examines specific, concrete resources within the CoS that serve as mediating instruments for educators when identifying, supporting, and monitoring pupil wellbeing. Subthemes include various vehicles of intervention and assessment tools that educators use to support student wellbeing within the CoS framework.

3.3.2.2.1 Subtheme One: Vehicles for Intervention. At the whole-class level, all interviewed CTs reported using universal programmes such as Weaving Wellbeing as proactive and preventative tools for supporting the wellbeing of all pupils during SPHE time. Each school chose to implement their choice of universal programme based on “word of mouth” (P2) and had not considered the programme’s evidence base. Nonetheless, all CTs reported positive feedback. CT1 found it helpful to have “something structured to go along with,” while P1 mentioned that the decision for a more formal programme was influenced by the anticipation of a WSE. CT2 noted, “We mainly stick to programmes like Weaving Wellbeing during SPHE time; it’s easier to follow a set structure,” and appreciated that “using the same programme the whole way up means that the children are all familiar with the language of wellbeing.” CT3 added that the programme ensures they “cover what’s expected of us” and highlighted how “the homework task creates a wellbeing-focused link between the parents, students, and school.”

Some educators discussed the challenge of maintaining uniform implementation across the entire school, with SET2 noting that "An impossible task is just to ensure everyone's on the same page and doing what we’re supposed to be doing”. Similarly, no interviewed educators reported systematically evaluating the effectiveness of the implemented programmes. This aligned with quantitative data, in which 61.5% of participants reported ‘no’ or ‘unsure’ when asked about the systems to assess the effectiveness of interventions.

Meanwhile, at the upper tiers of the CoS, SETs reported relying on “ad-hoc websites and books” (SET1) to source material for children with more complex wellbeing needs. SET3 described this as a challenge, acknowledging the scarcity of resources and the difficulty of adapting materials initially designed for different educational contexts, with SET3 saying, “It just doesn’t resonate”.

3.3.2.2.2 Subtheme Two: Assessment Tools. Observation was emphasised as the primary tool used to assess wellbeing by all participants interviewed. This is reflected in survey findings, with 82% of teachers reporting using ‘teacher observation’ as an assessment method to identify and monitor student progress. CTs reported using conversations with pupils, while both SET1 and SET2 reported using tools such as ‘My Thoughts About School Interview’ and ‘Basic Needs Checklist’, referring to the Behavioural, Emotional and Social Difficulties (BESD)- A Continuum of Support (2007a).

Survey results revealed that 73% of respondents would like to receive CPD on identifying wellbeing needs. Many educators expressed the desire for practical, actionable resources to facilitate the assessment process effectively, with most SETs reporting feeling under pressure to document their assessment procedures. This was captured by SET1, who stated that “A chat at the door doesn’t cut it and creates more work for the SET”.

Given its inherently subjective nature, many educators grappled with the challenge of quantifying an experience that is “so personal” (CT1) and “internal” (SET3). CT2 reflected on this, stating, “It’s like trying to measure the wind; it’s there, you know, you feel it, but putting a number on wellbeing is nearly impossible”.

3.3.2.3 External Resources. The theme ‘External Resources’ encapsulates the subthemes ‘Parental involvement’ and ‘External clinicians’, outlined in Table 12.

3.3.2.3.1 Subtheme One: Partnership with Parents. All interviewees underlined the importance of a cohesive and collaborative approach between school and home to make wellbeing a "shared responsibility" (P2). This posed a strength in supporting pupil wellbeing needs in the rural school and an area for improvement in both the urban non-DEIS and DEIS-1 schools. CT1 stated, "I could promote healthy eating, deep breathing, and exercise every day of the week, but if it's not followed up at home, it's obviously not going to have a proper impact." Similarly, SET2 noted a sense of helplessness, reporting "the level of need in that child's background and its impact on his wellbeing is just beyond our control."

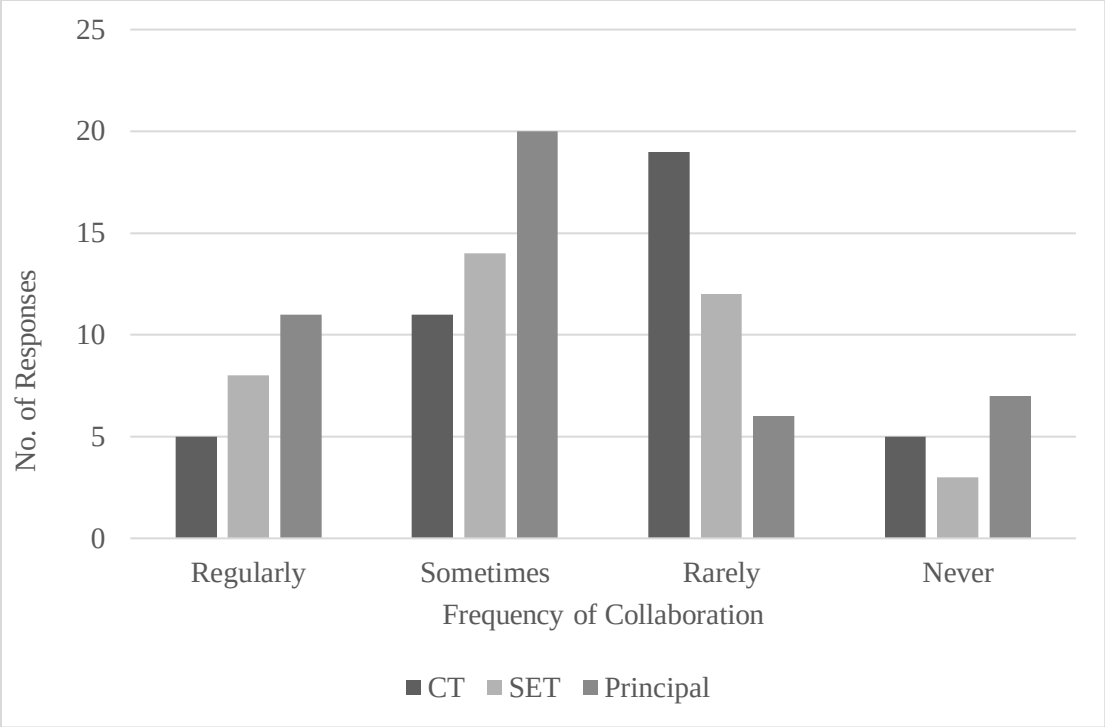
P2 spoke about how parents in disadvantaged communities are often "a bit wary of teachers and schools in general, possibly rooted in "historical bad experiences". Several initiatives are therefore in place to combat this:

> Last year, we started holding regular coffee mornings and initiatives such as parent cooking classes and fitness sessions on the school grounds. That way, parents see us as humans first, partners in their child's development, not just figures of authority. (P2)

3.3.2.3.2 Subtheme Two: External Clinicians. The value of specialised clinicians, particularly in addressing prevalent issues such as anxiety and trauma, was highlighted during participant interviews. Participants primarily referenced the NEPS psychologist when discussing wellbeing support, with principals engaging in the most frequent collaboration, according to survey findings outlined in Figure 23, followed by SETs and CTs.

Figure 23

Perceived Frequency of Collaboration with NEPS Psychologist by Role



The utility of planning meetings was explained by principals:

During planning meetings, we invariably touch on things like anxiety, bullying, you know, those kinds of difficult areas and what to do. Whatever the issue really, be it learning needs or autism, I find that it always is brought back to number one: prioritising the pupils' wellbeing. (P1)

Assessment was noted as the most typical form of pupil wellbeing intervention offered to schools in the survey findings (54.12%), and staff development input was highlighted as the least typical (9.43%). Despite this, P2 recalled the benefit of training and development provided by the school's NEPS psychologist:

> This year, we did the (NEPS) Stress Factor training and had a Croke Park training on positive behaviour support. Without a shadow of a doubt, we got more out of that as a staff than we would have if we went down the assessment route. (P2)

However, despite recognising the potential support external clinicians could offer, challenges such as "the waiting game" (CT2), a tendency to prioritise other special educational needs (CT1, SET1, CT2, CT3, SET3), and frustration in securing timely support (CT1, CT1, SET2, CT3, SET3), led to a perceived lack of support from external clinicians among interviewees. Concerns also arose surrounding educators' unfamiliarity with referral pathways for high-risk wellbeing needs, as reflected in survey responses, with only 17% of respondents reporting being 'very familiar' or 'extremely familiar' with these pathways. Given the increasing mental health needs among primary-aged children internationally, these findings are particularly concerning. The lack of familiarity suggests that children requiring referrals may not be accessing the necessary support due to the knowledge gaps of educators.

The absence of in-school wellbeing support at the 'Support for Few' tier of the CoS was common among most SETs interviewed, who perceived this tier as primarily focused on intensive, individualised support in collaboration with external clinicians. Survey findings reflected this sentiment, with 41% of respondents identifying the lack of external support as a barrier to wellbeing support. Further challenges related to role contradictions of the NEPS psychologist will be elucidated below in Section 3.3.3.2.

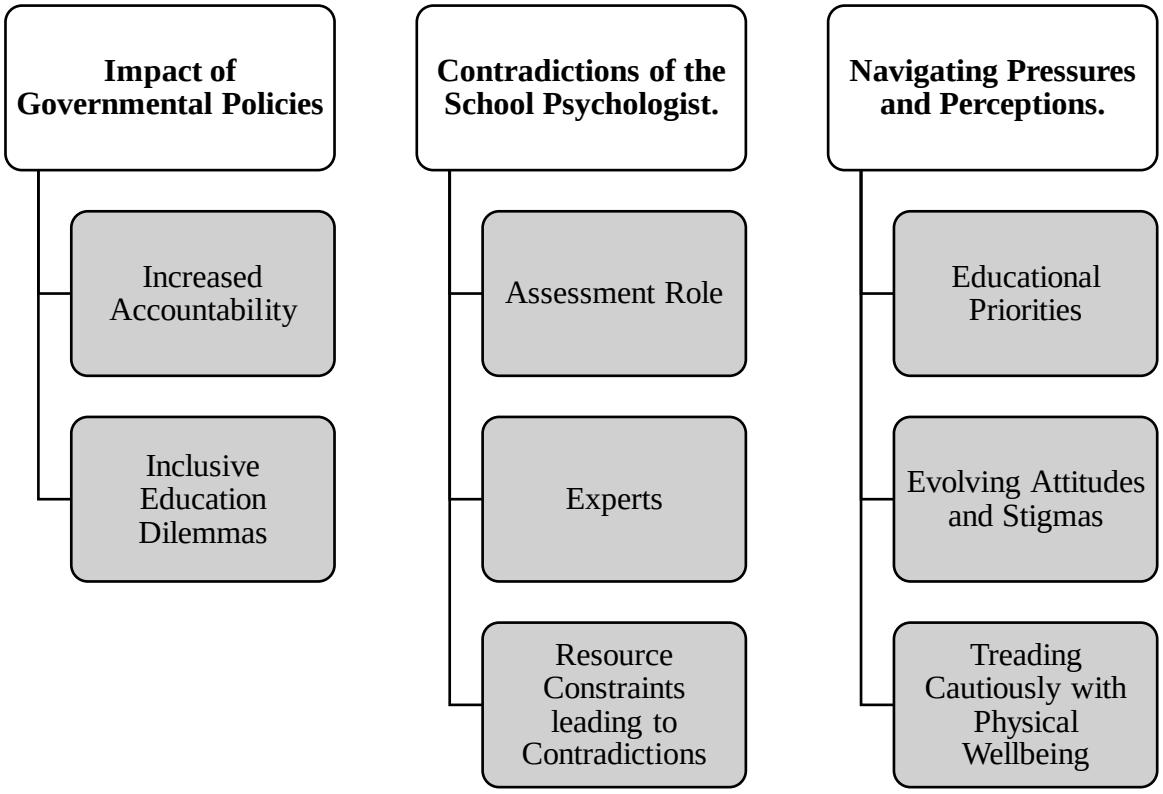
3.3.3 Research Question Three: What Expectations or Rules Influence Educator Support of Wellbeing Needs using the CoS Framework?

RQ3 explores how explicit rules and social norms shape key educators' support of wellbeing needs within the CoS. This investigation aims to uncover the impact of formal regulations and implicit societal expectations on the provision of support for students' wellbeing needs in the educational landscape. Three overarching themes emerged: 'Governmental

Policies', 'Contradictions of the School Psychologists', and 'Navigating Pressures and Perceptions'. Overall themes, along with their subthemes, are depicted in Figure 24.

Figure 24

Visual Depiction of RQ3 Themes and Subthemes



3.3.3.1 **Governmental Policies.** This theme explores how government policies shape educators' experiences supporting pupil wellbeing. Three subthemes emerged, including increased accountability, inclusive education dilemmas and contradictions arising within the role of the school psychologist.

3.3.3.2 Subtheme One: Increased Accountability. Most school stakeholders interviewed saw the SETAM positively. Its role in promoting equity was emphasised, with SET2 praising "not having to get an assessment, diagnoses, or report to give pupils the support they

need" and P1 reflecting that "private assessments are just not financially viable for many families in our DEIS 1 school". However, teachers reported feeling constrained by the resources allocated under the SETAM when identifying and prioritising those in greatest need of SET support. CT1, SET1, CT2, and SET3 asserted that wellbeing needs tend to receive additional support when presented in the context of an existing diagnosis or when such needs impact academic progress. This is captured by SET3's quote; "I honestly can't justify to parents or staff members using part of our 3/5s of a SET allocation on wellbeing needs alone and not on what might be seen as a 'more legitimate focus'".

Quantitative results reiterated this, highlighting that 62% of respondents feel that the pressure to prioritise other special education needs significantly influences their support for student wellbeing needs. There was a notable hesitancy among the Urban non-DEIS interviewees towards fully embracing the SETAM. P1 acknowledged the continued use of the previous allocation model as a scheduling basis for tier three support, partly to ensure comprehensive support for children with diagnoses and as a precaution in case of inspections. This diagnosis-centred approach potentially delays vital interventions for pupils with wellbeing needs, as underscored by SET1's observation that by the time students gain access to tier three, "it may be too late".

Increased responsibility under the SETAM has led to additional paperwork for education staff, as noted by CT1, SET2, and SET3. SET1 reflects that "(We) need to make note of every action made during SET time. This limits face time with the pupils".

3.3.3.2.1 Subtheme Two: Inclusive Education Dilemmas. The implementation of the CoS framework for student wellbeing needs was influenced by the Education for Persons with

Special Educational Needs (EPSEN) Act 2004. CT2 reflected that it is "part of (our) fundamental duty as teachers to ensure that everyone is participating to their full potential".

However, challenges arise due to resource constraints, leading to contradictions in implementing the EPSEN Act. The rural school principal, P3, captured this, reporting, "Students lose out on essential support services due to resource shortages, such as speech and language therapy, despite intensive and consistent interventions in their previous special school setting".

Reflective Box 3: It was clear from participant responses and reactions that they do not seem to have intimate knowledge of relevant wellbeing policy or instructional documents, despite introduction of the WPSFP over 3 years ago.

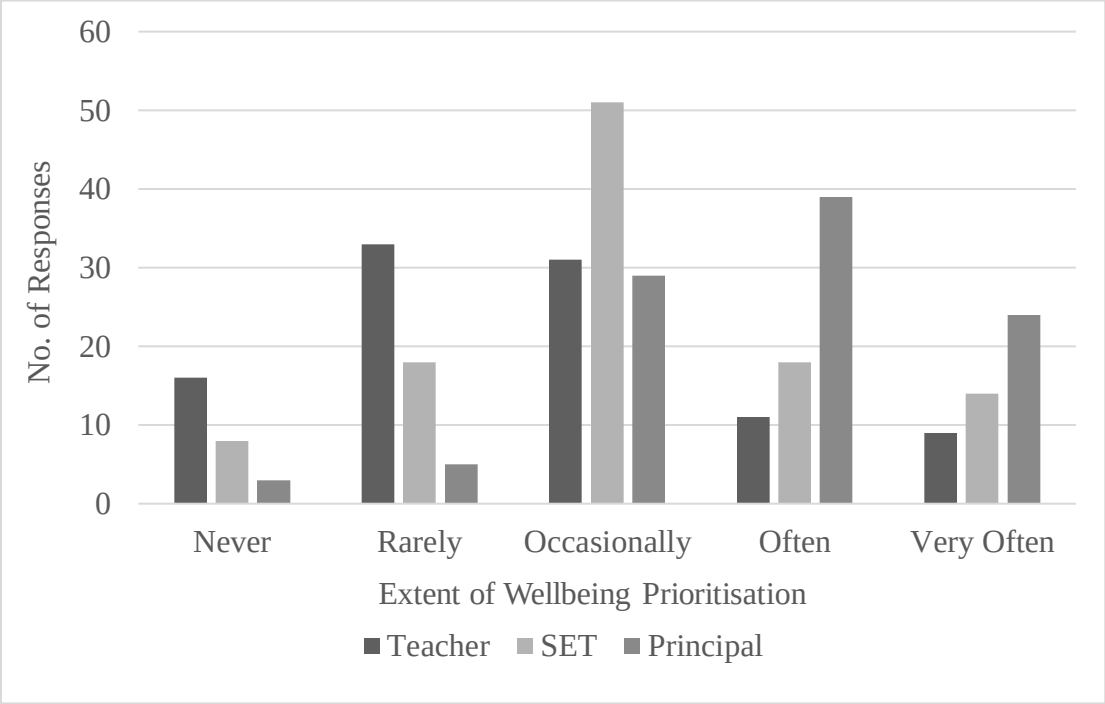
3.3.3.3 Contradictions of the School Psychologist. This theme explores how rules and expectations influence the school psychologist's role when supporting pupil wellbeing. Three subthemes emerge: ‘Assessment Role’, ‘the Experts’, and ‘Resource Constraints leading to Contradictions’.

3.3.3.3.1 Subtheme One: Assessment Role. One prominent expectation shared by many interviewees was that NEPS primarily functions as an assessment entity, focusing on academic needs rather than pupil wellbeing needs, with SET2 stating, “For me, NEPS is more from the point of view of diagnosing and testing than wellbeing”. This point was illustrated by SET1, recalling an incident where a child underwent cognitive and attainment assessments and received literacy intervention despite the teacher’s emphasis on wellbeing as a central area of need. SET1 reflected, “Unfortunately, it's going to take another few years to get to the point where wellbeing will be prioritised”. This is further captured in survey results (Figure 25), which indicate that one third of CTs perceive that the NEPS psychologist ‘rarely’ prioritises wellbeing needs (33%). Many SETs (51%) believe that wellbeing needs are occasionally prioritised. Notably, 39% of

principal respondents believe that wellbeing needs are often prioritised for psychological support in their schools. P3 discussed how their modest allocation from NEPS means staff consultation is used as a service delivery model. This avoids the prioritisation dilemma and has led to collaborative problem-solving to address various wellbeing needs.

Figure 25

Perceptions of NEPS Psychologist Prioritisation of Wellbeing Needs by Educator



3.3.3.3.2 Subtheme Two: Experts. All interviewed SETs perceived that NEPS and other external clinicians are the primary authority in addressing tier three student wellbeing support, positioning educators as reliant on this external expertise. This dependency on NEPS professionals for tier three support leaves many participants feeling inadequately equipped, with SET2 commenting, “I wouldn't be an expert in this area; that’s more related to NEPS”, and CT2 stating, “We weren't trained in this complex area like mental health like educational psychologists. Our expertise lies elsewhere.” –*CT2*.

3.3.3.3.3 Subtheme Three: Resource Constraints Leading to Contradictions. While early intervention is cited as a core component of the support and development work carried out by NEPS, unspoken rules influence this reality. Many intreviewees reported that children transitioning to secondary school are prioritised for support due to the perceived advantages of a psychological report for state examinations, with P3 asserting, “A report can open doors in secondary school”.

Moreover, resource allocation decisions are not solely needs-based but influenced by various contextual factors, creating ethical and practical challenges. P1 noted that “families who genuinely need support are prioritised to level the playing field for those from less comfortable backgrounds". This contextual decision-making introduces complexities, particularly in prioritising wellbeing when resources are limited. Ethical dilemmas emerge when critical situations prompt action instead of abiding by the principles of early intervention.

SET1 reflected on her experience teaching a pupil who exhibited significant levels of anxiety, saying, "It’s sad to think that timely support might have avoided such critical situations". In smaller schools, such as School 3, resource limitations and perceived marginalisation further compound the difficulties of comprehensively supporting more complex student wellbeing.

Reflective Box 4: The affective dispositions communicated by participants seem to be frustration at the perceived lack of direct support from NEPS and limited involvement in the process, resentment at the perceived prioritisation of assessment despite CT and SETs’ advocacy for wellbeing focus, gratitude for previous experiences of quality support and intervention, and empathy for NEPS.

3.3.3.4 Navigating Pressures and Perceptions. This theme explores the various rules and societal expectations that were reported to influence educators’ experience supporting pupil

wellbeing. Three subthemes emerged: ‘Educational Priorities’, ‘Evolving Attitudes and Stigmas’ and ‘Treading Cautiously with Physical Wellbeing’.

3.3.3.4.1 Subtheme One: Educational Priorities. Bias against prioritising wellbeing support was reported by all educators during the semi-structured interviews and was influenced by a systemic emphasis on academic achievement. This is reflected in survey results, with 'time' and 'curricular demands' highlighted as the primary barriers impacting educators' support for pupil wellbeing needs. As CT1 pointed out, "Some people think good Maths and English STEN scores make a good teacher.” Similarly, CT3 noted, "there's pressure from all angles to get through the literacy and numeracy programmes."

Conflicts arise during CoS implementation, especially when academic targets are prioritised over wellbeing priorities. Scepticism towards wellbeing as a passing trend undermines its seriousness among some interviewees, minimising the importance of expertise in promoting wellbeing and providing necessary support for students. SET2 asserts, “There’s almost a belief that anyone can do it”. For many interviewees, the tension between measurable academic outcomes and less quantifiable wellbeing outcomes hinders students' holistic development. SET2 captured this, saying, "it is difficult to establish clear, measurable criteria for wellbeing compared to subjects like literacy and numeracy”.

Parental expectations and competing educational priorities from the Department of Education perpetuate this challenge.

3.3.3.4.2 Subtheme Two: Evolving Attitudes and Stigmas. Most interviewed educators noted evolving attitudes towards discussing feelings and mental health, with P3 reflecting, "I don't ever remember sitting down talking about my feelings. It just wasn't a thing". CT1 and SET2 further contribute to this narrative, noting a growing societal awareness of the "importance

of happiness" (CT1) and an observation that "Mental health (is) no longer a taboo subject" (SET2). However, P2 and C2 reported a lingering belief in the stigma, as parents may lack transparency regarding wellbeing needs, affecting the school's ability to cater to pupils. When discussing parents of pupils in the DEIS-1 school, C2 reflected, "I wonder if they feel a sense of failure, like Oh, my God, my child must go to a therapist, but really, it's not a failure".

3.3.3.4.3 Subtheme Three: Treading Cautiously with Physical Wellbeing. It is noteworthy that physical wellbeing emerged as a relatively minor theme throughout the interview process, with only three participants addressing it directly. Both CT1 and CT3 admitted to never having identified a pupil with 'physical wellbeing needs,' except in cases where a diagnosis like dyspraxia necessitated support for gross or fine motor skills. The delicacy surrounding areas, such as healthy eating and physical education, was evident. SET3 captured this: "Calling a parent and saying, 'Your child needs extra support with healthy eating' is almost unthinkable". In the context of the DEIS-1 school, concerns about fairness and sensitivity when addressing physical wellbeing with parents were evident. CT2 highlighted this dilemma, saying "Many of our parents already have enough on their plates without us ringing them with concerns about their child's exercise or diet or whatever. Honestly, it would be opening up a can of worms".

Reflective Box 5: It was clear from interviews that the conceptualisation of wellbeing on the ground leans heavily towards social, emotional, and mental health aspects of wellbeing, with less attention granted to the physical health component of the DE's overall wellbeing definition.

3.4 Summary of Findings

The primary aim of this research was to elucidate the experiences of CTs, SETs, and school principals in implementing the CoS framework to address pupil wellbeing needs. Educators' roles within the three CoS tiers were explored in response to the first research

question. CTs emerged as crucial 'Wellbeing Orchestrators' in the 'Support for All' tier, tasked with creating positive environments but facing challenges related to emotional investment and feelings of heightened responsibility. SETs were central in 'spearheading complex support,' navigating challenges related to perceived expertise, sharing responsibilities, and resource constraints. Principals, as leaders, were integral to 'keeping the wheels on the track' within the whole school, dealing with challenges in transformative change, resource allocation, and decision-making, likened to "playing God". This enquiry revealed the nuanced interplay of roles and both emotional and resource-related challenges among stakeholders within the CoS.

Moving to the second research question, an exploration of the resources, tools, and supports used within the CoS to support pupil wellbeing needs was conducted. ‘Staff Resources’ highlighted the role of teacher attitudes and teacher wellbeing in shaping a compassionate staff culture. This theme also exposed the transformative power of specialised knowledge and skills within the teaching staff, recognising expertise as paramount but also unveiling a distinct lack of confidence in supporting pupil wellbeing and a clear need for additional training. 'Tangible Tools' uncovered a reliance on curricular programmes in building pupil wellbeing, with challenges demonstrated in maintaining the uniform implementation of universal programmes and locating suitable resources and assessment tools for more complex wellbeing needs. ‘Student Support Plans’ were underscored as crucial for creating wellbeing targets and monitoring student wellbeing outcomes, emphasising the need for streamlined information flow between tiers. 'External Resources' shed light on the influence of parental involvement and external clinicians, revealing challenges in achieving cohesive home-school collaboration and reliance on clinicians to implement the ‘Support for Few’ tier of the CoS. This exploration highlighted successes

within the CoS and unravelled tensions and challenges inherent in pupil wellbeing support, providing an insight into the complex interplay of tools and resources in the microsystem.

The final research question explored the explicit rules and societal expectations influencing the support of wellbeing needs using the CoS by educators. The ‘Impact of Governmental Policies’ such as the ‘Special Education Teacher Allocation Model’ and the EPSEN Act led to feelings of increased accountability, with resource constraints not only causing contradictions in inclusive education on the ground in mainstream settings but also hindering opportunities for standalone wellbeing support. Contradictions within the role of the school psychologist were also exposed, with resource constraints and stakeholders' perception of NEPS as assessment-focused hindering wellbeing prioritisation and leading to ethical dilemmas. Furthermore, various 'Pressures and Perceptions' discussed also shed light on the influence of systemic biases against wellbeing support despite evolving attitudes. This enquiry uncovered the intricate challenges and tensions in supporting student wellbeing within the CoS. The current findings were mapped onto the CHAT framework, illustrated in Figure 26.

Figure 26

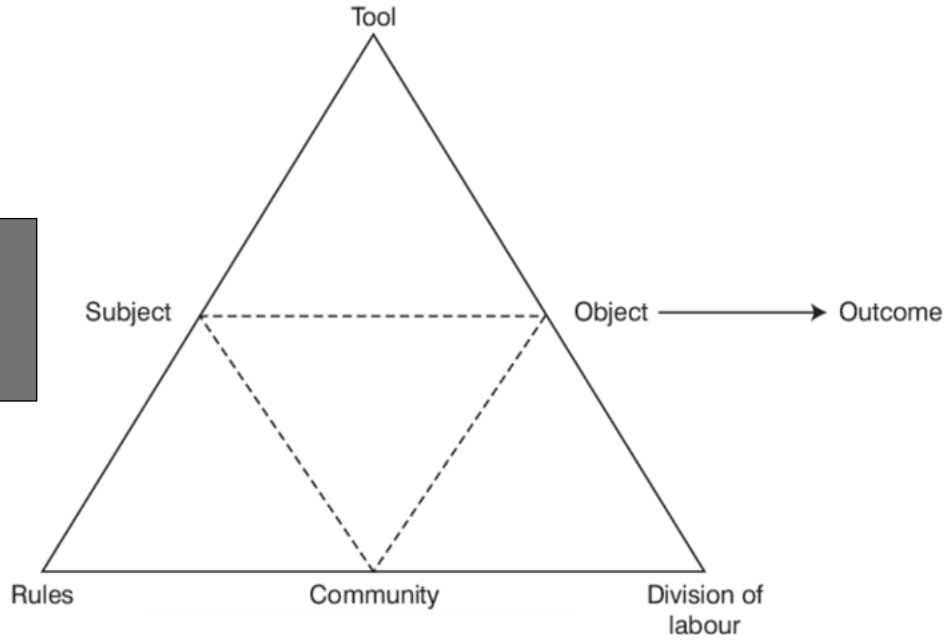
Study Findings

Staff Resources
- Staff Culture and Buy-In
- Staff Skills and Training
- Systems and Structures
- Staff Wellbeing

Tangible Tools
- Assessment Tools
- Vehicles of Intervention

External Resources
- Parents
- External Clinicians

- **Class Teachers**
- **Special Education Teachers**
- **School Principals**



<u>Supporting Pupil Wellbeing Needs</u>

Impact of Governmental Policies
- SETAM: Increased Accountability
- EPSEN Act: Inclusive Education Dilemmas

Contradictions of the School Psychologist
- Assessment Role
- Experts
- Resource Constraints leading to Contradictions.

Pressures and Perceptions
- Conflicting Educational Priorities
- Stigma towards Wellbeing Needs
- Hesitancy towards Physical Wellbeing

CTs: Wellbeing Orchestrators at Tier 1:
- Nurturing Whole Class Wellbeing
- Initiating the CoS
- Wellbeing Assessors

SETs: Spearheading Complex Support at Tier 2 & 3
- Therapists, Counsellors, Doctors
- Paperwork

School Principals: Keeping the Wheels on the Track
- Transformational Leaders
- Allocating Resources

3.5 Discussion

The present research aimed to elucidate educators' experiences of the CoS in supporting pupil wellbeing needs. Underpinned by the second generation of the CHAT theoretical framework, five fundamental principles for investigating activity systems were embraced, as elucidated in Table 6 in Section 3.2.1 (Engeström, 1999). These principles emphasise the role of contradictions within systems as catalysts for transformative change in collective action. Engeström (2001) states that contradictions can inspire expansive learning and incite change and action within activity systems. Contradictions can emerge within any of the nodes of the activity system or between two or more nodes (e.g., between the tools and the rules nodes) (Engeström & Sannino, 2017). Consequently, the present research findings will be considered with a focus on inconsistencies and challenges within and between the nodes of the activity stem. These inconsistencies will elucidate how EPs can assist educators in supporting pupil wellbeing needs using the CoS. Contradictions arising within each research question are detailed in subsequent sections and summarised in Table 10. Researcher recommendations for potential positive changes are also provided, which aligns with the pragmatic paradigm. Aligned with CHAT principles, this approach seeks to bring the activity system closer to achieving its collective goal-specifically, the effective support of pupils with diverse wellbeing needs.

Table 10

Contradictions and Recommendations for the Present Study

	Research Question	Contradiction	Recommendation
1.	RQ 1 Roles and Responsibilities	Ambiguous delineation of roles and responsibilities within the CoS has fostered a siloed approach, impeding effective implementation by SETs and CTs.	• Policy Implication: Clarify and formalise roles and responsibilities within the CoS framework through policy amendments, ensuring a collaborative and integrated approach by SETs and CTs, with time allocated for strategic planning and collaboration. • Practice Implication: Promote collaborative teaching practices and enhance communication channels between SETs and CTs, emphasising shared responsibility for pupil wellbeing within the school environment.
2.	RQ 1 Roles and Responsibilities	Educators' wishes to prioritise wellbeing needs are compromised by resource constraints.	• Policy Implication: Propose regular reviews and updates of the SETAM needs-based profiling components, considering recent realignments (DE, 2024), and emphasise the inclusion of risk factors for wellbeing difficulties increasingly present within the population. • Practice Implication: -Promote collaborative teaching practices, e.g., co-teaching, and enhance communication channels between SETs and CTs, emphasising shared responsibility for pupil wellbeing within the school environment. -Teacher training on effective classroom practices for promoting wellbeing and the discrete teaching of wellbeing in tier one

			through all subject areas as a means of combatting curriculum overload (NCCA, 2023).
3.	RQ2 Tools and Resources	Educators' positive attitudes and commitment to prioritising wellbeing are constrained by compassion fatigue and a perceived lack of competence and specialist training.	• Policy Implications -Expand the CoS to include a 'Support for 'Staff' tier. Incorporate ongoing, evidence-based, specialised training into DE policies, in line with the Professional Learning Framework approach, addressing the need for CPD and skill refinement for educators. -Recognise supervision as a normative and accessible support system for all educators in DE policy, acknowledging its efficacy in enhancing wellbeing, preventing burnout, and providing a dedicated space for processing complexities inherent in supporting vulnerable pupils. -Development of policy explicitly focused on teacher wellbeing (Nohilly et al., 2023). • Practice Implication: Extend the model of Student Support Teams (SSTs) to primary schools, providing a co-ordinated mechanism for collaborative problem-solving, resource-sharing, and double-loop learning for pupil welfare and wellbeing.
4.	RQ2 Tools and Resources	Limited support from external professions has led to a gap in the provision of tier	• Practice Implication: Implement consultation with principals, CTs, and SETs to further develop staff self-efficacy in addressing complex wellbeing needs, identifying emerging

		three support for pupil wellbeing needs.	wellbeing needs, and selecting evidence-based programmes.
5.	RQ3 Rules and Expectations	A tension exists between the support of wellbeing and pressure to prioritise academic subjects.	• Policy Implication: Accompany wellbeing policies such as the WPFSP and the new Primary Curriculum Framework with ongoing staff training and opportunities for mentorship. • Practice Implication: Provide professional development to educators, ensuring ongoing, evidence-based, specialised training in line with the Professional Learning Framework that underscores the importance of wellbeing support.
6.	RQ3 Rules and Expectations	Resource constraints and traditional assessment-focused perception of the EP hinder wellbeing support in schools.	• Policy Implication: -Increase recruitment of psychologists by NEPS to enhance their capacity for preventative and organisational wellbeing support, aligning with the growing demand for mental health services in schools. • Practice Implication: -Conduct future research to explore the experiences and perspectives of NEPS psychologists in supporting wellbeing needs within the CoS, ensuring their insights contribute to more effective policies and practices. - Ensuring the inclusion of a variety of educators, including CTs and SETs, in relevant meetings with the EP. Explain the purpose, benefits, and roles involved in consultation.

3.5.1 Research Question One: What are the Roles and Responsibilities of each Educator using the CoS Framework to Support Wellbeing Needs?

Investigating educators' roles within the CoS reveals a contradiction in the division of labour between SETs and CTs. The disparity between SETs, perceived as responsible for 'spearheading complex support' at tiers 2 and 3, and CTs, viewed as 'wellbeing orchestrators' at tier one, reveals a gap in the collaborative nature of the CoS. This contradicts shared responsibilities advocated by education policies (CoS, 2006; DES, 2017; UNESCO, 2005), emphasising the pivotal importance of clear role delineation and training to accompany policy implementation (Biesta et al., 2015). A further contradiction emerges between educator agency and the rules imposed by their newfound autonomy under the SETAM, exacerbating this tension (Curtin & Egan, 2021; Kenny et al., 2020). CTs face heightened accountability for "spotting wellbeing needs" (CT2). Meanwhile, SETs grapple with supporting diverse and complex needs, with SET2 describing the resource room as a "catch-all" amidst significant resource allocation constraints. Principals also encounter limitations on their transformative potential due to resource constraints, where their aspiration to "lead change" (P3) and promote wellbeing is intricately tied to the resources allocated within their educational profile, leading to feelings of constraint, as expressed by P2 feeling like his "hands are tied". This points to another contradiction between the value of educator wellbeing, echoed by a survey respondent who stated, "You can't draw water from an empty well", and the emotional toll educators face while navigating their multifaceted roles. This is evidenced by CT3's challenge of "leaving emotions at the door", CT2's "lying awake at night", worrying about her pupils, and P2's feeling of "guilt all the time".

Literature underscores the multifaceted nature of the role of the SET, characterised by "intensity, self-sacrifice, vulnerability, and commitment" (Lavian, 2015, p. 109) with a range of

specialist responsibilities, including "collaborator, interventionist, diagnostician, and manager" (Braun et al., 2020, p. 12). This, compounded by the reported expectation to be “a primary responder to mental health needs” (SET2), results in role complexity, making it challenging to fulfil various responsibilities simultaneously (Lavian, 2015). Findings from the present study underscore CTs as “a major influence in the life of the child” (P2), aligning with the role of 'One Good Adult' described within the literature (Dooley & Fitzgerald, 2019). However, CTs report “constant pressure” (CT3) to identify emerging wellbeing needs while grappling with the emotional labour of the 'cost of caring' (Hargreaves, 1998; Yu et al., 2023). Despite literature highlighting the role of principals in promoting teacher satisfaction and a positive organisational culture (Morris et al., 2020), findings from the present study reveal that resource constraints impede the transformative potential of leadership in Ireland. P3 described this challenge as “a constant battle”, illustrating the ongoing tension between principals’ envisioned positive change and the practical nuances of resource allocation on the ground. This is exasperated by the emotional implications of their decisions, described as a “heavy burden” that “weighs” on principals (P2), supporting literature on compassion fatigue among educators (Figley, 1995; Ormiston et al., 2022).

These contradictions align with the Jobs-Demands-Resources Model (Bakker et al., 2007), emphasising that resources play a pivotal role in mediating the impact of job demands on a professional's wellbeing and self-efficacy. Educator working environment fit, characterised by high demands and low resources, is a determinant of educator burnout (Demerouti et al., 2001). Without the necessary resources, educators may experience strain, potentially compromising their support's effectiveness. Findings from the present study suggest that educators are at risk of professional burnout and require additional organisational and social resources to better support

pupil wellbeing under the CoS division of labour (Stoeber & Rennert, 2008). This is supported by survey results, with almost a quarter (23%) of respondents identifying ‘burnout’ as a barrier that influences their capacity to support wellbeing needs.

The synthesis of findings from the systematic literature review and the current study underscores the pivotal role of investing in educators to effectively integrate MTSS into school practice. The existing CoS framework is proposed to pay little attention to the specific needs of the educators tasked with its implementation. To bridge this gap, the researcher advocates for the incorporation of an additional tier within the CoS—the 'Support for Staff' tier (See Figure 27). This dedicated tier aims to address the multifaceted needs of educators, fostering role clarity, skill enhancement, confidence building, mitigating burnout, and providing targeted guidance for managing resource limitations. A ‘Support for Staff’ tier recognises the centrality of educators in implementing the CoS, the importance of training in times of organisational change (Mosadeghrad & Ansarian, 2014), and the benefit of ongoing coaching for skill refinement and confidence development. This aligns with Sandilos et al.’s (2020) findings, which demonstrate that SEL training can mitigate training teacher burnout, as well as the literature on implementation science, wherein ‘competency drivers’ enhance organisational readiness to implement evidence-based interventions with fidelity and sustainability (Fixsen et al., 2005).

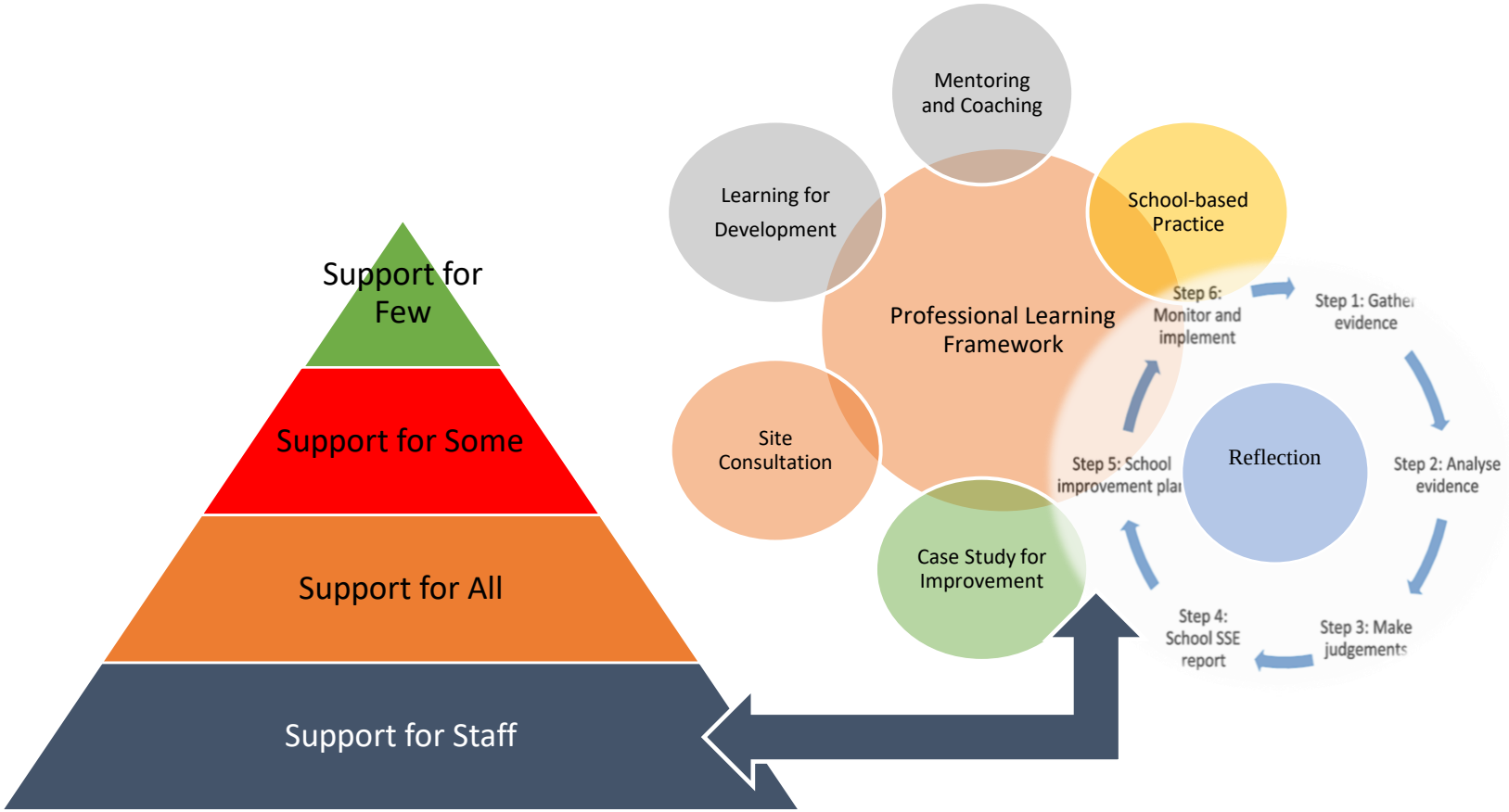
Figure 27

Proposed Continuum of Support Framework

Grounded in insights from the Professional Learning Framework (PLF) literature, the proposed framework promotes a collaborative and well-supported environment, aligning with the impetus for a whole-school approach to wellbeing support (DES, 2018; Easton, 2011). This aligns with the literature, which asserts that "PLF and MTSS are complementary processes, built upon a proven research base of best practices and designed to produce the same outcome—high levels of student success" (Buffum et al., 2009, p. 49). Embodying a dynamic and adaptable learning process, PLF involves educators engaging in mentoring sessions, coaching discussions, site consultations, and reflective exercises based on evolving needs and priorities. This comprehensive approach aims to reduce educator burnout and enhance educators' professional skills, ultimately benefiting pupil outcomes (Admiraal et al., 2021). The reflection component of the PLF aligns with the School Self-Evaluation (SSE), as outlined in Section 2.4.1, supporting the broader goals of the Wellbeing Policy Statement and Framework for Practice (WPSFP) (See Figure 28).

Figure 28

Integration of PLF and SSE within the Proposed CoS Framework



Following the NEPS consultative model, in-school support from specialist services is identified as a vital component within the proposed tier, significantly enhancing Continuous Professional Development (CPD) for teachers working with pupils with wellbeing needs. This training model can seamlessly integrate into the proposed 'Support for Staff' tier, providing educators with comprehensive professional development opportunities. By combining the strengths of the PLC model with implementation science insights, the proposed ‘Support for Staff’ tier becomes a dynamic and responsive component within the CoS. It addresses educators' immediate needs and contributes to a sustained culture of professional growth and collaboration, ultimately enhancing pupil wellbeing outcomes.

Furthermore, the present study underscores a critical issue—the wellbeing of educators, particularly those working in DEIS schools, and the potential for Secondary Traumatic Stress (STS). While STS has long been acknowledged in mental health professions, its recognition in school settings is relatively recent (Borntrager et al., 2012; Hydon et al., 2015). Unlike mental health professionals, who benefit from structured supervision to address these challenges, teachers are left without such formal support structures. The need for accessible support for teachers is therefore paramount, especially for those working with students from adverse backgrounds, as consistently demonstrated in interviews with DEIS staff within the present study. Recent discourse within the Irish literature has centred on supporting teachers working in challenging environments, such as those outlined in the DEIS plan (Delaney, 2020). Proposals for teacher sabbaticals within DEIS schools have been advocated, highlighting the importance of providing teachers with resources like supervision to mitigate burnout (INTO, 2015; Boccellari & Wiggall, 2017; Hydon et al., 2015). In addressing these challenges, it is crucial to consider the broader implications for educators' wellbeing and the effective support needed to navigate the

complexities of their roles. This is reflected in Nohilly and colleagues' (2023) study of burnout among Irish primary school educators, which advocated for the explicit development of policy focusing on teacher wellbeing. Such macrosystemic initiatives would showcase the DE's commitment to prioritising teacher wellbeing, reinforcing the importance of comprehensive support structures in schools.

3.5.2 Research Question Two: How do Educators use Structures, Supports, and Resources to Support Pupil Wellbeing Needs within the CoS Framework?

Investigating staff resources within the CoS revealed a contradiction between educators' commitment to prioritising wellbeing and their confidence in identifying and supporting more complex wellbeing needs. This is captured in survey findings; while 87% of respondents emphasised the importance of prioritising the wellbeing needs of pupils as 'very important' or 'extremely important', over a half of participants (56.10%) admitted to feeling only 'slightly confident' in their ability to support wellbeing needs. This discrepancy has led to notable shortcomings in CoS implementation on the ground, with two of the three school settings reporting a gap in tier three support provision and a reliance on external services to address complex wellbeing needs. This challenges inclusive legislation, highlighting a flaw in the CoS framework itself. Despite its principle of delivering the highest support to those with the greatest needs within the educational system (DES, 2007a), the observed gap in support provision indicates a failure to fully realise this principle in practice.

Bandura's (1979) social learning theory provides a lens through which this contradiction can be explored, which posits that self-efficacy, crucial for effective teaching, is influenced by mastery experiences, social persuasion, vicarious experiences, and emotional states. One area of opportunity (Engeström et al., 2001) within the present study is the high level of buy-in from

educators regarding the importance of promoting wellbeing, making wellbeing initiatives “so much more achievable” (P3). Educators report competence in relational practices to support pupil wellbeing needs, including a commitment to establishing a “positive culture” (SET1), “sense of belonging” (SET2) and “safe classroom environment” where pupils “know there’s a teacher that cares about them” (CT2). This aligns with the literature on positive classroom environments and teacher-student relationships in fostering student wellbeing (Cefai et al., 2021; DES, 2018; Miliffe, 2016; NCCA, 2023).

However, in line with results from the systematic literature review, findings from the present study indicate that educators’ knowledge of appropriate strategies to identify and address pupil wellbeing needs has made educators feel less efficacious. Teachers express feelings of uncertainty, admitting to “second-guessing” themselves (SET3) and fearing that they “might be doing more harm than good” (SET1), mainly when dealing with “specialised areas, like trauma” (SET1). Several participants also highlight challenges in recognising pupils’ internalising symptoms, likening wellbeing to “the wind; you feel it, but putting a number on it is nearly impossible” (CT2). These findings indicate barriers to the early identification, intervention, and support of pupil wellbeing needs on the ground due to a mismatch between educators’ understanding of the importance of supporting pupil wellbeing and the actual prerequisite skills required to provide effective support. This finding aligns with the literature, which demonstrates the impact of such gaps in knowledge and skills on teachers’ self-efficacy (Alisic, 2012; Brunzell et al., 2018). Findings from the present study suggest that this disconnect poses a significant challenge to supporting pupil wellbeing through the CoS, particularly in delivering tier three services.

The effectiveness of the CoS framework relies on educators' ability to identify pupil needs (Romer et al., 2020). However, discrepancies in the perceived utility of assessment practices such as informal "chats at the door" (SET2) and teacher observation for identifying wellbeing needs were also noted in the present study's findings. Observation emerged as the primary tool for assessing wellbeing needs, as highlighted by 82% of survey respondents, and has been praised in the literature as a formative assessment tool given its value in capturing real-time, context-specific information about pupil wellbeing needs (Westen et al., 2021). However, this gives rise to tension between SETs and CTs on the ground, with the former expressing frustration at the informal nature of this tool, leading to inconsistency in information shared within tiers of the CoS, which is reported "to create more work for the SET" (SET1), who feel the need to "cover themselves" (SET2). This alludes to a further contradiction in the division of labour within the CoS and SET's perceived accountability under the SETAM. SETs feel primarily responsible for documenting all assessment procedures, asserting that "the more bulk of paper that a child has, the better" (SET3), leading to overwhelming administrative obligations and stress, possibly influencing their sense of efficacy (Skaalvik & Skaalvik, 2017). This results in further tensions, wherein CT's professional judgement is being overlooked in favour of quantitative and reliable assessment methods (Biesta, 2015). This contention is reinforced by the literature on data-driven decision-making in education, emphasising the role of systematic data collection and the documentation of such observations in enhancing the reliability and utility of assessment information (Hamilton et al., 2009).

To bolster role clarity and facilitate transparent communication between CTs and SETs, policies must explicitly designate dedicated time for strategic planning and collaboration within MTSS teams, in line with results from the present systematic literature review (Cane et al., 2015;

Brann et al., 2021). Given the well-documented subjective nature of wellbeing conceptualisations in the literature (Nohilly & Tynan, 2019; Stewart-Brown, 2013) and the associated challenges highlighted in the present study regarding identifying wellbeing needs and monitoring pupils' response to wellbeing intervention within the CoS, a clear need for nuanced approaches, refined tools, and comprehensive training arises. For instance, research suggests employing social-emotional screening measures to facilitate early identification of at-risk students developing wellbeing problems (Albers et sl., 2007; Margherio et al., 2019; McIntosh & Goodman, 2016; Romer et al., 2020). Engagement in professional development is central to this endeavour and has been found to improve educators' perceptions of their collegial network, leading to subsequent improvements in SEL support (Kimber et al., 2013).

A further possible explanation for limited educator efficacy, as suggested by findings in the present study, is the apparent reliance on universal programmes to teach wellbeing during SPHE time. A non-evidence-based programme was cited as a means of effecting wellbeing education by every CT and principal interviewed in the present study, offering "something structured to go along with" (CT1) and allowing CT3 to "cover what's expected". However, wellbeing education extends beyond the mere transmission of information and necessitates fostering skills such as critical thinking, communication skills, and emotional intelligence (Durlak et al., 2011; Greenberg et al., 2003; NCCA, 2023). While the present study findings underscore the importance of educators in promoting student wellbeing through relational practices, trust-building, and the creation of opportunities that showcase potential (DES, 2018), the reported reliance on universal programmes by CTs may inadvertently compromise the pedagogical strategies required to engage pupils actively in developing essential wellbeing-

enhancing skills (Brann et al., 2021). This can pose challenges to mastery experiences, which are crucial for developing self-efficacy (Bandura, 1986; Brann et al., 2021).

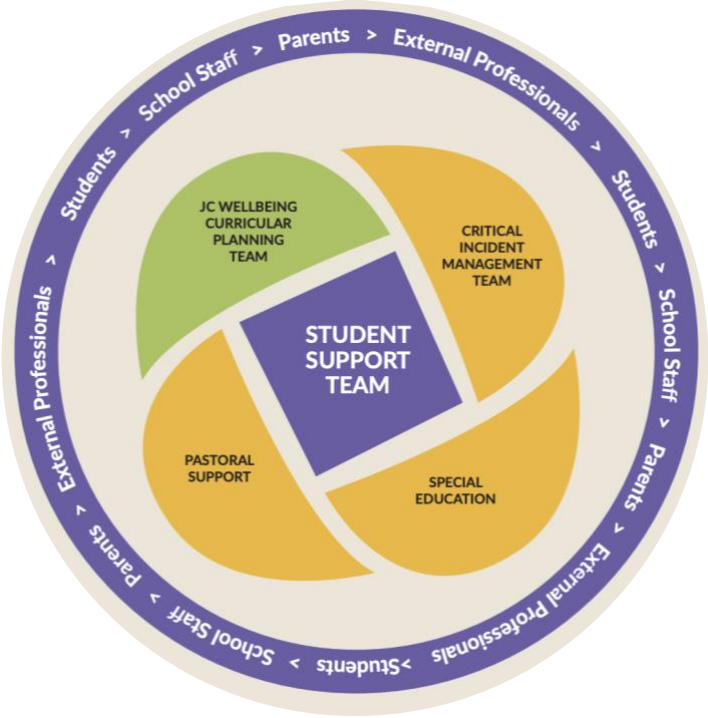
Research further underscores the need for educators to adapt their approaches based on their pupils' unique needs and contexts (Cramer & Castro-Olivo, 2016; O' Halloran et al., 2023). Findings from the present study indicate that such universal interventions are not purposely sought based on pupil needs and are typically selected based on "word of mouth" (P2), despite the emphasis on the utility of needs-analysis when selecting a universal programme as outlined in Circular 0042/2018 (DES, 2018). The predominant use of universal programmes, if not supplemented with flexible and adaptive teaching strategies, may risk overlooking the individualised needs of pupils and hinder the opportunity for mastery experiences (Brann et al., 2021). The absence of routine programme assessment, as highlighted in the present study findings, where 61.5% of participants reported 'no' or 'unsure' responses regarding the existence of systems to assess the effectiveness of interventions, is incongruent with the principles of evidence-based practice (Cook & Odom, 2013) and guidelines issued in Circular 0042/2018 (DES, 2018). This circular advocates for a continuous evaluation of intervention outcomes used to enhance pupil wellbeing to ensure their effectiveness; a practice that appears to be currently overlooked in Irish primary schools. The lack of assessment not only undermines the potential impact of these interventions but also hinders the establishment of a robust feedback loop necessary for refining and improving wellbeing support strategies over time. Sadler (1989) emphasised the importance of this feedback loop, which involves systematically collecting and analysing data on intervention outcomes to inform decision-making and adjust as necessary. Without this feedback loop, schools may struggle to identify what works and what doesn't,

ultimately limiting their ability to support pupil wellbeing effectively and further limiting the occurrence of mastery experience when supporting wellbeing needs.

The proposed expansion of the CoS, through the incorporation of an additional 'Support for Staff' tier, offers a platform to address the above contradictions. In line with Bandura's (1986) social learning theory, educators must have access to mastery experiences, social persuasion, vicarious experiences, and emotional states that foster self-efficacy, expanding their wellbeing assessment repertoire and enhancing their skillset to teach wellbeing flexibly and dynamically with confidence. Drawing upon the aforementioned 'areas of opportunity' outlined in the present study's findings (Engeström et al., 2001), such as high levels of staff buy-in and specialist staff member skills, the researcher suggests the extension of NEPS' Student Support Teams (SSTs) to primary school settings (DE, 2021). SSTs, recently introduced to post-primary schools by NEPS (DE, 2021), comprise stakeholders such as the Wellbeing Curricular Planning team, the SEN department, and guidance staff, and serve as a co-ordinated platform for educator support in pupil welfare and wellbeing (See Figure 29). Educators have the opportunity to address challenges and seek guidance within the school environment, with the SST guided and mentored by the school's allocated NEPS psychologist (DE, 2021). Through open communication and collaboration, the SST facilitates double-loop learning, offering a platform for educators to discuss issues, seek solutions, and obtain guidance on available resources or tools (DE, 2021; Odom et al., 2001). This process aligns with Bandura's (1986) social learning theory, fostering a supportive environment where educators can learn from each other's experiences and collectively contribute to improving pupil wellbeing.

Figure 29

Student Support Team (DE, 2021, p11)



Additionally, a primary school SST could be pivotal in informing the training received as part of the Professional Learning Community (PLC) in the proposed 'Support for Staff' tier, ensuring continuous improvement and refinement of support strategies over time. SSTs could offer mentorship opportunities, wherein educators can observe experienced colleagues, enabling them to model successful tools and strategies and become more self-efficacious in supporting pupil wellbeing (Ingersoll & Strong, 2011). This is similar to capacity-building strategies in the literature, including the recruitment of a ‘programme champion’ or a “community of learners” whose role is to manage the implementation of evidence-based SET interventions and act as the link with the broader community and external networks of support (Bond & Blevins, 2020; NCCA, 2023, p. 172, Scanlon et al., 2021; Wyn et al., 2000). Primary school SSTs could offer a

platform for educators to actively participate in programme design, adapting wellbeing programmes to the school context (Martínez, 2016), initiating discussions on programme implementation, and supporting educators' buy-in, interests, and diverse needs in order to enhance their overall agency (NCCA, 2023).

The gap in tier three provision, highlighted in both the present review and results of the systematic literature review (Pavri, 2010; Cane et al., 2015; Eiraldi et al., 2023), underscores the need for policy initiatives that ensure external clinician collaboration, resource availability, and more specialist training for educators. As evidenced by studies conducted in the USA and included in the systematic literature review, access to in-school onsite professionals is optimal for providing immediate and on-the-ground support for complex wellbeing needs. Kern and colleagues (2017) presented various reasons supporting the integration of mental health services within schools, such as the potential for early identification and intervention, increased accessibility for students and their families, the presence of trained professionals, and a reduction in associated stigma. The NEPS service delivery model offers a viable alternative within an Irish context (DES, n.d). Through consultation and professional development, NEPS can empower educators with the knowledge and skills to navigate tier three interventions effectively. Therefore, in the absence of in-school onsite professionals, a well-defined policy framework that fosters collaboration between educators and external clinicians, emphasising consultation and support and development models, is crucial for creating an educational environment that effectively supports the 'whole child' within the context of MTSS.

The ongoing pilot initiative led by NEPS, introducing counselling services in primary schools in one-to-one settings, shows promise in tackling the rising wellbeing needs noted by educators in the present study (DE, 2023b). This initiative can address the growing need for

more complex support, as pointed out by participants who reported that “The Support for Some tier (is) getting wider and wider” (P2)”, and potentially help bridge the gap identified in tier three wellbeing support provision. It is important to note that this pilot programme has been underscored as an interim measure intended to supplement services provided by the Health Service Executive and meet the current urgent needs for counselling support for primary school children (DE, 2023b). Therefore, it is reactive and does not fully align with early intervention and prevention principles. It is evident that this is a short-term solution, and thus, as discussed above, the imperative to build educators’ self-efficacy to identify and support complex needs remains.

3.5.3 Research Question Three: What Expectations or Rules Influence Educator Support of Wellbeing Needs Using the Continuum Support Framework?

While findings from the present study highlight that societal attitudes towards mental health and wellbeing are evolving positively, with mental health “no longer a taboo subject” (CT1), a contradiction arises in integrating wellbeing support within a system that traditionally prioritises academic outcomes. The prevailing belief that “good Maths and English STEN scores make a good teacher” and the relentless “pressure from all angles” to complete literacy and numeracy programmes was reported by CT1 and CT3. This sentiment resonates with the findings of the systematic literature review, which indicate that conflicting educational priorities often lead to the neglect of wellbeing within MTSS, indicating a misalignment between educators’ stated priorities and actual practices. This paradox is mirrored in Fitzpatrick et al.'s (2014) study of Irish primary school educator priorities, which demonstrated a disconnect between the high ranking of outcomes related to social and emotional development within the primary curriculum and the comparably low ranking of the subject SPHE. This discrepancy underscores a broader

issue within the educational landscape, where the values and aspirations expressed by educators may not be fully realised due to systemic constraints and historical biases. This tension could stem from Irish educators' perception that their professional effectiveness is predominantly evaluated based on standardised academic outcomes, thus perpetuating a historical emphasis on academics to the detriment of holistic student development (Winter & O'Raw, 2010).

Resource constraints further compound this contradiction, reflecting the tensions inherent in educator autonomy and responsibility under the SETAM (2017). Findings from the present study indicate that educators express apprehension about allocating limited resources to wellbeing needs rather than what others might perceive as a more "legitimate focus" (SET3). Resource limitations create further tension in the pursuit of inclusive education, as mandated by the Education for Persons with Special Educational Needs (EPSEN) Act 2004, hindering comprehensive support services for students transitioning from specialised settings, making inclusive practices challenging. The contradiction arises from the gap between the inclusive vision and the practical challenges of resource availability (Booth & Ainscow, 2011), with pupils at risk of wellbeing needs due to existing SEN receiving comparably limited resources than they would in a more specialised setting (Rose et al., 2011). This results in pupils with complex needs "losing out due to resource shortages" (P3), as pupils with disabilities and complex medical conditions continue to require ongoing access to therapeutic services in addition to in-school support (Rose et al., 2015). Recent changes in the criteria for a school's educational profile, particularly the removal of 'complex needs' as one of the criteria for the allocation of SETs in Circular 0002/2024 (DE, 2014), are likely to exasperate this situation, particularly for the most vulnerable children in schools. Given the substantial risk factor complex disabilities pose for wellbeing needs (Emerson, 2001), the findings from the present study underscore the necessity

of considering wellbeing risk factors when evaluating the criteria for the allocation of SETs, ensuring equitable support for pupils with the greatest level of needs.

Results from the present study also highlight a contradiction between the perceived utility and expertise of the NEPS psychologist, with tier three wellbeing support viewed as “more related to NEPS” (SET3), and their practice on the ground underscored as a significantly limited resource within schools. Findings from the present study highlight that educators perceive NEPS “more from the point of view of diagnosing and testing than wellbeing” (SET2), echoing the traditional view of EPs underscored in the literature (O’Farrell & Kinsella, 2018). Despite NEPS’ principles advocating for early intervention, resource constraints have resulted in delayed interventions and limited therapeutic services. Previous Irish research has similarly highlighted discrepancies between theoretical principles and practical implementation, underscoring challenges within the field of educational psychology (Rose et al., 2015; Travers et al., 2010; Hosford & O'Sullivan, 2016). SET 3's reference to NEPS' involvement as a means of “opening doors” suggests a prevailing reliance on NEPS for assessment work due to resource constraints, reinforcing the view of the EP as a gatekeeper of resources under the previous allocation model (Shevlin et al., 2013; Travers et al., 2010).

Moreover, contradictions surfaced in educators’ perceptions of NEPS involvement regarding pupil wellbeing needs. Survey results indicate principals receive the most frequent support, followed by SETs and CTs. This aligns with the frustrations of SETs and CTs regarding their perceived lack of involvement in planning meetings with school psychologists. Despite their intimate understanding of pupil needs, as reported by SET1, “our (SET and CT) deep day-to-day understanding of what's going on for pupils most definitely qualifies us for involvement in resource-related decisions”, there are perceived discrepancies in the involvement of educators

within NEPS meetings. Therefore, an area of opportunity (Engeström et al., 2001) lies in the consultative service delivery mode. Positive experiences reported by principals in the present study indicate a shift towards a more collaborative and consultative approach, aligning with contemporary frameworks for student support (Nugent et al., 2014). P2's positive experience receiving whole-school “Stress Factor and positive behaviour support” support and development work and P1’s positive reports of consultative planning meetings underscore this shift: "It's always brought back to number one: prioritising the pupils’ wellbeing”. Research demonstrates that increased contact with EPs through training and consultation can equip educators with the necessary understanding to effectively address their pupils’ academic, social, and emotional needs (Anderson et al., 1995; Patrick et al., 2011). CTs and SETs suggest the benefits of increased participation in planning meetings. This emphasises the importance of fostering a broader understanding of the benefits of consultation and support work in fostering a shared understanding of evolving roles within the educational framework. This echoes the findings of previous literature advocating for a shift away from traditional diagnostic roles towards collaborative and consultative approaches in supporting pupil wellbeing (Lambert et al., 2004; NEPS, 2019b)

3.5.4 Conclusion

The present study aimed to elucidate Irish primary school educators’ experiences and perspectives on supporting pupil wellbeing needs using the CoS framework to better understand how educational psychologists could better support educators in such work. By utilising the second-generation CHAT as a lens for exploration and incorporating a mixed-method design within the pragmatic paradigm, new insights were established, and previous literature was extended. The findings reveal a commendable commitment among educators to prioritising

wellbeing needs and providing relational support to pupils. However, significant challenges emerge in early identification and intervention for complex needs. The impact of the SETAM on resource allocation and teacher agency and the perceived role of EPs in reactive support further underscore the complexities within the CoS implementation. The present study findings underscore the emotional demands on educators, the limitations in existing support structures, and the dilemmas arising from policy shifts. In line with the pragmatic paradigm, informed by contradictions within the activity theory, implications for future policy, practice, and research arise and are outlined below in Table 11.

Table 11

Implications for Policy, Practice, and Future Research

Implications for Policy
- It is proposed that DE polices expand the Continuum of Support framework to integrate a 'Support for Staff' tier. This tier emphasises staff resources, including skills, confidence, wellbeing, and training, as crucial tools for facilitating successful pupil wellbeing support within the 'Tools' node of the CoS activity system. Mandating ongoing, evidence-based, specialised training in schools, consistent with the Professional Learning Framework, addresses educators' reported lack of confidence in supporting pupil wellbeing needs and the pressure they face to respond to complex needs without necessary expertise. - It is recommended that DE policy explicitly includes supervision for all educators, particularly DEIS educators, recognising its potential as a tool within the CoS activity system for enhancing educator wellbeing and preventing burnout. This recommendation is grounded in findings emphasising the crucial mediator of

educators' own wellbeing in facilitating effective support students and addressing the emotional challenges inherent in their roles.

- Regular reviews and updates of the Special Education Teacher Allocation Model's needs-based profiling components are proposed, given the influence of governmental policy rules on educators' ability to prioritise student support equitably and effectively within the CoS activity system. This should consider recent policy realignments (DE, 2024), and emphasise the inclusion of increased risk factors for wellbeing difficulties present within the population. This recommendation stems from findings underscoring the impact of limited resource allocations on the prioritisation of students with wellbeing needs for additional support, as well as the associated constraints faced by educators in fulfilling their roles and responsibilities within the CoS activity system.
- Advocacy is proposed for the increased investment in education in Ireland to ensure the equitable provision of support for pupils with diverse needs under the SETAM.
- Increased recruitment of psychologists by NEPS is proposed to enhance their capacity for preventative and organisational wellbeing support, aligning with the growing demand for mental health services in schools and findings that highlight the valuable resource of specialist clinicians in addressing such issues within the CoS activity system. This arises from challenges faced, such as "the waiting game" for support, pressures to prioritise other special education needs, and frustration in securing timely support, reflecting the unspoken rules and expectations influencing educators' joint work with the school psychologist within the CoS.

Implications for Practice

- It is proposed to extend NEPS' Student Support Teams to primary schools to maximise existing tools and areas of opportunity identified within the CoS activity system in the present study, including staff skills and buy-in (Engeström, 2001). SSTs are proposed to address the absence of in-school wellbeing support at the 'Support for Few' tiers, with most SETs currently relying on external clinicians with specialist knowledge and skills, underscoring the need for in-house mechanisms for collaborative problem-solving and resource-sharing. SSTs aim to establish a co-ordinated approach within schools, recognising collaborative in-school support as a crucial resource in building educators' skills and confidence, and ultimately in addressing pupil wellbeing.
- The promotion of more collaborative teaching practices is proposed to ensure equitable division of labour between CTs and SETs within the CoS activity system, with educators engaging in designated planning, team-teaching**,** and co-teaching to identify, support, and monitor pupil wellbeing needs effectively. This approach recognises the tool presented in effective collaborative structures between educators with the CoS activity system, fostering a comprehensive and inclusive approach to supporting pupil wellbeing needs.
- Increased implementation and awareness-building of the NEPS group consultation model is proposed to address the influence of historic perceptions of EPs primarily as assessors and to bolster their role as consultants in pupil wellbeing support. This aims to empower EPs capacity to enhance educator competency in addressing complex and emerging wellbeing needs and selecting evidence-based programmes. Additionally,

democratising consultation opportunities is essential, ensuring the inclusion of all educators, not just principals, in relevant meetings with the EP, for example the yearly planning meeting. By effectively integrating NEPS consultation, educators can better fulfill their roles in supporting pupil wellbeing and optimise their use of available resources within the CoS activity system.

Future Research

- Future research is recommended to uncover the experiences of pupils and their parents regarding wellbeing support within the CoS. These perspectives offer critical insights into the effectiveness of current support structures for the intended beneficiaries and shed light on challenges regarding parent involvement identified in the present study.
- Future research focusing specifically on secondary schools is recommended due to the unique challenges and dynamics present in this educational context, with adolescence also recognised as a crucial period for mental health and wellbeing (Powers et sl., 1989).
- Investigating the experiences and perspectives of NEPS psychologists is recommended in future research given their role in supporting pupil needs within the three tiers of the CoS.

4.0 Critical Review and Impact Statement Chapter

The final chapter includes a critical reflection on the research process. The researcher will thoroughly examine the study's pragmatic paradigm, theoretical framework, and methodological approach to identify their strengths and limitations. A comprehensive discussion of the implications of the present study is provided, elucidating the impact on policy, practice, and future research. The thesis will conclude with an Impact Statement outlining the present research's distinct contribution to Educational and Child Psychology.

4.1 Reflection on the Pragmatic Paradigm

Pragmatism was selected as the paradigm for the present research for several reasons. Firstly, it closely resonates with the researcher's worldview (Mertens, 2023). Inherently solution-focused, the pragmatic paradigm pursues "what works" (Tashakkori & Teddlie, 2003, p. 713) and the creation of actionable knowledge and practical solutions to the research question (Cohen et al., 2017). Therefore, pragmatism is also seamlessly aligned with the present research aim to illuminate educator experiences of the CoS in supporting pupil wellbeing needs. More specifically, pragmatism affords a methodological lens to unearth contradictions in line with the study's theoretical framework, the second-generation CHAT (Engeström et al., 2001). This facilitated the identification of areas of opportunity within the CoS to transform inefficiencies in educators' experiences of supporting pupil wellbeing needs (Murphy & Rodriguez-Manzanares, 2008). Given the significant methodological implications of the chosen paradigm, with the ability to permeate central aspects of the research process (Kivunja & Kuyini, 2017), the present study is poised to benefit from a holistic and dynamic approach that disregards the "Paradigm Wars" in the quest of actionable insights (Kivunja & Kuyini, 2017, p. 35). Therefore, the present

investigation incorporated both quantitative and qualitative findings, with the researcher deeming a mixed-methods methodology most effective in answering the present research questions.

In exploring a paradigm, an understanding of the ontology, epistemology, methodology, and axiology is considered central (Lincoln & Guba, 1985). Ontology, concerning the nature of reality, is viewed pragmatically, acknowledging diverse perspectives without indulging in unnecessary debates (Cohen et al., 2017; Creswell & Plano Clark, 2017). This pragmatic understanding guides the study's preference for qualitative exploration to delve into unique educator experiences and quantitative surveys for illuminating patterns in the singular real world. The researcher was subsequently enabled to pursue actionable knowledge and practical insights to answer the research questions effectively. Epistemology, focusing on knowledge acquisition, construction, and communication, is approached pragmatically to best suit the broad research exploration and emphasis on educator experiences (Cohen et al., 2018; Mertens, 2023). Integrating positivist and constructivist elements through a sequential explanatory mixed-methods design, the study employs deductive surveys and inductive interviews, leveraging the pragmatic paradigm's flexible and solution-focused epistemology. This resonates with the methodology component of the pragmatic paradigm, which emphasises practical solutions and the integration of diverse perspectives and methods to address specific research questions effectively. Therefore, the researcher integrated quantitative and qualitative methods to understand the experiences of educators best. Axiology within the pragmatic paradigm refers to the philosophical examination of values and ethics and assessing worth or importance in the context of practical consequences and actions. In the present study’s investigation of educators' experiences supporting pupil wellbeing through the CoS, pragmatism assumes a central role. This philosophical perspective places a substantial emphasis on the inherently value-laden nature

of decision-making, particularly on the ethical dimensions entwined with the choices educators navigate. It also guides the pursuit of ethical solutions to the contradictions they encounter, ensuring a comprehensive exploration of the values that shape educators' decision-making processes within the CoS framework.

While the pragmatic paradigm is celebrated for its practical orientation and problem-solving approach, critics argue that it may oversimplify or neglect theoretical considerations (Doyle et al., 2016). Therefore, the researcher took several measures to maximise the depth of exploration, such as methodological triangulation, member checks, and peer debriefing, which will be explored later in Section 4.6. Furthermore, a researcher's reflective journal was employed throughout the study to consistently evaluate personal values, ethical considerations, and potential biases that might influence the accurate portrayal of participant experiences. This reflective approach aligns with the principles of reflexivity and methodological transparency underlined in the literature (Mertens, 2023; Nowell et al., 2017), ensuring that findings are grounded in a rigorous examination of the researcher's subjectivity and positioning within the research process. By adhering to this reflective practice, the present study aims to enhance the trustworthiness and credibility of its findings, thus contributing to the integrity of qualitative enquiry.

4.2 Reflection on the Theoretical Framework Adopted

The second-generation CHAT underpins the present study (Engeström, 1987). Considered both a descriptive and analytical framework, the use of second-generation CHAT was deemed a significant strength of the current research. It was central to formulating research questions, creating data collection measures, the deductive component of reflexive thematic analysis, and discussing research findings. CHAT aligns with the inherently social and

contextual nature of the educational environment (Nussbaumer, 2012), and its strength resides in its capacity to provide a comprehensive and systematic approach to understanding diverse components of the educational system by employing several analytical nodes (Hashim & Jones, 2007). Given the broad nature of the present exploration, this was vital in achieving a non-reductionist approach that recognises the tensions between the 'subject' and the 'object' (Roth & Lee, 2007). Engeström's (1999, 2001) emphasis on unearthing contradictions and areas of opportunity within the activity system facilitated a comprehensive insight into the challenges and opportunities educators encounter (Leadbetter, 2008) and resonates with the pragmatic paradigm of the present study. Indeed, second-generation CHAT was selected over alternative frameworks, given its emphasis on the pursuit of actionable insights and areas for transformation and change within educators' experiences of the CoS. The researcher initially considered utilising the Appreciative Enquiry theoretical framework, praised for its solution-focused problem-solving approach, and the Bioecological Model of Development (Bronfenbrenner & Morris, 2006), which investigates systemic influence on individual action. However, both lack the systematic exploration of tensions and contradictions within individual systems- the essential force of the present research (Cooperrider & Whitney, 2007). The CHAT framework, while robust, has faced criticism, particularly regarding its potential oversight of individual agency within a system (Stetsenko, 2020). Acknowledging this constraint within the present study, the researcher incorporated individual perspectives through semi-structured interviews and direct quotations.

Furthermore, critics contend that for a comprehensive understanding of human practice, no aspect of the system can be overlooked, necessitating a holistic consideration of the entire system (Langmeyer & Roth, 2006). The current study did not investigate the 'Community' node and, therefore, did not include the perspectives of significant stakeholders, including parents and

key external professionals such as the EP. This gap in the research is acknowledged as a limitation of the present study and highlights an important area for future investigation.

4.3 Research Design

The use of a sequential explanatory mixed-method design in the present study facilitated a comprehensive understanding of a complex phenomenon (Creswell, 2015). The integration of both qualitative and quantitative research methods enabled the identification of emerging patterns across a wider audience. It provided enriched insights into participant experiences through qualitative exploration, adhering to methodological triangulation (Creswell & Plano-Clark, 2017). This was advantageous in addressing the relatively limited research in the area and ensuring the credibility of research findings (Tashakkori & Teddlie, 2003). A notable strength lies in the effective integration of data, where results from the quantitative phase guided the subsequent qualitative phase, ensuring targeted exploration of relevant areas (Hong et al., 2018). This integration extended to the discussion section, wherein both findings were synthesised to draw integrated conclusions (Creswell & Plano-Clark, 2017). Despite these strengths, the study acknowledges the challenges of balancing the depth of information gathered and the inherent research constraints. Collecting and analysing substantial amounts of quantitative and qualitative data with limited resources posed a challenge within the current research design. Guided by the pragmatic paradigm, emphasising practical considerations and flexibility, the researcher ensured that the chosen design optimally served the research objectives. Integrating both quantitative and qualitative data arguably enhances the robustness of conclusions, surpassing what could be achieved with either approach alone (Feuer et al., 2002). The use of an interview protocol ensured through examination of key areas, while the adaptability inherent in semi-structured interviews facilitated additional exploration of topics deemed meaningful to the interviewee

(Byrne, 2022). This research design afforded valuable insights into the complexities of educator experiences supporting pupil wellbeing needs within the CoS.

4.4 Sample

As highlighted in Section 3.2.5, the present sample included mainstream primary school principals, CTs, and SETs, with varying degrees of experience and qualifications, ranging from a Bachelor of Education to a Postgraduate Diploma in SEN and a Master's Degree in Education. The perspectives of CTs and SETs were prioritised due to their central roles in supporting pupils with additional needs within the three tiers of the CoS, as delineated within guidance documents (DES, 2007a). Recognising the highly influential role of school leaders in spearheading multi-tiered support, as emphasised in the present systematic review of the literature, the perspectives and experiences of school principals were also sought. Other relevant stakeholders, including pupils, parents, and EPs, were not included as participants as it was deemed beyond the scope of the present study. This is highlighted as an area for future research and will be discussed further in Section 4.8. It was decided to examine the CoS activity system specifically from the perspective of one central cohort: educators. This prioritised depth over breadth, aiming to offer a rich understanding of the experiences of key stakeholders responsible for implementing the CoS (DES, 2007a; Mertens, 2015). “Thick descriptions” of participant demographics are provided in Appendix J and Table 7, respectively (Ponterotto, 2006, p. 543), allowing other researchers to understand the context and characteristics of the participants and thereby enhancing the transferability and methodological rigour of the present study (Korstjens & Moser, 2018).

Primary schools were chosen due to their significance in early wellbeing development and early intervention (Albers et al., 2007). Participants from one urban school, one rural school,

and one DEIS-1 school were purposively selected due to differences in resource allocation under the SETAM (DE, 2017, 2022, 2024). This emerged as a significant strength of the present study and provided valuable insights into how educators, based on their school's entitlements, interpret, and implement policies related to wellbeing support. For example, DEIS schools reported higher satisfaction with CPD received during the quantitative and qualitative phases. In contrast, the rural school adopted a consultative approach due to a minimal NEPS allocation, which proved more effective for prioritising wellbeing than the assessment-focused approach incorporated in the large urban school.

A total of one hundred and thirty-six participants completed the online survey, while a subsample of nine educators participated in semi-structured interviews. This was considered a strength of the present study, aligning with the concept of information power, which provides a pragmatic means of assessing sample size in studies of an exploratory nature (Materud et al., 2016). The present study is not hypothesis-driven and leans towards qualitative exploration; therefore, statistical power analysis was considered less relevant. Critics often highlight the misuse of data saturation, a standard method for determining qualitative sample size (LaDonna et al., 2021; Lenth, 2001). Considering this, the decision to employ information power, which factors in the research aim, participant specificity, theoretical underpinning, and data analysis (See Figure 30), was deemed more appropriate (LaDonna et al., 2021). This model is commended for its emphasis on collecting a diverse and comprehensive dataset rather than primarily maximising sample size, aligning well with the thorough analysis intended for both the quantitative survey and qualitative interviews in the present pragmatic research (Malterud et al., 2016). It was concluded that the study demonstrated satisfactory information power, as evidenced by the alignment of the sampling methods, analytic approach, theoretical framework,

and data collection quality with the aims and objectives of the present study (LaDonna et al., 2021; Malterud et al., 2016) (See Table 12).

Figure 30

Information Power

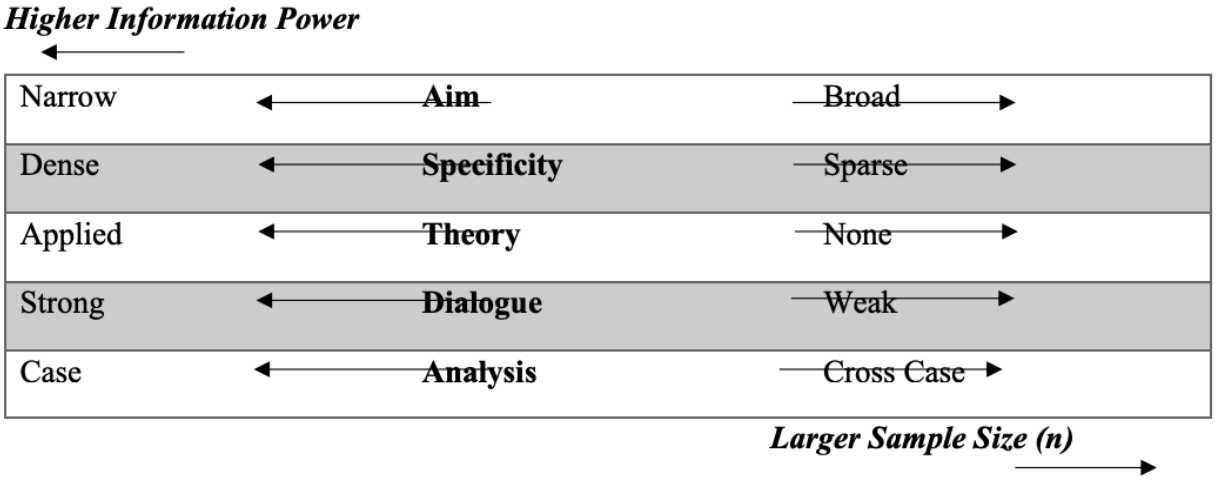


Table 12

Comparison with Malterud et al.'s (2016) Information Power Items and Dimensions

Item	Dimension	Present Research	
Aim	Aim of Study (Narrow/ Broad)	The CoS is a central framework for supporting pupil needs in Irish primary schools and therefore is a very common phenomenon that necessitates a sufficiently large sample size. This lent to the use of a national survey to illuminate emerging patterns from a larger scale population than possible through interviews (Bryman, 2006).	Broad
Specificity	Specificity of Sample (Dense/ Spare	Participants recruited had a "diversity of experiences" (Malterud et al., 2016), with a range of qualifications, years of teaching experience, school contexts, and roles in education (Bryman, 2016).	Dense

Theory	Established Theoretical Underpinning (Applied/ None)	The use of the second-generation CHAT guided the research process from the initial stages and enabled the research to reach sufficiency quicker than other approaches, for example research that involves the generation of theory based on research findings (LaDonna et al., 2021; Malterud et al., 2016)	Applied
Dialogue	Quality of Dialogue (Strong/ Weak)	Prior experience in the research area enables the researcher to gather more comprehensive, detailed information by presenting more confidently, and effectively challenging the stance of the interviewee throughout the dialogue (Malerud et al., 2016). The researcher is a former mainstream class teacher and was on placement with NEPS as a trainee EP while the interviews were being conducted. This lent to strong dialogue during the semi-structured interviews, however this was not possible during the quantitative survey.	Strong
Analysis	Analysis Approach (Case/ Cross-Case)	The present research is exploratory in nature, and is therefore concerned with highlighting specific patterns pertinent to the study's objective as opposed to elucidating all information uncovered (Malterud et al., 2016). In this context, the research seeks to 'particularise' insights derived from individual educators rather than making broad generalisations applicable to all educators in Irish primary schools.	Case

4.5 Data Collection

A national online survey was deemed the most efficient data collection tool for the quantitative phase of the present study. The rationale for this choice was based on the researcher's desire to reach a more significant number of schools from a wider variety of contexts than could have been achieved through qualitative methods alone (Jones et al., 2013). Furthermore, given the relatively limited research in the Irish context, online surveys enabled the identification of large-scale patterns, which were subsequently used to inform the creation of the interview schedule. Consecutive non-purposive sampling was employed, with surveys sent to every primary school within the sampling frame in Ireland to yield a larger sample size (Thewes et al., 2018). A staged approach to survey distribution was incorporated to maximise the variety of responses that were yielded. Concerns arise about the external validity of the data collected, with the potential for self-selection bias arising from principals who acted as gatekeepers of the survey (Heckman, 1990; Mertens, 2015).

Additionally, self-report surveys often face challenges related to social desirability bias. However, the use of online surveys has demonstrated improved reliability compared to face-to-face methods (Liu & Wang, 2015). Using Qualtrics further streamlined the data collection process, offering participants flexibility by allowing them to complete the survey on different devices and enabling them to pause and resume at their convenience. The platform's built-in features, including notifications for incompatible responses or skipped questions, contributed to minimising data errors and bolstering the overall reliability of the collected data (Brough, 2018).

The researcher recognised the importance of gathering both quantitative and qualitative data to gain a thorough understanding of educator experiences within the CoS for pupil wellbeing (Teddlie & Tashakkori, 2011). Semi-structured interviews were selected as the most appropriate tool for the qualitative data collection phase, fostering "purposeful conversations"

and offering first-hand insights in context-specific settings (Brinkmann & Kvale, 2015, p. 6). This method of interviewing was preferred due to its flexibility in questioning, allowing the researcher to delve into responses and capture nuanced insights into individual experiences (Rubin & Rubin, 2011). Given the pragmatic paradigm's focus on actionable insights, interviews were selected for their ability to generate extensive and rich data from study participants (Howitt & Cramer, 2007, p. 61). This further aligns with the study's theoretical perspective, which emphasises the detailed exploration of areas of opportunity and contradiction in educators' experiences to incite meaningful change (Engeström, 1987).

Semi-structured interviews pose the risk of social desirability bias, where participants feel inclined to present themselves more favourably when answering interview questions, compromising the data's reliability and validity (Holbrook et al., 2003). To address this, the researcher implemented several measures (Howitt & Cramer, 2008). The research was clearly introduced and positive rapport prioritised to mitigate the impact of this bias, as suggested in the literature (Begen & Labonté, 2019). Therefore, the interview protocol began with an introductory statement restating the research aims and emphasising that there were no right or wrong answers, encouraging participants to provide subjective responses. Sample questions to build rapport were also included. The deliberate use of neutral phrasing in questions aimed to mitigate the over-reporting of socially desirable experiences and perspectives and the under-reporting of less desirable ones (Krumpal, 2013). In addition, participants were assured of confidentiality, and the presentation of results would be anonymous (Singer et al., 1995). The survey and interview questions and information on their development are also appended, further enhancing the present study's confirmability and dependability with accepted research standards (Korstjens & Moser, 2018) (See Appendices I and K).

4.6 Data Analysis

Given the present study's exploratory nature, descriptive statistics, including frequencies, percentages, and general patterns, were used to summarise the quantitative survey findings (Creswell & Creswell, 2017; Teddlie & Tashakkori, 2009). The quantitative analysis aimed not to draw broad inferences but to generate detailed, context-specific insights through rich descriptions (Neilsen, 2009; Polit & Beck, 2010). The exploratory nature of the research, akin to "night science," involves open-minded investigation without preconceptions (Yanai & Lercher, 2020, p.1). In "night science," researchers acknowledge uncertainty and focus on gathering thick, rich qualitative descriptions or statistical data to generate descriptive themes or patterns. It emphasises being creative, open-minded, and attentive to the data, exploring diverse possibilities rather than confirming predetermined hypotheses (Foster, 2024). The term suggests a more flexible, curious, and adaptive approach to research, allowing for the emergence of unexpected insights and questions. While inferential statistics can allow for generalisation, the pragmatic paradigm guided the decision to prioritise the detailed, context-specific insights offered by descriptive statistics. This decision resonates with Speelman and McGann's (2020) emphasis on acknowledging uncertainty and the limitations of inferring individual behaviours from group-level statistics, especially in exploratory research. This "ergodic fallacy," which assumes that sample-level statistics accurately depict individual behaviours, is deemed particularly risky in non-ergodic systems such as human behaviour within activity systems (Speelman &McGann, 2020, p.1). Future research may employ a postpositivist stance to investigate specific hypotheses and relationships highlighted by the present study.

Reflexive Thematic Analysis (RTA) was employed in the present study as it affords a flexible yet systematic structure to the analysis of qualitative information (Bryman, 2016),

therefore aligning with the study's pragmatic paradigm. Using both inductive and deductive coding allowed the researcher to authentically capture participant experiences while offering the necessary flexibility to align the findings with the CHAT framework (Braun & Clarke, 2021b; Engeström, 2001). This hybrid coding approach, recognised for its capacity to overcome limitations of solely deductive methods, added depth to data description, affording the richness necessary for an in-depth exploration of participant experiences (Brough, 2018; Bryman, 2012; Mertens, 2015). This hybrid approach to coding represents a significant strength of the present research, providing the researcher with the means to interpret the compiled data systematically and transparently while maintaining the integrity of participant data (Bryman, 2016; Fereday & Muir-Cochrane, 2006).

The adoption of Braun and Clarke's (2021b) 'Good Thematic Analysis Checklist' (Braun et al., 2006) (See Appendix L) ensured a rigorous and high-quality RTA process, contributing to the credibility of the present findings. This ensured accuracy and detail in transcription, representative and internally coherent themes, and alignment between analysis and data. The researcher took additional steps to ensure rigorous qualitative analysis (Korstjens & Moser, 2018). For confirmability, which refers to the extent to which findings can be verified, the researcher conducted a peer debriefing of a specific interview with an external coder. This approach supports the literature that challenges intercoder reliability, proposing that effective thematic analysis involves a single coder utilising subjective experience for data interpretation (Braun & Clarke, 2021). In the present study, the researcher and an external party (a recent doctoral graduate) independently coded one interview, followed by a detailed discussion to "sense-check ideas" (Byrne, 2022, p. 1393; Lincoln & Guba, 1985). Technical member checks were incorporated during the analytical phase, wherein participants were invited to review their

transcripts to identify and correct any perceived errors or misrepresentations of their experiences or viewpoints (Cho & Trent, 2006). This is considered a strength of the present study, ensuring participant involvement in the analytic process, and ensuring the credibility of findings (Houghton et al., 2013; McKim, 2023). Member checking was also employed throughout the interviews, involving the researcher restating the interpreted meaning of participants' responses after each section of the interview schedule (Bryman, 2016). This process aimed to validate the interpretation of data and ensure congruence between the researcher's understanding and participants' interpretations of their responses. Finally, the emphasis on reflexivity is central to good thematic analysis (Braun & Clarke, 2006), evident in the researcher's use of a reflective journal and an audit trail to ensure transparency, methodological rigour, and accountability (Braun et al., 2006; Lincoln & Guba, 1985). This facilitated the documentation of methodological decisions and their accompanying rationale throughout the research process, recognising the researcher's active involvement in data analysis (Nowell et al., 2017).

4.7 Unexpected Ethical Dilemmas

The present study obtained ethical approval from the Mary Immaculate Research Ethics Committee (MIREC); however, unforeseen ethical dilemmas emerged. To navigate these challenges, the researcher consistently followed the Psychological Society of Ireland’s principles (PSI, 2019), encompassing respect for participants' rights and dignity, recognition of competence and its boundaries, responsibility toward participants and the broader community, and a commitment to maintaining integrity. In recruiting educators using purposeful sampling, it became apparent that some participants might have prior connections with the researcher due to professional relationships and interactions. Ensuring ethical standards, the researcher emphasised informed consent, clarifying the voluntary nature of participation, the right to refuse or withdraw

without explanation, and the freedom to abstain from uncomfortable questions (PSI, 2019; BPS, 2009).

An additional ethical challenge emerged during interviews, particularly concerning the emotional nature of educators' experiences supporting vulnerable pupils' wellbeing needs. Procedures were in place to support participants who showed signs of upset, including the option to halt the interview and the provision of information to appropriate support services (BPS, 2009; PSI, 2019). Although such plans were not ultimately necessitated, it was essential to have them in place. Addressing potential emotional transference was an unexpected challenge in the study. The researcher actively reflected on their positionality before each interview to limit biases and preconceptions. Balancing empathy with objectivity and active listening was deemed crucial, with the researcher maintaining a neutral stance where appropriate to ensure accurate information gathering throughout the interview process (British Psychological Society [BPS], 2019). This approach ensured research integrity and participant respect.

4.8 Limitations

Limitations of the present study encompass the need for explicit exploration into the experiences and perspectives of key stakeholders, including pupils, parents, and educational psychologists. This gap hinders a comprehensive understanding of pupil wellbeing support within the CoS. The significance of this limitation is heightened when considering international frameworks such as the UN Convention on the Rights of the Child (1989) and the Child and Youth Participation Strategy 2019 to 2023 (TUSLA, 2019), which underscore the rights of pupils to shape their educational experiences actively. Given the current study's focus on supporting vulnerable pupils, it is imperative to include the perspectives of at-risk pupils, recognising them as capable advocates for articulating their unique needs and aspirations, as emphasised in the

literature (Cefai & Pizzuto, 2017). As critical stakeholders in their children's education, parents also hold a crucial perspective on the support structures for school wellbeing needs (Bronfenbrenner, 2006). The exclusion of student and parental voices impedes the development of comprehensive insight into wellbeing support within the educational context.

Furthermore, the omission of educational psychologists' (EP) experiences represents a substantial gap, given their pivotal role in supporting wellbeing needs within the CoS (DES, 2018). Exploring EPs' perspectives could provide insights into the existing system's challenges, successes, and gaps, facilitating targeted improvements in training, resources, and collaborative structures. The inclusion of EPs' insights aligns with the pragmatic paradigm's focus on refining practices based on the experiences and needs identified within the field.

These limitations highlight the need for future research to incorporate the voices of students, parents, and educational psychologists, as their perspectives are essential for a more comprehensive understanding of pupil wellbeing support within the CoS.

4.9 Implications of Research Findings

The present study aimed to uncover how EPs can assist educators in addressing the wellbeing needs of pupils within the CoS framework. While constraints associated with the study design, data collection methods, and data analyses should be considered when interpreting the results, the findings have nonetheless enriched the research landscape on educators’ experiences implementing the MTSS to support pupil wellbeing needs. The ensuing discussion outlines tentative implications and recommendations for policy, practice, and future research based on the current findings.

4.9.1 Policy

Considering service delivery and organisational change, EPs are acknowledged for their competency in driving change through policy development (BPS, 2019). Contradictions highlighted in the current study underscore the need for a paradigm shift in the policy landscape surrounding the CoS. Findings from the present study indicate that recognising and meeting the needs of educators is a precursor to the effective fulfilment of student needs and the development of a robust and responsive educational system capable of delivering effective early intervention and support. Given the rapidity of macrosystemic educational change, this is essential and has implications for educator experiences on the ground. The absence of explicit guidelines and policies formalising training and CPD for educators has resulted in a disjointed approach to initiative and policy implementation, as evidenced by the lack of training on the SETAM (DES, 2017) and subsequent role confusion reported in the present study findings.

The addition of a 'Support for Staff' tier within the CoS policy and guidance documents could incite a culture of continuous professional development in schools and provide a platform for educators to voice their professional development concerns, aligning with literature citing teacher education as a career-long process (OECD, 2005). The Professional Learning Framework aligns with the proposed 'Support for Staff' tier and the need to promote educator self-efficacy and skill refinement (Showers & Joyce, 1996), as evidenced by the results of the present study. Collaborative and adaptive learning processes are cultivated, with educators availing of continuous support structures by engaging in mentoring sessions, coaching discussions, site consultations, and reflective exercises based on evolving needs to enhance their professional skills (Blasé & Blasé, 2006; Buffum et al., 2009). It is also necessary for services like NEPS, the NCSE, and Oide (formally the PDST) to be well-versed in the latest wellbeing research and

practices and equipped to offer continuous support tailored to the evolving needs of schools and educators. By embedding ongoing support mechanisms into policy considerations, the DE can foster a culture of adaptability, resilience, and sustained professional growth within the education ecosystem. Vigilance against a “train and hope” approach, in which one-time training is provided with no follow-up (National Association of State Directors of Special Education [NASDE], 2006), is essential.

Considering the literature on effective MTSS implementation (Graczyk et al., 2006; Harlacher & Siler, 2011; Sugai & Horner, 2009), results from the systematic literature review, and findings obtained in the present study, the formulation of policy that mandates ongoing evidence-based, specialised training in the following areas is recommended:

- Understanding wellbeing risk and protective factors.
- Detecting early signs of emerging wellbeing needs.
- Applying evidence-based tools and screening processes.
- Selecting evidence-based programmes.
- Conducting programme review processes.
- Engaging in data-based decision-making.
- Supporting pupils with complex wellbeing needs.
- Understanding referral pathways.
- SETAM training: roles, responsibilities, Student Support Plans.

Incorporating a Jobs Demand Resource (JD-R) model perspective, such training not only equips educators with necessary skills but also acts as a preventative measure, mitigating high levels of pressure, stress, and vulnerability to burnout, as reported in the present study findings (Bakker et al., 2007). In light of the emotional challenges faced by teachers, particularly those

working in at-risk environments with trauma-exposed pupils (Vercambre et al., 2009), it is imperative to advocate for policy interventions that prioritise supervision as a critical supportive mechanism. Extensive literature across various professional disciplines consistently demonstrates the efficacy of supervision as a preventative measure, enhancing the wellbeing and resilience of practitioners and affording a dedicated space for processing the emotional complexities inherent in care-giving roles (Hydon et al., 2015; Iosim et al., 2022). Given the emotional difficulties expressed by the interviewed educators, particularly in the DEIS-1 school, and their heightened vulnerability to secondary traumatic stress and subsequent burnout (Davidson, 2009; SAMHSA, 2014), the field of education must heed this evidence. It is recommended that DEIS policy explicates supervision as a normative and accessible support system for educators in Irish schools.

Findings from the present study have implications for the SETAM (DES, 2017), particularly regarding resource allocation under the school's educational profile. While aligning with existing literature that commends the SETAM's departure from a diagnosis-led to a needs-based system, contradictions unearthed in the present study indicate that educators are grappling with substantial challenges in the strategic deployment of their limited SET resources. Therefore, teachers' agency to prioritise and support pupil wellbeing becomes intricately entwined with the availability of resources, resulting in constraints on the provision of individualised wellbeing support within the CoS. This underscores the need for increased investment in education in Ireland, as underscored by the ASTI following Ireland's poor ranking for investment in education compared to the OECD average (ASTI, 2021). The infusion of increased human resources is imperative, empowering educators to fulfil their responsibility of equitably supporting diverse pupil needs.

Furthermore, the recent realignment of components comprising a school's educational profile within the SETAM (DE, 2024), with heightened focus granted to literacy and numeracy scores and reduced emphasis on the number of pupils enrolled with complex needs, poses further implications on wellbeing support within the CoS. Complex disabilities, intrinsically associated with heightened risk factors for wellbeing issues (Emerson, 2001), necessitate consideration within prevailing policy frameworks to ensure that those with the greatest level of need receive the most significant level of support. This is exasperated by the tendency for "diagnostic overshadowing" to occur when individuals with intellectual disability present with underlying mental health difficulties, leading to prolonged waiting periods for identification and appropriate intervention (Moss, 1999, p.14). The unintended side-lining of complex needs and other pivotal dimensions, such as social-emotional development, precipitates an imbalanced educational approach. In light of significant shifts within student demographics in Ireland, characterised by heightened instances of homelessness and an influx of pupils with refugee status (DoHLGH, 2023; UNHCR, 2016), the integration of risk factors impacting wellbeing is recommended when considering the school's educational profile. This proactive measure seeks to prevent the marginalisation of the most vulnerable pupils within the overarching allocation model.

Finally, in the context of MTSS, the role of the EP is central, extending beyond traditional functions to encompass roles such as "researcher, student evaluator, consultant, data analyst, leader, liaison, fidelity monitor, and programme evaluator" (Loftus-Rattan et al., 2023, p. 7). School psychologists are instrumental in advocating for proactive, equitable, and evidence-based services within schools (NASP, 2017). Results from the present study reveal that increasing the number of psychologists employed within the NEPS is crucial, especially considering the limited prioritisation of wellbeing support and the scarce opportunities for

organisational-level work due to time constraints and staff preferences for individual cases. This will assist in shifting wellbeing support towards a preventative rather than a reactive approach.

4.9.2 Practice

The present study's findings underscore fundamental flaws in implementing the CoS to address pupil wellbeing needs. Early identification of emerging needs is hindered by limited training, a lack of understanding of assessment tools, and an over-reliance on the CT within tier one. Moreover, the support of more complex wellbeing needs faces obstacles due to perceived educator incompetence, limited evidence-based resources, an over-reliance on the SET in tiers two and three, and insufficient resources under the SETAM. Additionally, SETs rely on external support to implement tier three of the CoS, meaning wellbeing is often overlooked for teacher intervention within this tier. However, given resource constraints, wellbeing support from NEPS is often reactive and focused on critical situations, revealing a gap in proactive wellbeing interventions. These findings align with existing literature, emphasising the challenges in identifying emerging needs, particularly internalising needs, and delivering tier two and tier three supports (Eiraldi et al., 2019; Splett et al., 2017).

Addressing these challenges necessitates a multifaceted approach centred around collaborative structures, time for administration and collaboration, effective leadership, and change agents within the staff. The literature supports a culture of "shared responsibility" for student success in successful MTSS implementation (Brown Chidsey et al., 2009, p. 6). A whole-school approach, encompassing all educators in implementing each stage of the CoS, is critical for inclusive education (DES 2017a; DES 2007a). Collaboration in schools is recognised as pivotal for facilitating inclusion and enhancing learning outcomes (Griffin & Shevlin, 2007). Current findings indicate that additional special education teaching for wellbeing typically

incorporates a ‘withdrawal’ approach. However, the present study presents the utility of ‘team-teaching’ or ‘co-teaching’ to promote collaboration and shared responsibility between CTs and SETs within the CoS, as advocated by Conderman and Hedin (2015). This involves a co-ordinated process between two educators, involving the planning and organisation of lessons, the delivery of instruction, and the subsequent reflection and evaluation of outcomes (Pratt et al., 2017; Casserly & Padden, 2018; Beninghof, 2020).

Collaboration and partnerships within and across schools are also emphasised for developing inclusive education practices (Ekins, 2016). As change agents and leaders, principals are pivotal in implementing collaborative structures and practices to create a supportive educational environment for diverse pupil needs (Carpenter, 2015; Capp, 2015; Handley & McAllister, 2017). Expanding the NEPS 'Student Support Team' initiative to primary school settings is recommended to provide educators with specialist guidance and support within the school environment. The promotion of ‘indigenous’ change agents, such as teachers with specialist training, is suggested to connect schools with external support networks and sustain mental health programmes (Follari, 2022; Freeman et al., 2017).

Contradictions underscored in the present study findings highlight the challenges teachers face in providing comprehensive support for wellbeing needs, often over-relying on manualised intervention programmes that have not been purposively sought for the presenting student needs and context. Despite their confidence in delivering relationship-based support, teachers express a sense of inefficacy due to limited resources and a need for more knowledge regarding strategies for addressing intricate wellbeing needs. Recognising the diverse nature of wellbeing challenges, the study advocates for a flexible framework that accommodates a variety of evidence-based interventions and provides a space for collaborative, context-specific programme design,

implementation, review, and reflection. This aligns with contemporary literature urging a shift "from programs to strategies" to address the unique contextual requirements of different schools through the upskilling of educators (Jones & Bouffard, 2012, p.1; Levental et al., 2018). Research highlights the need for effective interventions and their successful implementation for improved outcomes (Cook & Odom, 2013; Fixsen et al., 2005).

Findings from the present study suggest that EPs should play an increasing role in bridging the research-to-practice gap by providing teachers with evidence-based programmes and strategies that can be adopted cohesively, thus mitigating the effects of curriculum burnout (NCCA, 2023). Notable examples include Restorative Practice (Burnett & Thorsborne, 2015; Moran et al., 2024), Collaborative and Proactive Solutions (Greene, 2023), Mindfulness (Schonert-Reichl et al., 2015) and Nurture Groups/Nurturing Schools (Boxall, 2002; Sloan et al., 2020). Various resources, such as the Evidence-Based Intervention Network (EBI) and the What Works Clearinghouse (WWC), assist educators in selecting evidence-based practices, offering materials like online training modules and fidelity checklists for implementation. Furthermore, following an extensive review of national and international literature, the NCCA (2023) concluded that wellbeing “can, and potentially should” be implemented through discrete teaching, cross-curricular integration, and within the broader school and classroom climate through policies and teacher agency to align with best practice while overcoming barriers related curriculum overload (p.183). EPs are well-placed to provide tailored support and expertise to educators, facilitating the implementation of evidence-based strategies and promoting pupil wellbeing in alignment with the NCCA’s (2023) recommendations.

The literature on effective MTSS implementation and findings from the present study emphasise that the efficacy of the early intervention within the CoS hinges on educators' ability

to identify strengths, needs, and students not responding to support (Romer et al., 2020). Traditional methods like observation and teacher collaboration may have limitations. To address these, the study recommends incorporating evidence-based, brief behaviour rating scales as screeners, as recommended by the EP. These measures offer a proactive approach to identifying at-risk students with both internalising and externalising behaviours early on, ensuring timely support within the school's context (Margherio et al., 2019; McIntosh & Goodman, 2016; Romer et al., 2020).

Furthermore, it is imperative to address the perceived responsibility of the SET to deal with pupils' needs, resulting in the overreliance on NEPS psychologists in tier three. This emphasises the need for schools to move beyond relying solely on the individual expertise of SETs and ensure all staff are competent in SEN provision (O'Gorman & Drudy, 2010). Within the current consultative model of NEPS service, the present study proposes the integration of all educators into school consultations, with EPs operating at a whole school level, "informing teachers about consultation, what it is about, their role and the role of the consultant" (Hayes & Stringer, 2016, p.14). Such group consultative practices have been found to enhance collective expertise in SEN provision, instigating systemic changes within school organisations (Hayes & Stringer, 2016; Wagner, 2008).

Principals, often receiving consultation during planning meetings, may benefit from tailored professional development and responsive support to ensure objective and equitable SEN provision. The complex duties of prioritising students for NEPS involvement and ensuring equitable resource distribution require careful consideration. This study suggests a need for tailored professional development for school principals to prevent potential resource misallocation, emphasising the importance of equitability in SEN provision (Kenny et al., 2020).

Psychologists could assume a central role in facilitating provision mapping within the consultation model, aiding staff in evaluating SEN structures and systems within schools.

4.9.3 Research

Future research on educator experiences in wellbeing support within the CoS could delve into several key areas to contribute to comprehensive understanding and inform evidence-based practices. Firstly, exploring students' experiences would provide valuable insights into implementing the CoS to foster a supportive, child-centred educational environment for pupils with wellbeing needs. Investigating the experiences and perspectives of at-risk students receiving support is recommended to contribute to a more nuanced understanding of vulnerable pupils' unique needs and experiences (Fielding, 2004). This aligns with the principles underlined in Article 12 of the United Nations Conventions on the Rights of the Child, which stipulates that children have the right to have their opinions considered, their views respected in decisions impacting them, and to be given appropriate consideration based on their age and maturity level. Additionally, considering the role of parents as critical stakeholders in the CoS, an understanding of their perspectives on the support structures for wellbeing needs is essential. As the intended beneficiaries of the CoS, offering pupils and parents an avenue to discuss their perspectives and values about wellbeing support is crucial. This aligns with Woolfson and colleagues' (2006) assertion that "consulting with children is not simply the preferred model but is instead a requirement placed upon professionals" (p.338).

Further research could also focus on the experiences of Educational Psychologists (EPs) within the CoS, shedding light on their challenges, successes, and contributions to the system. This exploration could guide targeted improvements in training, resources, and collaborative structures, aligning with the pragmatic paradigm's focus on refining practices based on

experiences and needs identified within the field (Kelly & Cordeiro, 2020). These research directions aim to fill gaps, inform policy and practice, and promote a comprehensive approach to wellbeing support in educational settings.

4.10 Impact Statement

The introduction of the SETAM marked a pivotal moment in the provision of special education resources in Irish schools, shifting from a diagnosis-led to a needs-led model and allocating greater autonomy to schools to manage resources (Kenny et al., 2020). This transition coincided with a heightened focus on promoting pupil wellbeing, acknowledging the prevalent and multi-faceted challenges children face today (Costello et al., 2003; DES, 2018; NCCA, 2023). Findings from the present study align with the British Psychological Society's (BPS, 2018) advocacy for EPs to play a more prominent role in directly supporting mental health and wellbeing initiatives for children and young people in education settings.

This research represents the first direct exploration of wellbeing using the multi-tiered CoS framework, thus significantly contributing to the scarce empirical research on the CoS in Ireland. Furthermore, its strong theoretical foundation in the second generation of CHAT(Engeström, 2001) ensures equitable representation of voices from key educators, including CTs, SETs, and school principals. Analytic nodes provided a structure for exploring the multiple influences on educator experiences on the ground, enabling the uncovering of contradictions and areas of opportunity within educator experiences of the CoS.

The analysis of these contradictions has led to notable implications for EPs' practice in supporting educators. For instance, participant experiences highlighted that a gap in knowledge and skills has resulted in difficulties with the early identification and intervention of more complex needs. However, instances of best practices showcased the potential effectiveness of

multi-tiered wellbeing support. Therefore, it was suggested that Student Support Teams, comprising educators with specialist skills and interest in wellbeing, be initiated in primary schools to provide a supportive environment for specialist guidance and support within the school environment, facilitating double-loop learning and offering a platform for educators to discuss issues, seek solutions, and obtain guidance on available resources or tools (DE, 2021). Thus, recommendations aim to enhance the systemic capacity of the CoS by building on existing strengths highlighted by educators on the ground.

The current research has also identified implications for policy concerning resource implications. Most notably, it is suggested that the current CoS be expanded to incorporate a foundational 'Support for Staff' tier, using a 'Professional Learning Framework' approach, which would recognise and address the training and wellbeing needs of educators implementing the CoS framework. Findings further revealed that the limited SET resources granted to schools under the school's educational profile (DE, 2017, 2024) undermine educators' capacity to prioritise wellbeing support within the CoS. Therefore, a revision of the school's educational profile components is recommended to ensure that pupils at high risk of wellbeing needs are catered for in Irish schools.

Implications for the field of educational psychology have also been delineated. Future research may consider the experiences and perspectives of wellbeing support through the lens of pupils and their parents to build a more comprehensive understanding of wellbeing support in mainstream primary schools. The experiences and perspectives of EPs could also foster a more holistic and informed approach to insights and recommendations. Finally, efforts will be made to disseminate the research findings widely. Presentations are planned for Trainee Educational and Child Psychologists at Mary Immaculate College's upcoming Research Summer School, and

submissions to peer-reviewed journals are intended for broader impact within the field of educational psychology.

4.11 Concluding Statement

Quoting Wandersman et al. (2008, p. 327), “If we keep on doing what we have been doing, we will keep on getting what we have been getting”. Grounded in this understanding, the present thesis underscores the importance of investigating educators’ experiences to identify meaningful, actionable areas for improvement, recognising the transformational role of one’s school years in lifelong wellbeing development. Moving forward, the implementation of the recommendations derived from the present study has the potential to not only enhance the effectiveness of the CoS framework, but also to profoundly impact the lifelong wellbeing of Irish pupils.

References

Abdullah, T., & Brown, T. L. (2011). Mental illness stigma and ethnocultural beliefs, values, and norms: An integrative review. *Clinical Psychology Review*, *31*(6), 934-948. https://doi.org/10.1016/j.cpr.2011.05.003

Admiraal, W., Schenke, W., De Jong, L., Emmelot, Y., & Sligte, H. (2021). Schools as professional learning communities: What can schools do to support the professional development of their teachers? *Professional Development in Education*, *47*(4), 684-698. https://doi.org/10.1080/19415257.2019.1665573

Ainscow, M., & Miles, S. (2009). Developing inclusive education systems: How can we move policies forward. *La Educación Inclusiva: De la Exclusión a la Plena Participación de Todo el Alumnado*, 167-170. 10.1016/j.jsp.2006.12.003

Albers, C. A., Glover, T. A., & Kratochwill, T. R. (2007). Introduction to the special issue: How can universal screening enhance educational and mental health outcomes? *Journal of School Psychology*, *45*(2), 113-116. https://doi.org/10.1016/j.jsp.2006.12.002

Alisic, E. (2012). Teachers' perspectives on providing support to children after trauma: A qualitative study. *School Psychology Quarterly*, *27*(1), 51. 10.1037/a0028590

Anderson, K., Ferguson, N., Partington, G., & Byrne, M. (2015). Focus group outcomes of the happy kids program. *Education Research and Perspectives*, *42*, 607-632.

Anderson, L. M., Blumenfeld, P., Pintrich, P. R., Clark, C. M., Marx, R. W., & Peterson, P. (1995). Educational psychology for teachers: Reforming our courses, rethinking our roles. *Educational Psychologist*, *30*(3), 143-157. https://doi.org/10.1207/s15326985ep3003_5

Angelini, V., Howdon, D. D., & Mierau, J. O. (2019). Childhood socioeconomic status and late-adulthood mental health: Results from the survey on health, ageing and retirement in Europe. *The Journals of Gerontology: Series B, 74*(1), 95-104. https://doi.org/10.1093/geronb/gby028

Arora, P. G., Collins, T. A., Dart, E. H., Hernández, S., Fetterman, H., & Doll, B. (2019). Multi-tiered systems of support for school-based mental health: A systematic review of depression interventions. *School Mental Health*, *11*, 240-264. https://doi.org/10.1007/s12310-019-09314-4

Askell-Williams, H., & Lawson, M. J. (2013). Teachers' knowledge and confidence for promoting positive mental health in primary school communities. *Asia-Pacific Journal of Teacher Education*, *41*(2), 126-143. doi.org/10.1080/1359866X.2013.777023

Association of Secondary Teachers in Ireland. (2021). *ASTI Submission to Department of Education and Science Statement of Strategy 2021-2023.* Retrieved from: https://www.asti.ie/document-library/asti-submission-to-department-of-education-and-skills-statement/

Averill, O. H., Rinaldi, C., & USEL Collaborative. (2011). Multi-tier system of supports (MTSS). *District Administration, 48*(8), 91-95.

Ayala-Nunes, L., Nunes, C., & Lemos, I. (2017). Social support and parenting stress in at-risk Portuguese families. *Journal of Social Work*, *17*(2), 207-225. https://doi.org/10.1177/1468017316640200

Bache, I., Reardon, L., & Anand, P. (2016). Wellbeing as a wicked problem: Navigating the arguments for the role of government. *Journal of Happiness Studies*, *17*, 893-912. https://doi.org/10.1007/s10902-015-9623-y

Bakker, A. B., Hakanen, J. J., Demerouti, E., & Xanthopoulou, D. (2007). Job resources boost work engagement, particularly when job demands are high. *Journal of Educational Psychology*, *99*(2), 274. 10.1037/0022-0663.99.2.274

Ball, S.J. (1993) What is policy? Texts, trajectories, and toolboxes. *Discourse: Studies in the Cultural Politics of Education*, *13*(2), 10-17. http://dx.doi.org/10.1080/0159630930130203.

Baltag, V., Pachyna, A., & Hall, J. (2015). Global overview of school health services: Data from 102 countries. *Health Behavior and Policy Review*, *2*(4), 268-283. https://doi.org/10.14485/HBPR.2.4.4

Bandura, A. (1979). *Social learning theory*. Englewood Cliffs, NJ: Prentice Hall.

Bates, M. J. (1989). The design of browsing and berrypicking techniques for the online search interface. *Online review*, *13*(5), 407-424. https://doi.org/10.1108/eb024320

Battal, J., Pearrow, M. M., & Kaye, A. J. (2020). Implementing a comprehensive behavioral health model for social, emotional, and behavioral development in an urban district: An applied study. *Psychology in the Schools*, *57*(9), 1475-1491. https://doi.org/10.1002/pits.22420

Baumeister, R. F., & Leary, M. R. (2017). The need to belong: Desire for interpersonal attachments as a fundamental human motivation. *Interpersonal Development*, 57-89.

Baumrind, D. (1967). Child care practices anteceding three patterns of preschool behavior. *Genetic Psychology Monographs*, *5*(1), 43-88.

Benard, B. (1991). Fostering resiliency in kids: Protective factors in the family. *School, and Community. Portland, OR: Western Center for Drug-Free Schools and Communities*, 1-32.

Beninghof, A. M. (2020). *Co-teaching that works: Structures and strategies for maximizing student learning*. John Wiley & Sons.

Berg, N. (2005). *Non-Response Bias. Encyclopaedia of Social Measurement*, 2. 865-873, Kempf-Leonard, K., ed., London, Academic Press, Available at SSRN: https://ssrn.com/abstract=1691967

Bergen, N., & Labonté, R. (2020). "Everything is perfect, and we have no problems": Detecting and limiting social desirability bias in qualitative research. *Qualitative Health Research*, *30*(5), 783-792. https://doi.org/10.1177/1049732319889354

Berger, C., Alcalay, L., Torretti, A., & Milicic, N. (2011). Socio-emotional well-being and academic achievement: Evidence from a multilevel approach. *Psicologia: Reflexao e Critica*, *24*, 344-351. https://doi.org/10.1590/S0102-79722011000200016

Berger, E., Hasking, P. & Reupert, A. Erratum. "We're Working in the Dark Here": Education Needs of Teachers and School Staff Regarding Student Self-Injury. *School Mental Health* 6, 295 (2014). https://doi.org/10.1007/s12310-014-9135-7

Beveridge, S. (1999). *Special educational needs in schools*. Routledge.

Biddle, S. J., & Ekkekakis, P. (2005). Physically active lifestyles and well-being. *The science of well-being*, *140*, 168.

Biesta, G. (2015). What is education for? On good education, teacher judgement, and educational professionalism. *European Journal of education*, *50*(1), 75-87. https://doi.org/10.1111/ejed.12109

Biesta, G., Priestley, M., & Robinson, S. (2015). The role of beliefs in teacher agency. *Teachers and teaching*, *21*(6), 624-640. https://doi.org/10.1080/13540602.2015.1044325

Blackburn, B. R., & Witzel, B. S. (2018). *Rigor in the RTI and MTSS classroom: Practical tools and strategies*. Routledge.

Blase, J., & Blase, J. (2006). *Teachers bringing out the best in teachers: A guide to peer consultation for administrators and teachers*. Corwin Press.

Blatný, M., Millová, K., Jelinek, M., & Osecka, T. (2015). Personality predictors of successful development: Toddler temperament and adolescent personality traits predict well-being and career stability in middle adulthood. *PloS one*, *10*(4). https://doi.org/10.1371/journal.pone.0126032

Bond, M. A., & Blevins, S. J. (2020). Using faculty professional development to foster organizational change: A social learning framework. *TechTrends*, *64*(2), 229-237.

Booth, T., & Ainscow, M. (2011). *Index for inclusion: Developing learning and participation in schools*. Centre for Studies on Inclusive Education (CSIE).

Bornstein, M. H., Davidson, L., Keyes, C. L., & Moore, K. A. (2003). *Well-being: Positive development across the life course*. Psychology Press.

Borntrager, C., Caringi, J. C., van den Pol, R., Crosby, L., O'Connell, K., Trautman, A., & McDonald, M. (2012). Secondary traumatic stress in school personnel. *Advances in School Mental Health Promotion*, *5*(1), 38-50. https://doi.org/10.1080/1754730X.2012.664862

Bøttcher, L., & Dammeyer, J. (2013). Disability as a risk factor? Development of psychopathology in children with disabilities. *Research in Developmental Disabilities*, *34*(10), 3607-3617. https://doi.org/10.1016/j.ridd.2013.07.022

Bourke, B. (2014). Positionality: Reflecting on the research process. *The qualitative report*, *19*(33), 1-9. Retrieved from http://nsuworks.nova.edu/tqr/vol19/iss33/3

Boxall, M. 2002. Nurture Groups: Principles and Practice. London: Paul Chapman. https://doi.org/10.1177/00986283211024262

BPS. (2009). *Code of Ethics and Conduct*. The British Psychological Society.

Bradley, R. H., & Corwyn, R. F. (2002). Socioeconomic status and child development. *Annual review of psychology*, *53*(1), 371-399. https://doi.org/10.1146/annurev.psych.53.100901.135233

Bradshaw, C. P., Williamson, S. K., Kendziora, K., Jones, W., & Cole, S. (2019). Multitiered Approaches to School-Based Mental Health, Wellness, and Trauma. *Keeping Students Safe and Helping Them Thrive: A Collaborative Handbook on School Safety, Mental Health, and Wellness, 1,* 85-110.

Brann, K. L., Naser, S. C., Splett, J. W., & DiOrio, C. A. (2021). A mixed-method analysis of the implementation process of universal screening in a tiered mental health system. *Psychology in the Schools, 58*(11), 2089-2113. Doi.org/10.1002/pits.22579

Braun, G., Kumm, S., Brown, C., Walte, S., Hughes, M. T., & Maggin, D. M. (2020). Living in Tier 2: Educators' perceptions of MTSS in urban schools. *International Journal of Inclusive Education*, *24*(10), 1114-1128. DOI: 10.1080/13603116.2018.1511758

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, *3*(2), 77-101. https://doi.org/10.1191/1478088706qp063oa

Braun, V., & Clarke, V. (2021). One size fits all? What counts as quality practice in (reflexive) thematic analysis? *Qualitative Research in Psychology*, *18*(3), 328- 325 https://doi.org/10.1080/14780887.2020.1769238

Braun, V., & Clarke, V. (2022). Conceptual and design thinking for thematic analysis. *Qualitative psychology*, *9*(1), 3. https://doi.org/10.1037/qup0000196

Brian, A., Pennell, A., Taunton, S., Starrett, A., Howard-Shaughnessy, C., Goodway, J. D., & Stodden, D. (2019). Motor competence levels and developmental delay in early childhood: A multicenter cross-sectional study conducted in the USA. *Sports Medicine*, *49*, 1609-1618. https://doi.org/10.1007/s40279-019-01150-5

Bridges, D., & Bridges, D. (2017). Educational theory, practice, and research: Pragmatic perspectives. *Philosophy in Educational Research: Epistemology, Ethics, Politics and Quality*, 213-232.

Brinkmann, S., & Kvale, S. (2015). *Interviews: Learning the craft of qualitative research interviewing*. Sage publications. 149-166

Bronfenbrenner, U. (1979). *The ecology of human development: Experiments by nature and design*. Harvard university press.

Bronfenbrenner, U., & Morris, P. A. (1998). The ecology of developmental processes. In R. M. Lerner (Ed.), *Handbook of Child Psychology 5*(1) 993–1028

Brooks, J., Reed, D. M., & Savage, B. (2016). Taking off with a pilot: The importance of testing research instruments. In *ECRM2016-Proceedings of the 15th European Conference on Research Methodology for Business Management": ECRM2016. Academic Conferences and publishing limited* (pp. 51-59).

Brough, P. (Ed.). (2018). *Advanced research methods for applied psychology: Design, analysis and reporting*. Routledge.

Brown-Chidsey, R., Bronaugh, L., & McGraw, K. (2009). *RTI in the classroom: Guidelines and recipes for success*. Guilford Press.

Brunzell, T., Stokes, H., & Waters, L. (2018). Why do you work with struggling students?: Teacher perceptions of meaningful work in trauma-impacted classrooms. *Australian Journal of Teacher Education (Online), 43*(2), 116-142.

Bryman, A. (2006). Integrating quantitative and qualitative research: how is it done? *Qualitative Research, 6*(1), 97-113. https://doi.org/10.1177/1468794106058877

Bryman, A. (2016). *Social research methods*. Oxford university press.

Buffum, A., Mattos, M., & Weber, C. (2009). *Pyramid response to intervention: RTI, professional learning communities, and how to respond when kids don't learn.* Bloomington, IN: Solution Tree Press

Burke, J. & Dempsey (2021). Wellbeing in Post-Covid Schools: Primary school leaders' Reimagining of the Future. Maynooth: Maynooth University. ISBN: 978-1-910998-03-8

Burnett, N., & Thorsborne, M. (2015). *Restorative practice and special needs: a practical guide to working restoratively with young people*. Jessica Kingsley Publishers.

Byrne, D. (2022). A worked example of Braun and Clarke's approach to reflexive thematic analysis. *Qual Quant 56,* 1391–1412). https://doi.org/10.1007/s11135-021-01182-y

Byrne, D., & Carthy, D. A. (2021). A qualitative exploration of post-primary educators' attitudes regarding the promotion of student wellbeing. *International Journal of Qualitative Studies on Health and Well-being, 16*(1), 1946928. https://doi.org/10.1080/17482631.2021.1946928

Byrne, J., Rietdijk, W., & Pickett, K. (2018). Teachers as health promoters: Factors that influence early career teachers to engage with health and wellbeing education. *Teaching and Teacher Education, 69,* 289-299. https://doi.org/10.1016/j.tate.2017.10.020

Byrne, J., Rietdijk, W., & Pickett, K. (2018). Teachers as health promoters: Factors that influence early career teachers to engage with health and wellbeing education. *Teaching and Teacher Education, 69,* 289-299.https://doi.org/10.1016/j.tate.2017.10.020

Cabrera, J. C., Karl, S. R., Rodriguez, M. C., & Chavez, C. (2018). Investigating socioeconomic status proxies: Is one proxy enough?

Cane, F. E., & Oland, L. (2015). Evaluating the outcomes and implementation of a TaMHS (Targeting Mental Health in Schools) project in four West Midlands (UK) schools using activity theory. *Educational Psychology in Practice, 31(1),* 1-20. doi:10.1080/02667363.2014.975784

Cannon, M., Coughlan, H., Clarke, M., Harley, M., & Kelleher, I. (2013). The mental health of young people in Ireland: A report of the Psychiatric Epidemology Research across the Lifespan (PERL) group.

Capp, G. (2015). Our community, our schools: A case study of program design for school-based mental health services. *Children & Schools*, *37*(4), 241-248. https://doi.org/10.1093/cs/cdv030

Carpenter, D. (2015). School culture and leadership of professional learning communities. *International Journal of Educational Management*, *29*(5), 682-694.

Carr, A. (2015). *The handbook of child and adolescent clinical psychology: A contextual approach*. Routledge.

Carter, C. S. (2005). Biological perspectives on social attachment and bonding. *Attachment and Bonding: A New Synthesis,* 85-100.

Casserly, A. M., & Padden, A. (2018). Teachers' views of co-teaching approaches in addressing pupils with special educational needs (SEN) in multi-grade classrooms. *European*

Journal of Special Needs Education, *33*(4), 555-571. https://doi.org/10.1080/08856257.2017.1386315

Cassidy, J. (2008). The nature of the child's ties. In J. Cassidy & P. R. Shaver (Eds.), *Handbook of attachment: Theory, Research, and Clinical Applications* (2nd ed., pp. 3–22). The Guilford Press.

Cefai, C., & Pizzuto, S. A. S. (2017). Listening to the voices of young children in a nurture class. *Emotional and Behavioural Difficulties*, *22*(3), 248-260. https://doi.org/10.1080/13632752.2017.1331987

Cefai, C., Simões, C., & Caravita, S. (2021). A systemic, whole-school approach to mental health and well-being in schools in the EU. https://www.um.edu.mt/library/oar/handle/123456789/101739

Center on Positive Behavioral Interventions and Supports. (July 2023). Positive Behavioral Interventions and Supports (PBIS) Implementation Blueprint. University of Oregon. www.pbis.org

Chen, S. X., Mak, W. W., & Lam, B. C. (2020). Is it cultural context or cultural value? Unpackaging cultural influences on stigma toward mental illness and barrier to help-seeking. *Social Psychological and Personality Science*, *11*(7), 1022-1031. https://doi.org/10.1177/1948550619897482

Cheng, H. G., & Phillips, M. R. (2014). Secondary analysis of existing data: Opportunities and implementation. *Shanghai Archives of Psychiatry*, *26*(6), 371. 10.11919/j.issn.1002-0829.214171

Cherkowski, S., Kutsyuruba, B., & Walker, K. (2020). Positive leadership: animating purpose, presence, passion and play for flourishing in schools. *Journal of Educational Administration*, *58*(4), 401-415.

Childs-Fegredo, J., Burn, A. M., Duschinsky, R., Humphrey, A., Ford, T., Jones, S. M., & Bouffard, S. M. (2021). Social and emotional learning in schools: From programs to strategies and commentaries. *Social Policy Report*, *26*(4), 1-33.

Cho, J., & Trent, A. (2006). Validity in qualitative research revisited. *Qualitative research*, *6*(3), 319-340. https://doi.org/10.1177/1468794106065006

Clark, A. G., & Dockweiler, K. A. (2019). *Multi-tiered systems of support in elementary schools: The definitive guide to effective implementation and quality control*. Routledge.

Clarke, A. M., & Barry, M. M. (2010). A*n evaluation of the Zippy's Friends emotional wellbeing programme for primary schools in Ireland.* Health Promotion Research Centre, National University of Ireland, Galway. https://www.researchgate.net/profile/Margaret-Barry-2/publication/236150971_An_evaluation_of_the_Zippy's_Friends_emotional_wellbeing_programme_for_primary_schools_in_Ireland/links/02e7e52cbc88e3f968000000/An-evaluation-of-the-Zippys-Friends-emotional-wellbeing-programme-for-primary-schools-in-Ireland.pdf

Clarke, A. M., Bunting, B., & Barry, M. M. (2014). Evaluating the implementation of a school-based emotional well-being programme: A cluster randomized controlled trial of Zippy's Friends for children in disadvantaged primary schools. *Health Education Research*, *29*(5), 786-798. https://doi.org/10.1093/her/cyu047

Coffey, J. H., & Horner, R. H. (2012). The sustainability of schoolwide positive behavior interventions and supports. *Exceptional Children*, *78*(4), 407-422. https://doi.org/10.1177/001440291207800402

Cohen, L., Manion, L., & Morrison, K. (2017). *Action research. Research methods in education*. Routledge

Cohen, L., Manion, L., & Morrison, K. (2017). *Research Methods in Education* (8th ed.). Routledge. https://doi.org/10.4324/9781315456539

Cole, M., & Engeström, Y. (1993). A cultural-historical approach to distributed cognition. *Distributed Cognitions: Psychological and Educational Considerations*, 1-46.

Conderman, G., & Hedin, L. (2015). Differentiating instruction in co-taught classrooms for students with emotional/behaviour difficulties. *Emotional and Behavioural Difficulties*, *20*(4), 349-361. https://doi.org/10.1080/13632752.2014.976918

Conger, R. D., & Donnellan, M. B. (2007). An interactionist perspective on the socioeconomic context of human development. Annu. Rev. Psychol., 58, 175-199. https://doi.org/10.1146/annurev.psych.58.110405.085551\

Cook, B. G., & Odom, S. L. (2013). Evidence-based practices and implementation science in special education. *Exceptional Children*, *79*(2), 135-144. https://doi.org/10.1177/001440291307900201

Cooperrider, D., & Whitney, D. (2016). Appreciative inquiry. *Classics of Organization Theory*, 334-339.

Corlett, S., & Mavin, S. (2018). Reflexivity and researcher positionality. *The SAGE handbook of qualitative business and management research methods*, 377-399.

Corrigan, P. (2004). How stigma interferes with mental health care. *American Psychologist, 59*(7), 614. https://doi.org/10.1037/0003-066X.59.7.614

Costello, E. J., Mustillo, S., Erkanli, A., Keeler, G., & Angold, A. (2003). Prevalence and development of psychiatric disorders in childhood and adolescence. *Archives of General Psychiatry*, *60*(8), 837-844. doi:10.1001/archpsyc.60.8.837

Cramer, K. M., & Castro-Olivo, S. (2016). Effects of a culturally adapted social-emotional learning intervention program on students' mental health. *Contemporary School Psychology*, *20*, 118-129. doi.org/10.1007/s40688-015-0057-7

Creswell, J. W. (2015). *Revisiting mixed methods and advancing scientific practices*. Oxford, England: Oxford University Press.

Creswell, J. W., & Creswell, J. D. (2017). *Research design: Qualitative, quantitative, and mixed methods approaches*. Sage publications.

Creswell, J. W., & Plano Clark, V. L. P. (2017). *Designing and conducting mixed methods research*. Sage publications.

Curtin, L., & Egan, M. (2021). Unveiling the Context of practice: Teacher Allocation Models to support inclusion in primary schools in Ireland. *International Journal of Inclusive Education*, 1-17. doi.org/10.1080/13603116.2021.1931484

Danby, G., & Hamilton, P. (2016). Addressing the 'elephant in the room'. The role of the primary school practitioner in supporting children's mental well-being. *Pastoral Care in Education*, *34*(2), 90-103. https://doi.org/10.1080/02643944.2016.1167110

Datnow, A., & Castellano, M. E. (2001). Managing and guiding school reform: Leadership in success for all schools. *Educational Administration Quarterly*, *37*(2), 219-249.

Davidson, K. V. (2009). Challenges Contributing To Teacher Stress and Burnout. *Southeastern Teacher Education Journal*, *2*(2).

Davis, M., Costigan, T., & Schubert, K. (2017). Promoting lifelong health and well-being: Staying the course to promote health and prevent the effects of adverse childhood and community experiences. *Academic Pediatrics*, *17*(7), S4-S6. https://doi.org/10.1016/j.acap.2016.12.002

Debnam, K. J., Pas, E. T., & Bradshaw, C. P. (2012). Secondary and tertiary support systems in schools implementing school-wide positive behavioral interventions and supports: A preliminary descriptive analysis. *Journal of Positive Behavior Interventions*, *14*(3), 142-152. https://doi.org/10.1177/1098300712436844

Delaney, B. (2020). Trauma-informed approaches in schools: the efficacy of the 'trauma-sensitive schools training package'.

Demerouti, E., Bakker, A. B., Nachreiner, F., & Schaufeli, W. B. (2001). The job demands-resources model of burnout. *Journal of Applied psychology*, *86*(3), 499. DOI: 10.1037//0021-9010.86.3.499

Department of Children and Youth Affairs. (2014). *Better Outcomes, Brighter Futures – the National Policy Framework for Children and Young People 2014-2020.* https://www.gov.ie/en/publication/775847-better-outcomes-brighter-futures/

Department of Children, Equality, Disability, Integration, and Youth. (2023). Y*oung Ireland: the National Policy Framework for Children and Young People 2023-2028.* https://www.gov.ie/en/organisation/department-of-children-equality-disability-integration-and-youth/

Department of Housing, Local Government and Heritage. (2023). *Homelessness report December 2023.* https://data.gov.ie/dataset/homelessness-report-december-2023

Department of Education. (2023a). *Primary curriculum framework for primary and special schools.* https://www.curriculumonline.ie/primary/the-primary-curriculum-framework/

Department of Education. (2023b). Guidelines for Schools- Counselling in Primary Schools-Pilot. https://www.gov.ie/en/publication/61be8-counselling-in-primary-schools-pilot-cps-p-2023-2025/#information-for-schools-in-the-pilot Department of Education and Science. (1999). *Primary School Curriculum*. https://curriculumonline.ie/getmedia/c4a88a62-7818-4bb2-bb18-4c4ad37bc255/PSEC_Introduction-to-Primary-Curriculum_Eng.pdf

Department of Education. (2024). *The Special Education Teacher (SET) allocation model and the calculation of the SET allocation for each school from the 2024/25 school year until further notice.* https://www.gov.ie/pdf/?file=https://assets.gov.ie/282686/7944731c-b15e-4a98-b76a-b06d899e4789.pdf#page=null

Department of Education and Science. (2016). *Review of the Pilot of a New Model for Allocating Teaching Resources to Mainstream Schools to Support Pupils with Special* Educational Needs https://assets.gov.ie/25256/cbbc2c2bf28f4564adba35235f9ee682.pdf Department of Education and Science. (1999) *Primary School Curriculum: Social Personal and Health Education*. https://www.curriculumonline.ie/getmedia/462570f8-27cc-4f5b-a13e-d1e2de8c18d2/PSEC06_SPHE_curriculum.pdf

Department of Education and Science. (2007a). *Special Educational Needs: A Continuum of Support, Guidelines for Teachers.* https://assets.gov.ie/40642/674c98d5e72d48b7975f60895b4e8c9a.pdf

Department of Education and Science. (2007b). *Special Educational Needs: A Continuum of Support, Resource Pack for Teachers*. https://assets.gov.ie/40645/20f442fa414940f894506ed717d7f635.pdf

Department of Education and Science. (2018). *Wellbeing Policy Statement and Framework for Practice 2018–2023 (Revised October 2019*). https://www.education.ie/en/Publications/Policy-Reports/wellbeing-policy-statement-and-framework-for-practice-2018–2023.pdf

Department of Education and Science.(2015). *Framework for Junior Cycle 2015.* https://ncca.ie/media/3249/framework-for-junior-cycle-2015-en.pdf

Department of Education and Science. (2017a*). Circular Number 0013/2017: Circular to the Management Authorities of all Mainstream Primary Schools: Special Education Teaching Allocation*. https://www.education.ie/en/Circulars- and-Forms/Active-Circulars/cl0013_2017.pdf

Department of Education and Skills. (2017d). D*EIS Action Plan 2017: Delivering Equality of Opportunity in Schools*: https://www.education.ie/en/Publications/Policy-Reports/DEIS-Plan- 2017.pdf

Department of Education. (2021). Student Support Teams in Post-Primary Schools: A Guide to Establishing or Reviewing an Existing Team. https://www.gov.ie/en/collection/97aa18-national-educational-psychological-service-neps-resources-and-public/

Department of Education and Science. (DES; n.d.). *NEPS Model of Service*. https://www.education.ie/en/Schools-Colleges/Services/National-Educational-Psychological-Service-NEPS-/Model-of-Service.html

Department of Health and Department of Education and Science.(2013). *Well-being in Post-Primary School: Guidelines for Mental Health Promotion and Suicide Prevention*. https://assets.gov.ie/25105/b32a40105ca541688f3ab73d9687cccb.pdf

Department of Health and Department of Education and Science. (2015) Well-being in primary schools: Guidelines for mental health promotion. https://assets.gov.ie/25111/35c956d4d15a41e4a82ccd36ce37db4b.pdf

Desforges, M., & Lindsay, G. (2010). *Procedures used to diagnose a disability and to assess special educational needs: An international review*. https://ncse.ie/wpcontent/uploads/2014/10/5_NCSE_Diag_Ass.pdf

Desimone, L. M., & LeFloch, K. C. (2004). Are we asking the right questions? Using cognitive interviews to improve surveys in education research. *Educational Evaluation and Policy Analysis*, *26*(1), 1-22. https://doi.org/10.3102/01623737026001001

DeVane, B., & Squire, K. D. (2012). Activity theory in the learning technologies. In *Theoretical Foundations of Learning Environments* (pp. 242-267). Routledge.

Diener, E. (1984). Subjective well-being. Psychological Bulletin, 95(3), 542-575. https://doi.org/10.1037/0033-2909.95.3.542

Dillman, D. A. (2011). *Mail and Internet surveys: The tailored design method--2007 Update with new Internet, visual, and mixed-mode guide*. John Wiley & Sons.

Dooley, B. A., & Fitzgerald, A. (2012). *My World Survey: National study of youth mental health in Ireland*. https://researchrepository.ucd.ie/bitstream/10197/4286/1/My_World_Survey_2012_Online%284%29.pdf

Dooley, B.A., O'Connor C., Fitzgerald A., O'Reilly, A. (2019) *My World Survey 2: The National Study of Youth Mental Health in Ireland.* https://www.myworldsurvey.ie/content/docs/My_World_Survey_2.pdf

Doyle, L., Brady, A. M., & Byrne, G. (2016). An overview of mixed methods research–revisited. *Journal of Research in Nursing*, *21*(8), 623-635. https://doi.org/10.1177/1744987116674257

Durlak, J. A., & DuPre, E. P. (2008). Implementation matters: A review of research on the influence of implementation on program outcomes and the factors affecting implementation. *American journal of community psychology*, *41*, 327-350. https://doi.org/10.1007/s10464-008-9165-0

Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., & Schellinger, K. B. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development*, *82*(1), 405-432. https://doi.org/10.1111/j.1467-8624.2010.01564.x

Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., & Schellinger, K. B. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development*, *82*(1), 405-432.https://doi.org/10.1111/j.1467-8624.2010.01564.x

Easton, L. B. (2011). *Professional learning communities by design: Putting the learning back into PLCs*. Corwin Press.

Eaton, K., Ohan, J. L., Stritzke, W. G., & Corrigan, P. W. (2016). Failing to meet the good parent ideal: Self-stigma in parents of children with mental health disorders. *Journal of Child and Family Studies*, *25*, 3109-3123. https://doi.org/10.1007/s10826-016-0459-9

Eiraldi, R., Lawson, G. M., Patel, A., McCurdy, B. L., Wolk, C. B., Khanna, M. S., & Jawad, A. F. (2023). Integration of Mental Health Interventions Within PBIS: A Mixed-Methods Analysis. *Contemporary School Psychology, 1-15.* https://doi.org/10.1007/s40688-023-00472-6

Eisenhart, M. A., Cuthbert, A. M., Shrum, J. L., & Harding, J. R. (1988). Teacher beliefs about their work activities: Policy implications. *Theory into Practice*, *27*(2), 137-144.https://doi.org/10.1080/00405848809543342

Ekins, A. (2016). *Reconsidering inclusion: Sustaining and building inclusive practices in schools*. Routledge.

Elliot, A. J., & Chapman, B. P. (2016). Socioeconomic status, psychological resources, and inflammatory markers: Results from the MIDUS study. *Health Psychology, 35*(11), 1205–1213. https://doi.org/10.1037/hea0000392

Emerson, E., Kariuki, M., Honey, A., & Llewellyn, G. (2014). Becoming disabled: The association between disability onset in younger adults and subsequent changes in productive engagement, social support, financial hardship and subjective wellbeing. *Disability and Health Journal*, *7*(4), 448-456. https://doi.org/10.1016/j.dhjo.2014.03.004

Engel, G. L. (1977). The need for a new medical model: A challenge for biomedicine. *Science, 196*(4286), 129-136. DOI: 10.1126/science.847460

Engel, G. L. (1980). *The clinical application of the biopsychosocial model.* American Journal of Psychiatry, 137*(5), 535*–544.

Engeström, Y. (1987). *Learning by Expanding: An Activity-Theoretical Approach to Developmental Research*. Orienta-Konsultit

Engeström, Y. (1999). Innovative learning in work teams: analysing cycles of knowledge creation in practice. In Y. Engeström et al (Ed.), *Perspectives on Activity Theory* (pp. 377-406). Cambridge University Press.

Engeström, Y. (2001). Expansive learning at work: Toward an activity theoretical reconceptualization. *Journal of Education and Work, 14*(1), 133-156.

Engeström, Y. (2005). *Developmental work research: Expanding Activity Theory in Practice* (Vol. 12). Lehmanns Media.

Engeström, Y., & Sannino, A. (2017). Studies of expansive learning: Foundations, findings and future challenges. *Introduction to Vygotsky*, 100-146.

Farmer, E. M., Burns, B. J., Phillips, S. D., Angold, A., & Costello, E. J. (2003). Pathways into and through mental health services for children and adolescents. *Psychiatric Services*, *54*(1), 60-66.https://doi.org/10.5465/30040653

Farrell, E., Symonds, J., Devine, D., Sloan, S., Crean, M., Cahoon, A., & Hogan, J. (2024). "What does well-being mean to me?" Conceptualisations of well-being in Irish primary schooling. *Health Education*. https://doi.org/10.1108/HE-03-2024-0023

Farrell, P., Jimerson, S., Kalambouka, A., & Benoit, J. (2005). Teachers' perceptions of school psychologists in different countries. *School Psychology International*, *26*(5), 525-544. https://doi.org/10.1177/0143034305060787

Fazel, M., Reed, R. V., Panter-Brick, C., & Stein, A. (2012). Mental health of displaced and refugee children resettled in high-income countries: risk and protective factors. *The Lancet, 379*(9812), 266-282. https://doi.org/10.1016/S0140-6736(11)60051-2

Fereday, J., & Muir-Cochrane, E. (2006). Demonstrating rigor using thematic analysis: A hybrid approach of inductive and deductive coding and theme development. *International*

journal of qualitative methods, *5*(1), 80-92. https://doi.org/10.1177/160940690600500107

Fetters, M. D., Curry, L. A., & Creswell, J. W. (2013). Achieving integration in mixed methods designs—principles and practices. *Health Services Research*, *48*(62), 2134-2156.

Feuer, M. J., Towne, L., & Shavelson, R. J. (2002). Scientific culture and educational research. *Educational Researcher*, *31*(8), 4-14. https://doi.org/10.3102/0013189X031008004

Fielding, M. (2004). Transformative approaches to student voice: Theoretical underpinnings, recalcitrant realities. *British educational research journal*, *30*(2), 295-311.

Figley, C. R. (1995). Compassion Fatigue: Toward a New Understanding of the Costs of Caring. In B. H. Stamm (Ed.), Secondary Traumatic Stress: Self-Care Issues for Clinicians, Researchers, and Educators (pp. 3-28). Lutherville, MD: Sidran. https://doi.org/10.1080/0141192042000195236

FitzPatrick, S., Twohig, M., & Morgan, M. (2014). Priorities for primary education? From subjects to life-skills and children's social and emotional development. *Irish Educational Studies*, *33*(3), 269-286. https://doi.org/10.1080/03323315.2014.923183

Fixsen, D. L., Van Dyke, M., & Blase, K. A. (2018). Implementation science: What is it? Is it worth it? Chapel Hill, NC: Active Implementation Research Network. www.activeimplementation.org/resources

Fixsen, D., Naoom, S., Blase, K., Friedman, R., Wallace, F. (2005). *Implementation Research: A Synthesis of the Literature*. Tamps, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, National Implementation Research Network.

Follari, L. M. (2022). Relationship-Centered Education in Primary School: An Ethnographic Case Study. *Journal of Research in Childhood Education*, *36*(4), 577-591. https://doi.org/10.1080/02568543.2022.2025961

Foster, C. (2024). Methodological pragmatism in educational research: From qualitative-quantitative to exploratory-confirmatory distinctions. *International Journal of Research & Method in Education*, *47*(1), 4-19. https://doi.org/10.1080/1743727X.2023.2210063

Friend, M., Cook, L., Hurley-Chamberlain, D., & Shamberger, C. (2010). Co-teaching: An illustration of the complexity of collaboration in special education. *Journal of Educational and Psychological Consultation*, *20*(1), 9-27. https://doi.org/10.1080/10474410903535380

Gazzaniga, M., Ivry, R. B., & Mangun, G. R. (2018). *Cognitive neuroscience: Fifth international student edition*. WW Norton & Company.

Gee, B., Wilson, J., Clarke, T., Farthing, S., Carroll, B., Jackson, C., & Notley, C. (2021). Delivering mental health support within schools and colleges–a thematic synthesis of barriers and facilitators to implementation of indicated psychological interventions for adolescents. *Child and adolescent mental health*, *26*(1), 34-46 https://doi.org/10.1111/camh.12381

Gillett-Swan, J., & Sargeant, J. (2015). Wellbeing as a process of accrual: Beyond subjectivity and beyond the moment. *Social Indicators Research*, 121(1),135-148.

Glazzard, J. (2019). A whole-school approach to supporting children and young people's mental health. *Journal of Public Mental Health*, *18*(4), 256-265. https://doi.org/10.1108/JPMH-10-2018-0074

Golafshani, N. (2003). Understanding reliability and validity in qualitative research. *The Qualitative Report, 8*(4), 597-607.

Gomez-Najarro, J. (2020). An empty seat at the table: Examining general and special education teacher collaboration in response to intervention. *Teacher Education and Special Education, 43*(2), 109-126. https://doi.org/10.1177/0888406419850894

Gough, D. (2007). Weight of evidence: A framework for the appraisal of the quality and relevance of evidence. *Assessing quality in applied and practice-based research in education.*, 103-118.

Government of Ireland (1998). Education Act, Dublin: Stationary Office.

Government of Ireland (2004). Education for Persons with Special Educational Need (EPSEN) Act, Dublin: Stationary Office.

Graczyk, P. A., Domitrovich, C. E., Small, M., & Zins, J. E. (2006). Serving all children: An implementation model framework. *School Psychology Review, 35*(2), 266-274. https://doi.org/10.1080/02796015.2006.12087991

Graham, A., Truscott, J., O'Byrne, C., Considine, G., Hampshire, A., Creagh, S., & Western, M. (2021). Disadvantaged families' experiences of home-school partnerships: Navigating agency, expectations and stigma. *International Journal of Inclusive Education, 25*(11), 1236-1251.

Greenberg, M. T., Weissberg, R. P., O'Brien, M. U., Zins, J. E., Fredericks, L., Resnik, H., & Elias, M. J. (2003). Enhancing school-based prevention and youth development through coordinated social, emotional, and academic learning. *American Psychologist, 58*(6-7), 466. https://doi.org/10.1037/0003-066X.58.6-7.466

Greene, R. W. (2023). Collaborative and proactive solutions. In *Handbook of Child and Adolescent Psychology Treatment Modules* (pp. 291-303). Academic Press.

Griffin, S., Ed, M., & Shevlin, M. (2011). *Responding to special educational needs: An Irish perspective*. Gill & Macmillan.

Guest, G., Namey, E., Taylor, J., Eley, N., & McKenna, K. (2017). Comparing focus groups and individual interviews: findings from a randomized study. *International Journal of Social Research Methodology*, *20*(6), 693-708. https://doi.org/10.1080/13645579.2017.1281601

Gutman, L. M., & Schoon, I. (2015). Preventive interventions for children and adolescents. *European Psychologist*. https://doi.org/10.1027/1016-9040/a000232

Hagerty, B. M., Lynch-Sauer, J., Patusky, K. L., Bouwsema, M., & Collier, P. (1992). Sense of belonging: A vital mental health concept. *Archives of psychiatric nursing*, *6*(3), 172-177. https://doi.org/10.1016/0883-9417(92)90028-H

Hamilton, L., Halverson, R., Jackson, S. S., Mandinach, E., Supovitz, J. A., & Wayman, J. C. (2009). Using Student Achievement Data to Support Instructional Decision Making. IES Practice Guide. NCEE 2009-4067. *National Center for Education Evaluation and Regional Assistance*.

Handley, C., & McAllister, M. (2017). Elements to promote a successful relationship between stakeholders interested in mental health promotion in schools. *Australian Journal of Advanced Nursing, The*, *34*(4), 16-25.

Hannes, K., & Lockwood, C. (2011). Pragmatism as the philosophical foundation for the Joanna Briggs meta-aggregative approach to qualitative evidence synthesis. *Journal of Advanced Nursing*, *67*(7), 1632-1642. https://doi.org/10.1111/j.1365-2648.2011.05636.x

Harden, A., & Thomas, J. (2010). Mixed methods and systematic reviews: Examples and emerging issues. Sage Publications.

Hargreaves, A. (1998). The emotional practice of teaching. *Teaching and teacher education, 14*(8), 835-854. https://doi.org/10.1016/S0742-051X(98)00025-0

Harlacher, J. E., & Siler, C. E. (2011). Factors related to successful RTI implementation. *Communique, 39*(6), 20-22.

Harris, M. E., & Fallot, R. D. (2001). *Using trauma theory to design service systems*. Jossey-Bass/Wiley.

Hart, S. N., & Hart, B. W. (2020). Toward a preferred future for school psychology. *International Handbook on Child Rights and School Psychology*, 533-556.

Hashim, N. H., & Jones, M. L. (2007). Activity theory: A framework for qualitative analysis.

Hayes, M., & Stringer, P. (2016). Introducing Farouk's process consultation group approach in Irish primary schools. *Educational Psychology in Practice, 32*(2), 145-162. https://doi.org/10.1080/02667363.2015.1129939

Heckman, J. (1990). Varieties of selection bias. *The American Economic Review, 80*(2), 313-318.

Herlitz, L., MacIntyre, H., Osborn, T., & Bonell, C. (2020). The sustainability of public health interventions in schools: A systematic review. *Implementation Science*, *15*, 1-28. https://doi.org/10.1186/s13012-019-0961-8

Hill, N. E., & Tyson, D. F. (2009). Parental involvement in middle school: a meta-analytic assessment of the strategies that promote achievement. *Developmental psychology*, *45*(3), 740. https://doi.org/10.1037/a0015362

Hogan, A., Enright, E., Stylianou, M., & McCuaig, L. (2018). Nuancing the critique of commercialisation in schools: Recognising teacher agency. *Journal of Education Policy, 33*(5), 617-631. https://doi.org/10.1080/02680939.2017.1394500

Hong, Q. N. (2018). *Revision of the Mixed Methods Appraisal Tool (MMAT): A mixed methods study*. McGill University (Canada).

Hong, Q. N., Fàbregues, S., Bartlett, G., Boardman, F., Cargo, M., Dagenais, P., & Pluye, P. (2018). The Mixed Methods Appraisal Tool (MMAT) version 2018 for information professionals and researchers. *Education For Information, 34*(4), 285-291. 10.3233/EFI-180221

Hoover-Dempsey, K. V., & Sandler, H. M. (1997). Why do parents become involved in their children's education? *Review of educational research*, *67*(1), 3-42. https://doi.org/10.3102/00346543067001003

Horner, R. H., Sugai, G., & Lewis, T. (2015). Is school-wide positive behavior support an evidence-based practice. *Journal of Positive Behavior Intervention, 8*(3), 146-154.

Hosford, S., & O'Sullivan, S. (2016). A climate for self-efficacy: the relationship between school climate and teacher efficacy for inclusion. *International Journal of Inclusive Education*, *20*(6), 604-621. https://doi.org/10.1080/13603116.2015.1102339

Houghton, C., Casey, D., Shaw, D., & Murphy, K. (2013). Rigour in qualitative case-study research. *Nurse researcher*, *20*(4). doi:10.7748/nr2013.03.20.4.12.e326

Howe, C., & Griffin, C. (2020). Is Ireland at a Crossroads of Inclusive Education? *REACH: Journal of Inclusive Education in Ireland*, *33*(1), 44-56. Retrieved from https://reachjournal.ie/index.php/reach/article/view/8

Howitt, D., & Cramer, D. (2007). *Introduction to research methods in psychology*. Pearson Education. https://doi.org/10.3102/0034654311403323

https://doi.org/10.1111/1475-6773.12117

Hydon, S., Wong, M., Langley, A. K., Stein, B. D., & Kataoka, S. H. (2015). Preventing secondary traumatic stress in educators. *Child and Adolescent Psychiatric Clinics, 24*(2), 319-333. https://doi.org/10.1016/j.chc.2014.11.003

Iizuka, C. A., Barrett, P. M., Gillies, R., Cook, C. R., & Marinovic, W. (2015). Preliminary evaluation of the friends for life program on students' and teachers' emotional states for a school in a low socio-economic status area. *Australian Journal of Teacher Education*, *40*(3), 1-20.

Ingersoll, R. M., & Strong, M. (2011). The impact of induction and mentoring programs for beginning teachers: A critical review of the research. *Review of educational research*, *81*(2), 201-233.https://doi.org/10.3102/0034654311403323

Iosim, I., Runcan, P., Dan, V., Nadolu, B., Runcan, R., & Petrescu, M. (2021). The role of supervision in preventing burnout among professionals working with people in difficulty. *International journal of environmental research and public health*, *19*(1), 160. https://doi.org/10.3390/ijerph19010160

Irish National Teachers' Organisation (INTO) (2021) Congress Resolutions, available: https://www.into.ie/events/conferences/annual-congress/congress-resolutions/

Jimerson, S. R., Graydon, K., Yuen, M., Lam, S. F., Thurm, J. M., Klueva, N., & ISPA Research Committee. (2006). The International School Psychology Survey: Data from Australia, China, Germany, Italy and Russia. *School Psychology International*, *27*(1), 5-32.

Johnson, R. B., Onwuegbuzie, A. J., & Turner, L. A. (2007). Toward a definition of mixed methods research. *Journal of Mixed Methods Research*, *1*(2), 112-133. https://doi.org/10.1177/1558689806298224

Jones, P. B., & Howarth, E. (2021). Acceptability and feasibility of early identification of mental health difficulties in primary schools: A qualitative exploration of UK school staff and parents' perceptions. *School Mental Health*, *13*, 143-159. https://doi.org/10.1007/s12310-020-09398-3

Jones, T. L., Baxter, M. A. J., & Khanduja, V. (2013). A quick guide to survey research. *The annals of the royal college of surgeons of England*, *95*(1), 5-7. https://doi.org/10.1308/003588413X13511609956372

Joyce, B., & Showers, B. (1996). Staff development as a comprehensive service organization. *Journal of Staff Development*, *17*(1), 2-6.

Kamalulil, E. N., & Panatik, S. A. (2021). A Bibliometric Analysis Of Global Research Pattern On Psychological Well-Being. *Sains Humanika*, *13*(2-3). https://doi.org/10.11113/sh.v13n2-3.1908

Kelly, L. M., & Cordeiro, M. (2020). Three principles of pragmatism for research on organizational processes. *Methodological Innovations*, *13*(2), 2059799120937242. https://doi.org/10.1177/2059799120937242

Kenny, N., McCoy, S., & Mihut, G. (2020). Special education reforms in Ireland: changing systems, changing schools. I*nternational Journal of Inclusive Education*, 1-20. https://doi.org/10.1080/13603116.2020.1821447

Kern, L., Mathur, S. R., Albrecht, S. F., Poland, S., Rozalski, M., & Skiba, R. J. (2017). The need for school-based mental health services and recommendations for implementation. *School Mental Health*, *9*, 205-217.

Kiefer, M., Haynes, K., Kasper, K., & Dickson, A. (2021). Practitioner adaptations of a social and emotional learning curriculum in international contexts. In *International Approaches to Promoting Social and Emotional Learning in Schools* (pp. 37-55). Routledge.

Kilgus, S. P., Oddleifson, C., Kittelman, A., & Rowe, D. A. (2022). Enhancing support for student mental health in schools. Teaching Exceptional Children, 55(2), 84-87. https://doi.org/10.1177/00400599221147085

Kincaid, D., Knoster, T., Harrower, J. K., Shannon, P., & Bustamante, S. (2002). Measuring the impact of positive behavior support. *Journal of Positive Behavior Interventions*, *4*(2), 109-117. https://doi.org/10.1177/109830070200400206

King, M. F., Renó, V. F., & Novo, E. M. (2014). The concept, dimensions and methods of assessment of human well-being within a socioecological context: A literature review. *Social Indicators Research*, *116*, 681-698. https://doi.org/10.1007/s11205-013-0320-0

King, R. (2022). The Utility of Pragmatism in Educational Research. *Creative Education*, *13*(10), 3153-3161. 10.4236/ce.2022.1310199

Kivunja, C., & Kuyini, A. B. (2017). Understanding and applying research paradigms in educational contexts. *International Journal of Higher Education*, *6*(5), 26-41. doi:10.5430/ijhe.v6n5p26

Knudsen, E. I., Heckman, J. J., Cameron, J. L., & Shonkoff, J. P. (2006). Economic, neurobiological, and behavioral perspectives on building America's future

workforce. *Proceedings of the National Academy of Sciences*, *103*(27), 10155-10162. https://doi.org/10.1073/pnas.0600888103

Koenig, A., Rodger, S., & Specht, J. (2018). Educator burnout and compassion fatigue: A pilot study. *Canadian Journal of School Psychology*, *33*(4), 259-278. https://doi.org/10.1177/0829573516685017

Korstjens, I., & Moser, A. (2018). Series: Practical guidance to qualitative research. Part 4: Trustworthiness and publishing. *European Journal of General Practice*, 24(1), 120-124. https://doi.org/10.1080/13814788.2017.1375092

Kratochwill, T. R., Volpiansky, P., Clements, M., & Ball, C. (2007). Professional development in implementing and sustaining multitier prevention models: Implications for response to intervention. *School Psychology Review*, *36*(4), 618-631. https://doi.org/10.1080/02796015.2007.12087921

Krause, J. M., & Lynch, B. M. (2020). Faculty and student perspectives of and experiences with TPACK in PETE. In *Physical Education Teacher Education in a Global Policy Space* (pp. 57-74). Routledge.

Krumpal, I. (2013). Determinants of social desirability bias in sensitive surveys: a literature review. *Quality & Quantity*, *47*(4), 2025-2047. https://doi.org/10.1007/s11135-011-9640-9

Kuutti, K. (1996). Activity theory as a potential framework for human-computer interaction research. *Context and consciousness: Activity theory and human-computer interaction*, *1744*, 9-22. https://doi.org/10.7551/mitpress/2137.003.0006

LaDonna, K. A., Artino Jr, A. R., & Balmer, D. F. (2021). Beyond the guise of saturation: rigor and qualitative interview data. *Journal of Graduate Medical Education, 13*(5), 607-611. https://doi.org/10.4300/JGME-D-21-00752.1

Lambert, N. M., Hylander, I., & Sandoval, J. H. (Eds.). (2004). *Consultee-centered consultation: Improving the quality of professional services in schools and community organizations*. Routledge.

Lane, K. L., Buckman, M. M., Oakes, W. P., & Menzies, H. (2020). Tiered systems and inclusion: Potential benefits, clarifications, and considerations. *On Educational Inclusion* (pp. 85-106). Routledge.

Lane, K. L., Oakes, W. P., & Menzies, H. M. (2014). Comprehensive, integrated, three-tiered models of prevention: Why does my school—and district—need an integrated approach to meet students' academic, behavioral, and social needs?. *Preventing School Failure: Alternative Education for Children and Youth*, *58*(3), 121-128. https://doi.org/10.1080/1045988X.2014.893977

Langemeyer, I., & Roth, W. M. (2006). Is cultural-historical activity theory threatened to fall short of its own principles and possibilities as a dialectical social science?. *Outlines. Critical Practice Studies*, *8*(2), 20-42. https://doi.org/10.7146/ocps.v8i2.2090

Lavian, R. (2015). Masters of weaving: The complex role of special education teachers. *Teachers and Teaching*, *21*(1), 103-126. https://doi.org/10.1080/13540602.2014.928123

Leadbetter, J. (2008). Activity theory and the professional practice of educational psychology.

Lenth, R. V. (2001). Some practical guidelines for effective sample size determination. *The American Statistician*, *55*(3), 187-193. https://doi.org/10.1198/000313001317098149

Leventhal, K. S., Andrew, G., Collins, C. S., DeMaria, L., Singh, H. S., & Leventhal, S. (2018). Training School Teachers to Promote Mental and Social Well-Being in Low and Middle Income Countries: Lessons to Facilitate Scale-Up from a Participatory Action Research Trial of" Youth First" in India. International Journal of Emotional Education, 10(2), 42-58.

Leventhal, T., & Brooks-Gunn, J. (2001). Changing neighborhoods and child well-being: Understanding how children may be affected in the coming century. *Advances in Life Course Research, 6,* 263-301. https://doi.org/10.1016/S1040-2608(01)80013-7

Liberati, A., Altman, D. G., Tetzlaff, J., Mulrow, C., Gøtzsche, P. C., Ioannidis, J. P., & Moher, D. (2009). The PRISMA statement for reporting systematic reviews and meta-analyses of studies that evaluate health care interventions: explanation and elaboration. *Annals of internal medicine, 151*(4), W-65. https://doi.org/10.7326/0003-4819-151-4-200908180-00136

Liebowitz, D. D., & Porter, L. (2019). The effect of principal behaviors on student, teacher, and school outcomes: A systematic review and meta-analysis of the empirical literature. *Review of Educational Research, 89*(5), 785-827. https://doi.org/10.3102/0034654319866133

Lincoln, Y.S. and Guba, E.G. (1985) Naturalistic Inquiry. SAGE, Thousand Oaks, 289-331. http://dx.doi.org/10.1016/0147-1767(85)90062-8Richards, M., & Huppert, F. A. (2011). Do positive children become positive adults? Evidence from a longitudinal birth cohort study. *The Journal of Positive Psychology, 6*(1), 75–87. https://doi.org/10.1080/17439760.2011.536655

Liu, M., & Wang, Y. (2015). Data collection mode effect on feeling thermometer questions: A comparison of face-to-face and Web surveys. *Computers in Human Behavior, 48,* 212-218. https://doi.org/10.1016/j.chb.2015.01.057

Lockwood, C., Munn, Z., & Porritt, K. (2015). Qualitative research synthesis: Methodological guidance for systematic reviewers utilizing meta-aggregation. *JBI Evidence Implementation*, *13*(3), 179-187.

Loftus-Rattan, S. M., Wrightington, M., Furey, J., & Case, J. (2023). Multi-tiered system of supports: An ecological approach to school psychology service delivery. *Teaching of Psychology*, *50*(1), 77-85.

Lupien, S. J., Maheu, F., Tu, M., Fiocco, A., & Schramek, T. E. (2007). The effects of stress and stress hormones on human cognition: Implications for the field of brain and cognition. *Brain and Cognition*, *65*(3), 209-237. https://doi.org/10.1016/j.bandc.2007.02.007

Luthar, S. S., Cicchetti, D., & Becker, B. (2000). The construct of resilience: A critical evaluation and guidelines for future work. *Child Development, 71*(3), 543-562. https://doi.org/10.1111/1467-8624.00164

Malterud, K., Siersma, V. D., & Guassora, A. D. (2016). Sample size in qualitative interview studies: guided by information power. *Qualitative Health Research*, *26*(13), 1753-1760. https://doi.org/10.1177/1049732315617444

Margherio, S. M., Evans, S. W., & Owens, J. S. (2019). Universal screening in middle and high schools: Who falls through the cracks?. *School Psychology*, *34*(6), 591. https://doi.org/10.1037/spq0000337

Martínez, L. (2016). Teachers' voices on social emotional learning: Identifying the conditions that make implementation possible. *International Journal of Emotional Education. 8*(2), 6-24.

Masten, A. S. (2014). Global perspectives on resilience in children and youth. *Child Development, 85*(1), 6-20. https://doi.org/10.1111/cdev.12205

McCoy, S., Banks, J., & Shevlin, M. (2012). School matters: How context influences the identification of different types of special educational needs. Irish Educational Studies, 31(2), 119-138. https://doi.org/10.1080/03323315.2012.669568

McCoy, S., Smyth, E., & Banks., J. (2012). The Primary Classroom: Insights from the Growing up in Ireland Study. Dublin: National Council for Curriculum and Assessment.

McIntosh, K. (2023). Improving School Climate within Multi-Tiered Systems of Support Kent McIntosh, Ambra L. Green, and Nikole Hollins-Sims. *Creating an Inclusive School Climate: A School Psychology Model for Supporting Marginalized Students*.

McIntosh, K., & Goodman, S. (2016). *Integrated multi-tiered systems of support: Blending RTI and PBIS*. Guilford Publications.

McIntosh, K., Mercer, S. H., Hume, A. E., Frank, J. L., Turri, M. G., & Mathews, S. (2013). Factors related to sustained implementation of schoolwide positive behavior support. *Exceptional children*, *79*(3).

McKim, C. (2023). Meaningful member-checking: a structured approach to member-checking. *American Journal of Qualitative Research*, *7*(2), 41-52. https://doi.org/10.29333/ajqr/12973

Menzies, H. M., Oakes, W. P., Lane, K. L., Royer, D. J., & Buckman, M. M. (2022). Understanding Teachers' Adoption of a Comprehensive Reform Program. *Leadership and Policy in Schools, 1-16.* doi.org/10.1080/15700763.2022.2081213

Menzies, H. M., Oakes, W. P., Lane, K. L., Royer, D. J., Cantwell, E. D., Common, E. A., & Buckman, M. (2021). Elementary teachers' perceptions of a comprehensive, integrated, three-tiered model of prevention. *Remedial and Special Education*, *42*(4), 207-219. doi:10.1177/0741932519896860

Mertens, D. M. (2015). Mixed methods and wicked problems. *Journal of Mixed Methods Research*, *9*(1), 3-6. https://doi.org/10.1177/1558689814562944

Mertens, D. M. (2023). *Research and evaluation in education and psychology: Integrating diversity with quantitative, qualitative, and mixed methods*. Sage publications.

Miliffe, A. (2016). An Insight into the Well-being of Primary School-Aged Children. *Kairaranga*, *17*(1), 26-31. https://doi.org/10.54322/kairaranga.v17i1.202

Mitchell, C., McLanahan, S., Notterman, D., Hobcraft, J., Brooks-Gunn, J., & Garfinkel, I. (2015). Family structure instability, genetic sensitivity, and child well-being. *American Journal of Sociology*, *120*(4), 1195-1225. https://doi.org/10.1086/680681

Moran, E., Sloan, S., Walsh, E., & Taylor, L. (2024). Exploring restorative practices: Teachers' experiences with early adolescents. *International Journal of Educational Research Open*, *6*, 100323. https://doi.org/10.1016/j.ijedro.2024.100323

Morris, J. E., Lummis, G. W., Lock, G., Ferguson, C., Hill, S., & Nykiel, A. (2020). The role of leadership in establishing a positive staff culture in a secondary school. *Educational Management Administration & Leadership*, *48*(5), 802-820. https://doi.org/10.1177/1741143219864937

Mosadeghrad, A. M., & Ansarian, M. (2014). Why do organisational change programmes fail?. *International Journal of Strategic Change Management*, *5*(3), 189-218. https://doi.org/10.1504/IJSCM.2014.064460

Moss, S. (1999). Assessment of mental health problems. *Tizard Learning Disability Review*, *4*(2), 14-19.

Murphy, E., & Rodriguez-Manzanares, M. A. (2008). Using activity theory and its principle of contradictions to guide research in educational technology. *Australasian Journal of Educational Technology*, *24*(4). https://doi.org/10.14742/ajet.1203

Mulvany, J. (2000). Disability, impairment or illness? The relevance of the social model of disability to the study of mental disorder. *Sociology of Health & Illness*, *22*(5), 582-601.

Mwanza, D. (2002). *Towards an activity-oriented design method for HCI research and practice*. Open University (United Kingdom).

National Association of School Psychologists. (2017). Shortages in school psychology: Challenges to meeting the growing needs of US students and schools. *Research Summary*.

National Association of State Directors of Special Education. (2006). Response to Intervention: Policy considerations and implementation. Alexandria, VA: NASDSE, Inc.

National Council for Curriculum and Assessment (2008). Primary Curriculum Review, Phase 2 Final Report. NCCA: Dublin. Retrieved from: https://ncca.ie/media/2267/primary_curriculum_review-_phase_2_final_report_with_recommendations.pdf

National Council for Curriculum and Assessment. (NCCA; 2023). *Primary Curriculum Framework for Primary and Special Schools.* Dublin: NCCA Retrieved from:

https://www.curriculumonline.ie/getmedia/84747851-0581-431b-b4d7-dc6ee850883e/2023-Primary-Framework-ENG-screen.pdf

Neilsen, R. (2009). *Travellers' tales: The expatriate English language teacher in the new global culture*. Cambridge Scholars Publishing.

NICE Guidelines. (2014). *Reviewing Evidence.* https://www.nice.org.uk/process/pmg20/chapter/reviewing-evidence

Ní Chorcora, E., & Swords, L. (2022). Mental health literacy and help-giving responses of Irish primary school teachers. *Irish Educational Studies*, *41*(4), 735-751. https://doi.org/10.1080/03323315.2021.1899029

Nohilly, M., & Tynan, F. (2019). Well-Being: Bridging the Gap between the Language of Policy and the Culture of Schools. *International Journal of Education Policy and Leadership*, *15*(12), n12. http://journals.sfu.ca/ijepl/index.php/ijepl/article/view/886 doi: 10.22230/ijepl.2019v15n12a886

Nohilly, M., & Tynan, F. (2022). The evolution of wellbeing in educational policy in Ireland: Towards an interdisciplinary approach. *International Journal of Wellbeing*, *12*(1), 42-53. https://doi.org/10.5502/ijw.v12i1.1663

Nohilly, M., O'Toole, V., & Collins, B. (2023). The impact of primary school closures in Ireland resulting from the coronavirus pandemic on principal and teacher wellbeing. *Irish Journal of Sociology*, *31*(3), 324-353. https://doi-org.libraryproxy.mic.ul.ie/10.1177/07916035231200398

Notley, C. (2021). Delivering mental health support within schools and colleges–a thematic synthesis of barriers and facilitators to implementation of indicated psychological interventions for adolescents. *Child and Adolescent Mental Health*, *26*(1), 34-46.

Nowell, L. S., Norris, J. M., White, D. E., & Moules, N. J. (2017). Thematic analysis: Striving to meet the trustworthiness criteria. *International Journal of Qualitative Methods*, *16*(1), 1609406917733847. https://doi.org/10.1177/1609406917733847

Nugent, M., Jones, V., McElroy, D., Peelo, M., Thornton, T., & Tierney, T. (2014). Consulting with groups of teachers. Evaluation of a pilot project in Ireland. *Educational Psychology in Practice*, *30*(3), 255-271. https://doi.org/10.1080/02667363.2014.919440

Nussbaumer, D. (2012). An overview of Cultural-Historical activity theory (CHAT) use in classroom research 2000 to 2009. *Educational Review*, *64*(1), 37-55. https://doi.org/10.1080/00131911.2011.553947

O'Farrell, P., Wilson, C., & Shiel, G. (2023). Teachers' perceptions of the barriers to assessment of mental health in schools with implications for educational policy: A systematic review. *British Journal of Educational Psychology*, *93*(1), 262-282. https://doi.org/10.1111/bjep.12553

O'Gorman, E., & Drudy, S. (2010). Addressing the professional development needs of teachers working in the area of special education/inclusion in mainstream schools in Ireland. *Journal of Research in Special Educational Needs*, *10*, 157-167. https://doi.org/10.1111/j.1471-3802.2010.01161.x

O'Farrell, P., & Kinsella, W. (2018). Research exploring parents', teachers' and educational psychologists' perceptions of consultation in a changing Irish context. *Educational Psychology in Practice*, *34*(3), 315-328. https://doi.org/10.1080/02667363.2018.1461612

O'Halloran, T., Symonds, J., Bhreathnach, L. L., Sloan, S., Devine, D., Martinez Sainz, G., & Davies, A. (2023). How School-Based Wellbeing Interventions, Socioeconomic Status,

and Gender Impact Anxiety Development in Middle Childhood. *Education Sciences, 13*(10), 994. https://doi.org/10.3390/educsci13100994

O'Higgins, S., Galvin, G., Kennedy, C., Nic Gabhainn, S., & Barry, M. (2013). The implementation of SPHE at post-primary school level: A case study approach. *Health Promotion Research Centre. Department of health promotion. National university of Ireland*.

OECD. (2017). PISA 2015 Results (Volume III): Students' Well-Being. Paris: OECD Publishing.

Office for Standards in Education (OFSTED). (2008). How Well New Teachers Are Prepared to Teach Pupils with Learning Difficulties and/or Disabilities.

Olsson, C. A., McGee, R., Nada-Raja, S., & Williams, S. M. (2013). A 32-year longitudinal study of child and adolescent pathways to well-being in adulthood. *Journal of Happiness Studies, 14*, 1069-1083. https://doi.org/10.1007/s10902-012-9369-8

Onwuegbuzie, A., & Collins, K. (2017). The Role of Sampling in Mixed Methods-Research. *Kölner Zeitschrift für Soziologie und Sozialpsychologie (KZfSS), 69*. 10.1007/s11577-017-0455-0

Organisation for Economic Co-operation and Development (OECD) (2005) *Teachers Matter: Attracting, Developing and Retaining Effective Teachers*, Paris: OECD Publishing.

Ormiston, H. E., Nygaard, M. A., & Apgar, S. (2022). A systematic review of secondary traumatic stress and compassion fatigue in teachers. *School Mental Health, 14*(4), 802-817. https://doi.org/10.1007/s12310-022-09525-2

Palinkas, L. A. (2014). Qualitative and mixed methods in mental health services and implementation research. *Journal of Clinical Child & Adolescent Psychology, 43(6),* 851-861. https://doi.org/10.1080/15374416.2014.910791

Patrick, H., Anderman, L. H., Bruening, P. S., & Duffin, L. C. (2011). The role of educational psychology in teacher education: Three challenges for educational psychologists. *Educational Psychologist, 46*(2), 71-83. https://doi.org/10.1080/00461520.2011.538648

Paulus, F. W., Ohmann, S., & Popow, C. (2016). Practitioner review: School-based interventions in child mental health. *Journal of Child Psychology and Psychiatry, 57*(12), 1337-1359. https://doi.org/10.1111/jcpp.12584

Pavri, S. (2010). Response to intervention in the social-emotional-behavioral domain: Perspectives from urban schools. *Teaching Exceptional Children Plus, 6*(3), n3. Retrieved from http://escholarship.bc.edu/education/tecplus/vol6/iss3/art4

Pearson, A. (2004). Balancing the evidence: Incorporating the synthesis of qualitative data into systematic reviews. *JBI Evidence Implementation*, *2*(2), 45-64.

Penedo, F. J., & Dahn, J. R. (2005). Exercise and well-being: a review of mental and physical health benefits associated with physical activity. *Current Opinion in Psychiatry, 18*(2), 189-193.

Pinals, D. A., Hovermale, L., Mauch, D., & Anacker, L. (2022). Persons with intellectual and developmental disabilities in the mental health system: Part 1. Clinical considerations. *Psychiatric Services, 73*(3), 313-320. https://doi.org/10.1176/appi.ps.201900504

Polit, D. F., & Beck, C. T. (2010). Generalization in quantitative and qualitative research: Myths and strategies. *International journal of nursing studies*, *47*(11), 1451-1458. https://doi.org/10.1016/j.ijnurstu.2010.06.004

Ponterotto, J. G. (2006). Brief note on the origins, evolution, and meaning of the qualitative research concept thick description. *The Qualitative Report, 11*(3), 538-549.

practitioners, 197-217.

Powers, S. I., Hauser, S. T., & Kilner, L. A. (1989). Adolescent mental health. *American psychologist*, *44*(2), 200.

Pratt, S. M., Imbody, S. M., Wolf, L. D., & Patterson, A. L. (2017). Co-planning in co-teaching: A practical solution. *Intervention in School and Clinic*, *52*(4), 243-249. https://doi.org/10.1177/1053451216659474

Psychological Society of Ireland. (2019). *Code of Professional Ethics*. https://www.psychologicalsociety.ie/footer/Code-of-Ethics

Reardon, T., Harvey, K., Baranowska, M., O'brien, D., Smith, L., & Creswell, C. (2017). What do parents perceive are the barriers and facilitators to accessing psychological treatment for mental health problems in children and adolescents? A systematic review of qualitative and quantitative studies. *European child & adolescent psychiatry, 26*, 623-647. https://doi.org/10.1007/s00787-016-0930-6

Reed, J., Procter, S., & Murray, S. (1996). A sampling strategy for qualitative research. *Nurse Researcher*, *3*(4), 52-68. https://doi.org/10.7748/nr.3.4.52.s6

Reinke, W. M., Stormont, M., Herman, K. C., Puri, R., & Goel, N. (2011). Supporting children's mental health in schools: Teacher perceptions of needs, roles, and barriers. *School Psychology Quarterly*, *26*(1), 1. https://doi.org/10.1037/a0022714

Rix, J., Sheehy, K., Fletcher-Campbell, F., & Crisp, M. (2013). Continuum of education provision for children with special educational needs: Review of international policies and practices. https://oro.open.ac.uk/35012/

Rogers, C. R. (1952). A personal formulation of client-centered therapy. *Marriage and Family Living, 14*(4), 341-361. https://doi.org/10.2307/348729

Romer, N., Green, A. L., & Cox, K. E. (2018). Educator perceptions of preparedness and professional development for implementation of evidence-based practices within a multi-tiered system of supports. *School Mental Health, 10,* 122-133. doi.org/10.1007/s12310-017-9234-3

Romer, N., von der Embse, N., Eklund, K., Kilgus, S., Perales, K., Splett, J. W., Sudlo, S., Wheeler, D., (2020). *Best Practices in Social, Emotional, and Behavioral Screening: An Implementation Guide*. Version 2.0. Retrieved from smhcollaborative.org/universalscreening

Rose, R., Shevlin, M., Winter, E., & O'Raw, P. (2011). Investigating inclusive education in Ireland: constructing case studies for the identification of commonalities and exceptionalities *European Educational Research Conference 2011 (ECER 2011): Urban Education*.

Rose, R., Shevlin, M., Winter, E., & O'Raw, P. (2015). Project IRIS-inclusive research in Irish schools: A longitudinal study of the experiences of and outcomes for children with special educational needs (SEN) in Irish schools.

Ross, C., Bathurst, J., & Jarden, A. (2012). Well-being and academic success. *Open Learning for an Open World: Reflections on Open and Distance Learning and Teaching at the Open Polytechnic of New Zealand*.

Ross, L. E., Vigod, S., Wishart, J., Waese, M., Spence, J. D., Oliver, J., & Shields, R. (2015). Barriers and facilitators to primary care for people with mental health and/or substance use issues: a qualitative study. *BMC Family Practice*, *16*, 1-13. https://doi.org/10.1186/s12875-015-0353-3

Roth, W. M. (2007). The ethico-moral nature of identity: Prolegomena to the development of third-generation cultural-historical activity theory. *International Journal of Educational Research*, *46*(1-2), 83-93. https://doi.org/10.1016/j.ijer.2007.07.008

Roth, W. M., & Lee, Y. J. (2007). "Vygotsky's neglected legacy": Cultural-historical activity theory. *Review of Educational Research*, *77*(2), 186-232. https://doi.org/10.3102/0034654306298273

Rowan, B., Correnti, R., Miller, R. J., & Camburn, E. M. (2009). School improvement by design: Lessons from a study of comprehensive school reform programs. *Consortium for Policy Research in Education*.

Rubin, H. J., & Rubin, I. S. (2011). *Qualitative interviewing: The art of hearing data*. Sage.

Rüsch, N., Angermeyer, M. C., & Corrigan, P. W. (2005). Mental illness stigma: Concepts, consequences, and initiatives to reduce stigma. *European Psychiatry*, 20(8), 529-539.

Ruttledge, R., Devitt, E., Greene, G., Mullany, M., Charles, E., Frehill, J., & Moriarty, M. (2016). A randomised controlled trial of the FRIENDS for Life emotional resilience programme delivered by teachers in Irish primary schools. *Educational & Child Psychology*, *33*(2), 69-89.

Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology, 57*(6), 1069-1081. https://doi.org/10.1037/0022-3514.57.6.1069

Sadler, D. R. (1989). Formative assessment and the design of instructional systems. *Instructional Science, 18*(2), 119-144. https://doi.org/10.1007/BF00117714

Sandelowski, M., Voils, C. I., Leeman, J., & Crandell, J. L. (2012). Mapping the mixed methods–mixed research synthesis terrain. *Journal of Mixed Methods Research, 6*(4), 317-331. https://doi.org/10.1177/1558689811427913

Scanlon, D., & Connolly, C. (2021). Teacher agency and learner agency in teaching and learning a new school subject, Leaving Certificate Computer Science, in Ireland: Considerations for teacher education. *Computers & Education, 174*, 104291. https://doi.org/10.1016/j.compedu.2021.104291

Schofield, G., & Beek, M. (2005). Risk and resilience in long-term foster-care. *British Journal of Social Work, 35*(8), 1283-1301. https://doi.org/10.1093/bjsw/bch213

Schreier, M. (2018). Sampling and generalization. *The SAGE Handbook of Qualitative Data Collection*, 84-97.

Seidman, I. (2006). *Interviewing as qualitative research: A guide for researchers in education and the social sciences*. Teachers college press.

Seligman, M. E. P. (2011). Flourish: A visionary new understanding of happiness and well-being. Free Press.

Shelemy, L., Harvey, K., & Waite, P. (2019). Secondary school teachers' experiences of supporting mental health. *The Journal of Mental Health Training, Education and Practice, 14*(5), 372-383.https://doi.org/10.1108/JMHTEP-10-2018-0056

Shevlin, M., Winter, E., & Flynn, P. (2013). Developing inclusive practice: Teacher perceptions of opportunities and constraints in the Republic of Ireland. *International Journal of Inclusive Education, 17*(10), 1119-1133. doi.org/10.1080/13603116.2012.742143

Shonkoff, J. P., Garner, A. S., Committee on Psychosocial Aspects of Child and Family Health, Committee on Early Childhood, Adoption, and Dependent Care, and Section on Developmental and Behavioral Pediatrics

Siegel, B. S., Dobbins, M. I., Earls, M. F., & Wood, D. L. (2012). The lifelong effects of early childhood adversity and toxic stress. *Pediatrics*, *129*(1), e232-e246. https://doi.org/10.1542/peds.2011-2663

Sifers, S. K., Puddy, R. W., Warren, J. S., & Roberts, M. C. (2002). Reporting of demographics, methodology, and ethical procedures in journals in pediatric and child psychology. *Journal of Pediatric Psychology*, *27*(1), 19-25. https://doi.org/10.1093/jpepsy/27.1.19

Silverio, S. A., Sheen, K. S., Bramante, A., Knighting, K., Koops, T. U., Montgomery, E., & Sandall, J. (2022). Sensitive, challenging, and difficult topics: Experiences and practical considerations for qualitative researchers. *International Journal of Qualitative Methods*, *21*, 16094069221124739. https://doi.org/10.1177/16094069221124739

Simons, G., & Baldwin, D. S. (2021). A critical review of the definition of 'wellbeing' for doctors and their patients in a post Covid-19 era. *International Journal of Social Psychiatry*, *67*(8), 984-991. https://doi.org/10.1177/00207640211032259

Simonsen, B., Myers, D., & Briere III, D. E. (2011). Comparing a behavioral check-in/check-out (CICO) intervention to standard practice in an urban middle school setting using an experimental group design. *Journal of Positive Behavior Interventions*, *13*(1), 31-48. https://doi.org/10.1177/1098300709359026

Singer, E., Von Thurn, D. R., & Miller, E. R. (1995). Confidentiality assurances and response: A quantitative review of the experimental literature. *Public Opinion Quarterly, 59*(1), 66-77. https://doi.org/10.1086/269458

Skaalvik, E. M., & Skaalvik, S. (2007). Dimensions of teacher self-efficacy and relations with strain factors, perceived collective teacher efficacy, and teacher burnout. *Journal of Wducational Psychology, 99*(3), 611. https://doi.org/10.1037/0022-0663.99.3.611

Skaalvik, E. M., & Skaalvik, S. (2017). Teacher stress and teacher self-efficacy: Relations and consequences. *Educator Stress: An Occupational Health Perspective*, 101-125. https://doi.org/10.1007/978-3-319-53053-6_5

Skrzypek, C., Bascug, E. W., Ball, A., Kim, W., & Elze, D. (2020). In their own words: Student perceptions of restorative practices. *Children & Schools*, *42*(4), 245-253. https://doi.org/10.1093/cs/cdaa011

Sloan, S., Winter, K., Connolly, P., & Gildea, A. (2020). The effectiveness of Nurture Groups in improving outcomes for young children with social, emotional and behavioural difficulties in primary schools: An evaluation of Nurture Group provision in Northern Ireland. *Children and Youth Services Review*, *108*, 104619. https://doi.org/10.1016/j.childyouth.2019.104619

Smith, T. E., Sheridan, S. M., Kim, E. M., Park, S., & Beretvas, S. N. (2020). The effects of family-school partnership interventions on academic and social-emotional functioning: A meta-analysis exploring what works for whom. *Educational Psychology Review*, *32*, 511-544.

Snyder, E., & Witmer, S. E. (2024). Including English learners in multi-tiered systems of support (MTSS) in reading: A CHAT-informed mixed methods investigation. *Preventing School*

Failure: Alternative Education for Children and Youth, 1-11.https://doi.org/10.1080/1045988X.2024.2302145

Soneson, E., Howarth, E., Ford, T., Humphrey, A., Jones, P. B., Thompson Coon, J., & Anderson, J. K. (2020). Feasibility of school-based identification of children and adolescents experiencing, or at-risk of developing, mental health difficulties: A systematic review. *Prevention science, 21*, 581-603. Ihttps://doi.org/10.1007/s11121-020-01095-6

Speelman, C. P., & McGann, M. (2020). Statements about the pervasiveness of behavior require data about the pervasiveness of behavior. *Frontiers in Psychology*, *11*, 594675. https://doi.org/10.3389/fpsyg.2020.594675

Splett, J. W., Perales, K., Miller, E., Hartley, S. N., Wandersman, A., Halliday, C. A., & Weist, M. D. (2022). Using readiness to understand implementation challenges in school mental health research. *Journal of Community Psychology, 50(7),* 3101-3121.

Sroufe, L. A. (2005). Attachment and development: A prospective, longitudinal study from birth to adulthood. *Attachment & Human Development*, *7*(4), 349-367. https://doi.org/10.1080/14616730500365928

Statham, J., & Chase, E. (2010). Childhood wellbeing: A brief overview. *Loughborough: Childhood Wellbeing Research Centre*.

Stern, C., Lizarondo, L., Carrier, J., Godfrey, C., Rieger, K., Salmond, S., & Loveday, H. (2021). Methodological guidance for the conduct of mixed methods systematic reviews. *JBI Evidence Implementation*, *19*(2), 120-129. 10.1097/XEB.0000000000000282

Stetsenko, A. (2020). Critical Challenges in Cultural-Historical Activity Theory: The Urgency of Agency. *Cultural-Historical Psychology*, *16*(2). DOI: https://doi.org/10.17759/chp.2020160202

Stewart-Brown, S. (2013). Defining and measuring mental health and wellbeing. *Public mental Health: Global Perspectives*, 33-42.

Stewart, T., & Suldo, S. (2011). Relationships between social support sources and early adolescents' mental health: The moderating effect of student achievement level. *Psychology in the Schools*, *48*(10), 1016-1033. https://doi.org/10.1002/pits.20607

Stodden, D. F., Pesce, C., Zarrett, N., Tomporowski, P., Ben-Soussan, T. D., Brian, A.,. & Weist, M. D. (2023). Holistic Functioning from a Developmental Perspective: A New Synthesis with a Focus on a Multi-tiered System Support Structure. *Clinical Child and Family Psychology Review*, *26*(2), 343-361. https://doi.org/10.1007/s10567-023-00428-5

Stoeber, J., & Rennert, D. (2008). Perfectionism in school teachers: Relations with stress appraisals, coping styles, and burnout. *Anxiety, Stress, and Coping*, *21*(1), 37-53. https://doi.org/10.1080/10615800701742461

Substance Abuse and Mental Health Services Administration (2014a*). SAMHSA's concept of trauma and guidance for a trauma-informed approach (HHS Publication No. SMA 14–4884)*. Retrieved from https://ncsacw.samhsa.gov/userfiles/files/SAMHSA_Trauma.pdf

Substance Abuse and Mental Health Services Administration (2019). *Ready, Set, Go, Review: Screening for Behavioral Health Risk in Schools.* https://www.samhsa.gov/sites/default/files/ready-set-go-review-mh-screening-schools.pdf

Sugai, G., & Horner, R. H. (2009). Responsiveness-to-intervention and school-wide positive behavior supports: Integration of multi-tiered system approaches. *Exceptionality, 17*(4), 223-237.V https://doi.org/10.1080/09362830903235375

Taherdoost, H. (2016). Sampling methods in research methodology; how to choose a sampling technique for research. http://dx.doi.org/10.2139/ssrn.3205035

Tashakkori, A., & Teddlie, C. (2003). Issues and dilemmas in teaching research methods courses in social and behavioural sciences: US perspective. *International journal of social research methodology*, *6*(1), 61-77. https://doi.org/10.1080/13645570305055

Tashakkori, A., & Teddlie, C. (2010). Putting the human back in ‘‘human research methodology’’: The researcher in mixed methods research. *Journal of Mixed Methods Research*, *4*(4), 271-277. https://doi.org/10.1177/1558689810382532

Teddlie, C., & Tashakkori, A. (2009). *Foundations of mixed methods research: Integrating quantitative and qualitative approaches in the social and behavioral sciences*. Sage.

Teddlie, C., & Tashakkori, A. (2011). Mixed methods research. *The Sage handbook of qualitative research*, *4*, 285-300.

Thewes, B., Rietjens, J. A., van den Berg, S. W., Compen, F. R., Abrahams, H., Poort, H., & Prins, J. B. (2018). One way or another: The opportunities and pitfalls of self-referral and consecutive sampling as recruitment strategies for psycho-oncology intervention trials. *Psycho-oncology*, *27*(8), 2056. 10.1002/pon.4780

Thornicroft, G., Deb, T., & Henderson, C. (2016). Community mental health care worldwide: current status and further developments. *World Psychiatry*, *15*(3), 276-286.

Travers, J., Balfe, T., Butler, C., Day, T., McDaid, R., O'Donnell, M., & Prunty, A. (2010). Addressing barriers and challenges to inclusive education in Irish schools.

TUSLA. (2019). *Child and Youth Participation Strategy 2019- 2023* Dublin

UNESCO (2005). *Guidelines for inclusion: Ensuring access to education for all*. Unesco.

United Nations Committee on the Rights of Persons with Disabilities. (2006) Convention on the Rights of Persons with Disabilities .General comment No. 4, Article 24: Right to inclusive education, (2016). https://www.refworld.org/docid/57c977e34.html

United Nations General Assembly. (*1989*). *Adoption of a convention on the rights of the child*. In. New York: United Nations.

United Nations High Commission for Refugees (UNHCR). (2016). Refugee children: Guidelines on protection and care. Geneva: United Nations. Retrieved from www.unhcr.org/uk

VanTieghem, M. R., & Tottenham, N. (2018). Neurobiological programming of early life stress: functional development of amygdala-prefrontal circuitry and vulnerability for stress-related psychopathology. *Behavioral neurobiology of PTSD*, 117-136. https://doi.org/10.1007/7854_2016_42

Vercambre, M. N., Brosselin, P., Gilbert, F., Nerrière, E., & Kovess-Masféty, V. (2009). Individual and contextual covariates of burnout: a cross-sectional nationwide study of French teachers. *BMC Public Health*, *9*, 1-12. https://doi.org/10.1186/1471-2458-9-333

Vygotsky, L. S. (1987). Thinking and speech. *The collected works of LS Vygotsky*, *1*, 39-285.

Wade, C. H., Wilfond, B. S., & McBride, C. M. (2010). Effects of genetic risk information on children's psychosocial wellbeing: a systematic review of the literature. *Genetics in Medicine*, *12*(6), 317-326. https://doi.org/10.1097/GIM.0b013e3181de695c

Wagner, P. (2000). Consultation: Developing a comprehensive approach to service delivery. *Educational Psychology in Practice*, *16*(1), 9-18.https://doi.org/10.1080/026673600115229

Wandersman, A., Duffy, J., Flaspohler, P., Noonan, R., Lubell, K., Stillman, L., & Saul, J. (2008). Bridging the gap between prevention research and practice: the interactive systems framework for dissemination and implementation. *American journal of community psychology*, *41*, 171-181.

Walker, H. M., Kavanagh, K., Stiller, B., Golly, A., Severson, H. H., & Feil, E. G. (1998). First step to success: An early intervention approach for preventing school antisocial behavior. *Journal of Emotional and Behavioral Disorders*, *6*(2), 66-80. https://doi.org/10.1177/106342669800600201

Walsh, S. D., Harel-Fisch, Y., & Fogel-Grinvald, H. (2010). Parents, teachers and peer relations as predictors of risk behaviors and mental well-being among immigrant and Israeli born adolescents. *Social science & medicine*, *70*(7), 976-984. https://doi.org/10.1016/j.socscimed.2009.12.010

Warburton, D. E., Nicol, C. W., & Bredin, S. S. (2006). Health benefits of physical activity: the evidence. *Cmaj*, *174*(6), 801-809. https://doi.org/10.1503/cmaj.051351

Weiner, B. J. (2009). A theory of organizational readiness for change. *Implementation Science*, *4*, 1-9. https://doi.org/10.1186/1748-5908-4-67

Weist, M. D., & Evans, S. W. (2005). Expanded school mental health: Challenges and opportunities in an emerging field. *Journal of Youth and Adolescence*, *34*, 3-6. https://doi.org/10.1007/s10964-005-1330-2

Weist, M. D., Lever, N. A., Bradshaw, C. P., & Owens, J. S. (Eds.). (2014). Handbook of school mental health: Research, training, practice, and policy. https://doi.org/10.1177/0143034317695379

Weist, M. D., Splett, J. W., Halliday, C. A., Gage, N. A., Seaman, M. A., Perkins, K. A., & DiStefano, C. (2022). A randomized controlled trial on the interconnected systems framework for school mental health and PBIS: Focus on proximal variables and school discipline. *Journal of School Psychology*, *94*, 49-65. https://doi.org/10.1016/j.jsp.2022.08.002

Weston, L. E., Krein, S. L., & Harrod, M. (2021). Using observation to better understand the healthcare context. *Qualitative Research in Medicine & Healthcare*, *5*(3). 10.4081/qrmh.2021.9821

Wichstrøm, L., Berg-Nielsen, T. S., Angold, A., Egger, H. L., Solheim, E., & Sveen, T. H. (2012). Prevalence of psychiatric disorders in preschoolers. *Journal of child psychology and psychiatry*, *53*(6), 695-705.

Wigelsworth, M., Squires, G., Birchinall, E., Kalambouka, A., Lendrum, A., Black, L., Troncoso, P., Santos, J., Ashworth, E., & Britteon, P. (2018). FRIENDS for life: Evaluation report and executive summary, University of Manchester. https://research.manchester.ac.uk/files/82889819/FRIENDS.pdf

Wiggall, S., & Boccellari, A. (2017). The UC San Francisco Trauma Recovery Center Manual: A model for removing barriers to care and transforming services for survivors of violent crime.

Winter, E., & O'Raw, P. (2010). Literature review of the principles and practices relating to inclusive education for children with special educational needs. *National Council for Special Education. Trim, Northern Ireland*.

Winzer, M. A. (2009). *From integration to inclusion: A history of special education in the 20th century*. Gallaudet University Press.

Wood, N., Hardy, R., Bann, D., Gale, C., & Stafford, M. (2021). Childhood correlates of adult positive mental well-being in three British longitudinal studies. *J Epidemiol Community Health, 75*(2), 177-184. https://doi.org/10.1136/jech-2019-213709

Woolfson, R. C., Harker, M., Lowe, D., Shields, M., Banks, M., Campbell, L., & Ferguson, E. (2006). Consulting about consulting: Young people's views of consultation. *Educational Psychology in Practice, 22*(4), 337-353. https://doi.org/10.1080/02667360600999468

World Health Organization (WHO) (2003) *Skills for Health: Skills-Based Health Education Including Life Skills: An Important Component of A Child-Friendly/Health-Promoting School*. Geneva: WHO

World Health Organization. (2001). *The World Health Report 2001 - Mental Health*: New Understanding, New Hope. Geneva: WHO

WHO. (2007). *International classification of functioning, disability, and health*: Children & youth version (ICF-CY).

WHO. (2008). *World report on child injury prevention.* https://apps.who.int/iris/bitstream/handle/10665/43851/9789241563574_eng.pdf?sequence=1

WHO. (2020). *Recognizing adolescence*. Retrieved February 18th, 2023 from https://apps.who.int/adolescent/second-decade/section2/page1/recognizingadolescence.html

Wu, P. F. (2011). A mixed methods approach to technology acceptance research. *Journal of the AIS*.

Wyatt, D., & White, G. (2000). Reducing secondary conditions for spinal-cord-injured patients: pilot testing a risk assessment and feedback instrument. *Topics in Spinal Cord Injury Rehabilitation*, *6*(1), 9-22.

Wyn, J., Cahill, H., Holdsworth, R., Rowling, L., & Carson, S. (2000). MindMatters, a whole-school approach promoting mental health and wellbeing. *Australian & New Zealand Journal of Psychiatry*, *34*(4), 594-601. https://doi.org/10.1080/j.1440-1614.2000.00748.x

Yanai, I., & Lercher, M. (2020). A hypothesis is a liability. *Genome Biology*, *21*, 1-5.

Yang, C., Sharkey, J. D., Reed, L. A., Chen, C., & Dowdy, E. (2018). Bullying victimization and student engagement in elementary, middle, and high schools: Moderating role of school climate. *School psychology quarterly*, *33*(1), 54. https://doi.org/10.1037/spq0000250

Yu, X., Sun, C., Sun, B., Yuan, X., Ding, F., & Zhang, M. (2022). The cost of caring: Compassion fatigue is a special form of teacher burnout. *Sustainability*, *14* (10), 6071 https://doi.org/10.3390/su14106071

Appendices

Appendix A

Included Studies

Table A.1

Included Studies

Authors	Country	Sample Characteristics	Study Design	Data Collection and Analysis	MTSS type	MTSS outcome.	Key Findings
Askell-Williams et al. (2013)	Australia.	N= 37 interviews N=1397 questionnaires. Teaching experience ranging from 3 years to 26 years.	Mixed-Methods	Strengths and Difficulties Questionnaire Teacher Questionnaire 37 Teacher interviews.	Kidsmatter Primary Mental Health promotion initiative	Mental Health	-Staff demonstrated professional knowledge in identified at-risk pupils -Educators felt underprepared for mental health promotion in schools. -Improvements were noted overtime in educator knowledge, pedagogy, self-efficacy, indicating success of MTSS initiative. -Educators expressed a need for more professional learning to support complex needs.
Brann et al. (2021)	United States of America.	N=11 School psychologists, intervention specialists, teachers,	Mixed-Methods	School Mental Health Quality Assessment Tool for schools Focus groups in 2 schools.	Tiered mental health system.	Mental Health	-Inner setting influences (school leadership, structures and resources) and outer setting influences (policies) impact MTSS implementation. -Outreach, systems planning, and proactive intervention planning aid MTSS implementation success. Challenges in tier two and three interventions noted: need for more time and resources.

		speech-language pathologist.					-Need for technical assistance in data based decision making underlined.
Cane et al. (2015)	United Kingdom	20 educators (2 primary, 2 post-primary and 2 special schools) including 2 SENCoS1 lead resilience practitioner, 3 Class teachers, 3 Teaching assistants, 1 Inclusion manager	Qualitative	Focus groups	TAMHS (Targeting Mental Health in Schools initiative) model of delivery.	Mental Health	-Staff reported improved knowledge, skills, awareness, confidence, positive impact on wellbeing following MTSS implementation. -Positive SEB outcomes, confidence, independence, empowerment noted for pupils following MTSS. -Improved staff attitudes, changes in school ethos, increased awareness of mental health importance -Clear roles for mental health promotion, with designated co-ordinators mostly in leadership positions -Mixed level of parent involvement noted (distance and communication barriers) -Resources include policies, communication mechanisms, staff training. -Constraints include prioritising needs, time, funding, parent involvement, resources, staff attitudes.
Eiradli et al. (2023)	United States of America.	33 educators (48 K-8 schools) 25 principals, 12 teachers, 3 mental health professionals, 8 unspecified.	Mixed-Methods	PBIS and Mental Health Programming Questionnaire on School-Readiness Questionnaire. Semi-structured interview	PBIS	Mental Health	-Most schools showed readiness for integrating mental health intervention to MTSS, but actual integration was limited. -Need for flexible and ongoing training -Limited use of evidence-based practices for wellbeing at tier three (only 36% of schools). -Professional support for tier two and tier three often comes from training provided from external professionals. -Educators deemed suitable for the delivery of interventions, with training.

Menzies et al. (2022)	United States of America.	18 middle and high school teachers Between 8 and 22 years of experience	Qualitative	Focus groups	Comprehensive, Integrated, Three-Tiered (CI3T) Model of Prevention	Academic, behaviour, socio-emotional	-Variability existed in teacher response to MTSS and quality of leadership. Teacher buy-in heavily influenced by leadership and pupil engagement/reactions. -Effective communication and flexible implementation approach essential for successful MTSS implementation and teacher engagement. -Teachers expect collaborative decision-making and clear communication from leadership. -Acknowledgement of teacher experiences and concerns increased collaborative problem-solving and buy-in.
Pavri (2010)	United States of America.	9 educators (5 elementary school, two middle school, 1 high school, 1 multi-grade).	Qualitative	Focus groups	Response to Intervention	Social, emotional and behavioural needs.	-Teachers generally supported RTI, but expressed concerns about resources and consistency in implementation. -Effective MTSS requires standardised assessment systems, ongoing professional development, school-wide support, policy changes, leadership, stakeholder buy-in, and parental collaboration. -Observation and class teacher referral are primary means of identifying pupils for additional support -Difficulty identifying pupils with internalizing difficulties results in these pupils often being overlooked. -SETs perceive CTs as facing challenges in supporting pupils with needs due to lack of knowledge and resources, leading to SETs assuming the majority of responsibility within MTSS implementation for tier two and three interventions.

Romer et al. (2018)	United States of America.	822 Educators (principals, teachers, student support staff. Role not specified. Experience or demographics not detailed.)	Quantitative	Mental Health Knowledge, Services, and Professional Development Survey	MTSS	Mental Health	-Educators more prepared to provide tier one mental health services compared to tier two or three. -Educators report moderate access to training, resources and coaching related to mental health across all tiers. Access to coaching support is lowest. -Half of participants feel comfortable seeking support from colleagues and supervisors. -Few educators report receiving formal training (42%), ongoing feedback (30%) on use of MTSS. -Educator's perceived preparedness to provide mental health MTSS positively associated with access to training, resources, coaching, and support for MTSS. -Perceptions of student access to mental health supports was positive associated with training, resources, and coaching for MTSS.
Splett et al., (2021)	United States of America	13 educators. (8 elementary schools) including school psychologists, administrators, school counselors, mental health clinicians, school-based academic and behavioural coaches.	Qualitative	Focus Groups and Semi-structured interviews	Interconnected Systems Framework	Mental Health	-Training, school climate, rotating team member roles, protected time for innovation-related responsibilities, linked with improved MTSS implementation. -Building and maintaining buy-in from educators from leadership is crucial for successful MTSS implementation. -Turnover in key positions leads to hindered MTSS implementation. -Lack of systematic communication about initiatives and priorities leads diminished MTSS priority. -Limited in-person professional development and training is a major barrier to effective MTSS. -Insufficient time for planning negatively affects motivation and implementation.

Appendix B

Excluded Studies and Reason for Exclusion

No.	Reference	Reason
1.	Abou-Rjaily, K., & Stoddard, S. (2017). Response to Intervention (RTI) for Students Presenting with Behavioral Difficulties: Culturally Responsive Guiding Questions [Journal Articles; Tests/Questionnaires; Reports - Evaluative]. *International Journal of Multicultural Education*, *19*(3), 85-102. https://search.ebscohost.com/login.aspx?direct=true&AuthType=cookie,ip,url,uid,shib&db=eric&AN=EJ1159896&site=ehost-live	4.
2.	Albers, C. A., Glover, T. A., & Kratochwill, T. R. (2007). Introduction to the special issue: How can universal screening enhance educational and mental health outcomes? [Article]. *Journal of School Psychology*, *45*(2), 113-116. https://doi.org/10.1016/j.jsp.2006.12.002	4.
3.	Amanda, W. G. v. L., Hanneke, E. C., Simone, V., Nadira, S., Anne, C. M., Westenberg, P. M., & Jessica, J. A. (2024). Implementation and Experimental Evaluation of School-Based Intervention Programs Promoting Adolescent Mental Health: Lessons Learned [Journal Articles; Reports - Descriptive]. *School Psychology International*, *45*(1), 70-84. https://doi.org/10.1177/01430343231183999	5, 6.
4.	Arora, P. G., Collins, T. A., Dart, E. H., Hernández, S., Fetterman, H., & Doll, B. (2019). Multi-tiered systems of support for school-based mental health: A systematic review of depression interventions. *School Mental*	4.

	Health: A Multidisciplinary Research and Practice Journal, *11*(2), 240-264. https://doi.org/10.1007/s12310-019-09314-4	
5.	August, G. J., Piehler, T. F., & Miller, F. G. (2018). Getting "SMART" about implementing multi-tiered systems of support to promote school mental healtH. *Journal of School Psychology*, *66*, 85-96. https://doi.org/10.1016/j.jsp.2017.10.001	8.
6.	Avery-Overduin, B. L., & Poed, S. (2023). Breaking the culture of school suspension: alternatives to external suspension and exclusion for P-6 students [Article]. *Emotional & Behavioural Difficulties*, *28*(4), 249-262. https://doi.org/10.1080/13632752.2023.2276023	4.
7.	Bohanon, H., & Wu, M.-J. (2011). Can prevention programs work together? An example of school-based mental health with prevention initiatives. *Advances in School Mental Health Promotion*, *4*(4), 35-46. https://doi.org/10.1080/1754730X.2011.9715641 (Data-driven decision making in school-based mental health)	8.
8.	Bradshaw, C., Pas, E., Bloom, J., Barrett, S., Hershfeldt, P., Alexander, A., McKenna, M., Chafin, A., & Leaf, P. (2012). A State-Wide Partnership to Promote Safe and Supportive Schools: The PBIS Maryland Initiative. *Administration & Policy in Mental Health & Mental Health Services Research*, *39*(4), 225-237. https://doi.org/10.1007/s10488-011-0384-6	4.
9.	Bradshaw, C. P., Debnam, K. J., Johnson, S. L., Pas, E. T., Hershfeldt, P., Alexander, A., Barrett, S., & Leaf, P. J. (2014). Maryland's evolving system of social, emotional, and behavioral interventions in public schools: The	8.

	Maryland Safe and Supportive Schools project. *Adolescent Psychiatry*, *4*(3), 194-206. https://doi.org/10.2174/2210676604031409121631 20	
10.	Brodsky, L., Iun, A., Ervin, A., Cook, A. L., & Pearrow, M. (2023). Exploring Systems-Level Family Engagement Practices Across Elementary and PK-8 Schools. *Journal of Educational & Psychological Consultation*, 1-29. https://doi.org/10.1080/10474412.2023.2269389	5.
11.	Cook, C. R., Frye, M., Slemrod, T., Lyon, A. R., Renshaw, T. L., & Yanchen, Z. (2015). An Integrated Approach to Universal Prevention: Independent and Combined Effects of PBIS and SEL on Youths' Mental Health. *School Psychology Quarterly*, *30*(2), 166-183. https://doi.org/10.1037/spq0000102	6, 8.
12.	Cook, C. R., Xie, S. R., Earl, R. K., Lyon, A. R., Dart, E., & Zhang, Y. (2015). Evaluation of the Courage and Confidence Mentor Program as a Tier 2 intervention for middle school students with identified internalizing problems. *School Mental Health: A Multidisciplinary Research and Practice Journal*, *7*(2), 132-146. https://doi.org/10.1007/s12310-014-9137-5	6, 8.
13.	Cressey, J. (2019). Developing culturally responsive social, emotional, and behavioral supports [Article]. *Journal of Research in Innovative Teaching & Learning (JRIT)*, *12*(1), 53-67. https://doi.org/10.1108/JRIT-01-2019-0015	8.
14.	Eiraldi, R., McCurdy, B. L., Khanna, M. S., Wolk, C. B., Glick, H. A., Rabenau-McDonnell, Q. A., Comly, R., Rutherford, L. E., Banks, J., Rufe, S. A., Popkin, K. M., Wilson, T., Henson, K., Wandersman, A., & Jawad, A. F. (2022). Study protocol: Cluster randomized trial of consultation strategies for the sustainment of mental health interventions in under-resourced urban	8.

	schools: Rationale, design, and methods. *BMC Psychology*, *10*. https://doi.org/10.1186/s40359-022-00733-8	
15.	Emily, G.-S., Peg, D., & Jennifer, B.-B. (2023). A Phenomenological Investigation of Universal Mental Health Screening: Making Meaning for School Counseling. *Professional School Counseling*, *27*(1). https://doi.org/10.1177/2156759X221150008	5.
16.	Fedewa, A. L., Candelaria, A., & Erwin, H. E. (2013). Incorporating Physical Activity Into the Schools Using a 3-Tiered Approach. *Journal of School Health*, *83*(4), 290-297. https://doi.org/10.1111/josh.12029	4.
17.	Froiland, J. M. (2011). Response to Intervention as a Vehicle for Powerful Mental Health Interventions in the Schools . *Contemporary School Psychology*, *15*, 35-42. https://doi.org/https://www.caspwebcasts.org/new/index.php?option=com_content&view=article&id=51&Itemid=106	8.
18.	Gijzen, M. W. M., Creemers, D. H. M., Rasing, S. P. A., Smit, F., & Engels, R. C. M. E. (2018). Evaluation of a multimodal school-based depression and suicide prevention program among Dutch adolescents: design of a cluster-randomized controlled trial. *BMC Psychiatry*, *18*(1), N.PAG-N.PAG. https://doi.org/10.1186/s12888-018-1710-2	8.
19.	Gresham, F. M. (2005). Response to Intervention: An Alternative Means of Identifying Students as Emotionally Disturbed. *Education & Treatment of Children*, *28*(4), 328-344. https://doi.org/https://www.educationandtreatmentofchildren.net	4.

20.	Gresham, F. M. (2007). Response to Intervention and Emotional and Behavioral Disorders: Best Practices in Assessment for Intervention. Assessment for Effective Intervention, 32(4), 214-222. https://doi.org/10.1177/15345084070320040301	4.
21.	Grills, A. E., Fletcher, J. M., & Vaughn, S. (2014). Anxiety and Response to Reading Intervention among First Grade Students [Journal Articles; Reports - Research]. *Child & Youth Care Forum*, *43*(4), 417-431. https://doi.org/10.1007/s10566-014-9244-3	7,8.
22.	Guest, J. D., Ross, R. A., Childs, T. M., Ascetta, K. E., Curcio, R., Iachini, A., & Griffiths, L. (2024). Embedding social emotional learning from the bottom up in multi-tiered services and supports framework. *Psychology in the Schools*, 1. https://doi.org/10.1002/pits.23183	8.
23.	Hoover, J. J., & Patton, J. R. (2008). The Role of Special Educators in a Multitiered Instructional System. *Intervention in School & Clinic*, *43*(4), 195-202. https://doi.org/10.1177/1053451207310345	4.
24.	Horner, R., Sugai, G., Fixsen, D., Horner, R. H., & Fixsen, D. L. (2017). Implementing Effective Educational Practices at Scales of Social Importance. *Clinical Child & Family Psychology Review*, *20*(1), 25-35. https://doi.org/10.1007/s10567-017-0224-7	4.
25.	Kearney, C., & Graczyk, P. (2014). A Response to Intervention Model to Promote School Attendance and Decrease School Absenteeism [Article]. *Child & Youth Care Forum*, *43*(1), 1-25. https://doi.org/10.1007/s10566-013-9222-1	4.

26.	Kelly, M. S., & Lueck, C. (2011). Adopting a data-driven public health framework in schools: Results from a multi-disciplinary survey on school-based mental health practice. *Advances in School Mental Health Promotion*, *4*(4), 5-12. https://doi.org/10.1080/1754730X.2011.9715638 (Data-driven decision making in school-based mental health)	5.
27.	Kern, L., Weist, M. D., Mathur, S. R., & Barber, B. R. (2022). Empowering School Staff to Implement Effective School Mental Health Services. *Behavioral Disorders*, *47*(3), 207-219. https://doi.org/10.1177/01987429211030860	4.
28.	Lamb-Parker, F., LeBuffe, P., Powell, G., & Halpern, E. (2008). A Strength-Based, Systemic Mental Health Approach to Support Children's Social and Emotional Development. *Infants & Young Children: An Interdisciplinary Journal of Early Childhood Intervention*, *21*(1), 45-55. https://doi.org/10.1097/01.IYC.0000306372.40414.a7	4.
29.	Loftus-Rattan, S. M., Wrightington, M., Furey, J., & Case, J. (2023). Multi-tiered System of Supports: An ecological approach to school psychology service delivery. *Teaching of Psychology*, *50*(1), 77-85. https://doi.org/10.1177/00986283211024262	8.
30.	Lever, N., Orenstein, S., Jaspers, L., Bohnenkamp, J., Chung, J., & Hager, E. (2024). Using the Whole School, Whole Community, Whole Child Model to Support Mental Health in Schools. *Journal of School Health*, *94*(2), 200-203. https://doi.org/10.1111/josh.13322	4

31.	Loftus-Rattan, S. M., Wrightington, M., Furey, J., & Case, J. (2023). Multi-tiered System of Supports: An ecological approach to school psychology service delivery. *Teaching of Psychology*, *50*(1), 77-85. https://doi.org/10.1177/00986283211024262	4, 5.
32.	McIntosh, K., Filter, K. J., Bennett, J. L., Ryan, C., & Sugai, G. (2010). Principles of sustainable prevention: Designing scale-up of School-wide Positive Behavior Support to promote durable system. *Psychology in the Schools*, *47*(1), 5-21. https://doi.org/10.1002/pits.20448	4.
33.	Pas, E. T., Bradshaw, C. P., Pas, E. T., & Bradshaw, C. P. (2012). Examining the association between implementation and outcomes : state-wide scale-up of school-wide positive behavior intervention and supports. *Journal of Behavioral Health Services & Research*, *39*(4), 417-433. https://doi.org/10.1007/s11414-012-9290-2	8.
34.	Robinson, L. E., Clements, G., Drescher, A., El Sheikh, A., Milarsky, T. K., Hanebutt, R., Graves, K., Delgado, A. V., Espelage, D. L., & Rose, C. A. (2023 Developing a multi-tiered system of support-based plan for bullying prevention among students with disabilities: Perspectives from general and special educati teachers during professional development. *School Mental Health: A Multidisciplinary Research and Practice Journal*. https://doi.org/10.1007/s123 023-09589-8	7.
35.	Singer, J. B., Erbacher, T. A., & Rosen, P. (2019). School-based suicide prevention: A framework for evidence-based practice. *School Mental Health:*	4.

	A Multidisciplinary Research and Practice Journal, *11*(1), 54-71. https://doi.org/10.1007/s12310-018-9245-8	
36.	Swalwell, J. M., & McLean, L. A. (2021). Promoting children's social-emotional learning through early education: Piloting the Pyramid Model in Victorian preschools. *Australasian Journal of Special and Inclusive Education*, *45*(2), 122-134. https://doi.org/10.1017/jsi.2021.15	8.
37.	Weare, K. (2010). Mental health and social and emotional learning: Evidence, principles, tensions, balances. *Advances in School Mental Health Promotion*, *3*(1), 5-17. https://doi.org/10.1080/1754730X.2010.9715670	4.
38.	Weist, M. D., Splett, J. W., Halliday, C. A., Gage, N. A., Seaman, M. A., Perkins, K. A., Perales, K., Miller, E., Collins, D., & DiStefano, C. (2022). A randomized controlled trial on the interconnected systems framework for school mental health and PBIS: Focus on proximal variables and school discipline. *Journal of School Psychology*, *94*, 49-65. https://doi.org/10.1016/j.jsp.2022.08.002	8.
39.	Williams, I., Vaisey, A., Patton, G., & Sanci, L. (2020). The effectiveness, feasibility and scalability of the school platform in adolescent mental healthcare. *Current Opinion in Psychiatry*, *33*(4), 391-396. https://doi.org/10.1097/YCO.0000000000000619	4.

Appendix C

Weight of Evidence A

The qualitative, quantitative descriptive, and mixed methods sections of the MMAT (Hong et al., 2018) were utilised to evaluate the methodological rigour of the studies included. Items were rated as "Yes," "No," or "Unable to Tell". "Yes" was scored 1, while the other responses scored 0. The scores for all relevant items were added for each study, resulting in a total score obtained. According to the descriptors in the tables below, studies were finally assigned a rating based on the total score.

Table C.1

WoE A Scoring

Design Feature	Methodological Criteria	Askell-Williams et al. (2018)	Brann et al. (2021)	Cane et al. (2015)	Eiraldi et al. (2023)	Menzies et al. (2022)	Pavri (2010)	Romer et al. (2018)	Splett et al. (2021)
1. Qualitative	1.1. Is the qualitative approach suitable for the research question?	1.1. Yes.	1.1. Yes.	1.1. Yes.	1.1. Yes.	1.1. Yes.	1.1. Yes.	-	1.1. Yes.
	1.2. Are the qualitative data collection methods adequate to answer the research question?	1.2. Yes.	1.2. Yes.	1.2. Yes.	1.2. Yes.	1.2. Yes.	1.2. Yes.	-	1.2. Yes.
	1.3. Are findings well-grounded in the data?	1.3. Yes.	1.3. Yes.	1.3. Yes.	1.3. Yes.	1.3. Yes.	1.3. Yes.	-	1.3. Yes.
	1.4. Is the result interpretation adequately supported by data?	1.4. Yes.	1.4. Yes.	1.4. Can't tell.	1.4. Yes.	1.4. Yes.	1.4. Can't tell.	-	1.4. Yes.
	1.5. Is there coherence across qualitative data stages?	1.5. Yes.	1.5. Yes.	1.5. Yes.	1.5. Yes.	1.5. Yes.	1.5. Yes.	-	1.5. Yes.
2. Quantitative Descriptive.	2.1. Is the sampling strategy suitable for the research question?	2.1. Yes.	2.1. Yes.	-	2.1. Yes.	-	-	-	-
	2.2. Does the sample represent the target population?	2.2. Yes.	2.2. No.	-	2.2. No.	-	-	-	-
		2.3. Yes.	2.3. Yes.		2.3. Yes.				
		2.4. Can't tell.	2.4. Can't tell.	-	2.4. No.	-	-	-	-
		2.5. Yes.	2.5. Yes.	-	2.5. Yes.	-	-	-	-

	2.3. Are measurements appropriate? 2.4. Is nonresponse bias risk low? 2.5. Is statistical analysis fitting for the research question?			-		-	-	-	-
3. Quantitative Non-randomised study	2.1. Does the sample represent the target population? 2.2. Are measurements appropriate regarding outcome/ intervention/ exposure? 2.3. Are there complete outcome data? 2.4. Are confounders accounted for in the design and analysis? 2.5. Has exposure occurred as intended?	-	-	-	-	-	-	2.1 No. 2.2. Yes 2.3 Yes. 2.4. Yes. 2.5. Yes.	-
4. Mixed Methods.	3.1. Is there a rationale for using a mixed methods design?	3.1. No. 3.2. No. 3.3. Yes 3.4. Yes.	3.1. Yes. 3.2. Yes. 3.3. Yes. 3.4. Yes.	- - -	3.1. Yes. 3.2. No. 3.3. Yes. 3.4. Yes.	- - -	- - -	- - -	- - -

3.2. Are study components well-integrated to answer the research question?	3.5. Yes.	3.5. Yes.	- -	3.5. Yes	- -	- -	- -	- -
3.3. Are interpretations of integrated qualitative and quantitative outputs sufficient?								
3.4. Are divergences between quantitative and qualitative results properly addressed?								
3.5. Do study components align with quality criteria of the respective methods?								
Overall Score Obtained:	3	3	4	3	5	4	4	5

Note: *As mixed-methods studies have 15 criteria to evaluate, the weakest component limits the overall quality. Therefore, the study's overall quality score is based on the lowest score obtained among qualitative, quantitative or mixed-methods components.

Table C.2

WoE Scoring Descriptors

WoE A Weighting	Descriptor
High (3)	Includes 5 quality indicators
Medium (2)	Includes 3-4 quality indicators
Low (1)	Includes 1-2 quality indicators
Zero (0)	Includes 0 quality indicators

Table C.3

WoE A Scores Obtained

Study	Score Obtained	WoE A Weighting
Askell-Williams et al. (2013)	3	Medium
Brann et al. (2021)	2	Medium
Cane et al. (2015)	4	High
Eiraldi et al. (2023)	3	Medium
Menzies et al. (2022)	5	High
Pavri (2010)	4	Medium
Romer et al. (2018)	4	Medium
Splett et al. (2021)	5	High

Appendix D

Weight of Evidence B

Multiple factors were considered to evaluate the appropriateness of the research design to the review question. Although the inclusion criteria encompassed a diverse range of empirical design types, emphasis was placed on how well these designs could comprehensively address the review question. Consequently, studies were assigned weights based on their capacity to effectively elucidate educator perspectives, with designs incorporating suitable methods for gathering such viewpoints receiving greater consideration. With the possibility to collect both quantitative and qualitative information on educator perspectives and correspondingly provide a more rich and comprehensive understanding of the underlying phenomenon, mixed-methods research was allocated a high WoE B score of 2 (Bryman, 2006; Powell et al., 2008). Similarly, qualitative studies were awarded a 'High' score as they were deemed effective in affording a rich and detailed insight into educator perspectives. Quantitative studies were allocated a WoE B score of 1, given the distinct insight afforded to the review question by the research design (Mertens, 2014). Designs that did not explore educator perspectives, such as randomised control designs, were allocated a WoE B score of 0, given their incompatibility with the purpose of the review.

Furthermore, understanding educator perspectives on MTSS implementation for pupil wellbeing requires consideration of participant demographics, such as age, experience, gender, and educational qualifications. Reporting these variables allows the reader to determine if the study's sample adequately represents the broader population of education staff, thereby enabling generalisability to similar contexts. Similarly, studies in the present review were assigned a higher weight based on the provision of information regarding the socio-economic status of the schools studied, including community characteristics, free and reduced lunch programmes, and local economic indicators. Such factors have been found to influence levels of risk among pupils

(Marmot et al., 2010), often with implications on resource allocation within schools. Studies that reported information received higher WoE A scores as they facilitated transferability, allowing the reader to consider the findings of the study within the context in which it was set.

Table D.1

WoE B Scoring Criteria

Feature	Scoring Criteria
Research Design	2 = Qualitative/ Mixed methods approaches to collect participant views. 1 = Quantitative techniques employed to capture participant views. 0 = Designs that do not involve soliciting teachers' viewpoints, such as experimental designs. 0 = Unable to determine
Reporting Participant Demographics	2 = At least three of the following reported: (role, teaching experience, age range, gender, school level, number of years spent implementing MTSS, information on readiness/ fidelity of participants of MTSS) 1 = One to two of the above 0 = None of the above 0 = Unable to Tell
Reporting School Context	2 = Explicitly details socio-economic statues of school and/or number of at-risk/ economically disadvantaged pupils 1= Provides some school demographics (sector type, urban/ rural location, demographics of pupils). 0= No details on school context provided.

Table D.2

WoE D Scoring Descriptors

WoE D Weighting	Score Obtained
High (3)	5-6
Medium (2)	3-4
Low (1)	1-2
Zero (0)	0

Table D.3.

WoE B Scores Obtained

Study	Research Design	Participant Information	SES of school	Total Score Obtained	WoE B Weighting
Askell-Williams et al. (2013)	2	2	1	5	High
Brann et al. (2021)	2	2	2	6	High
Cane et al. (2015)	2	1	0	3	Medium
Eiraldi et al. (2023)	2	2	1	5	High
Menzies et al. (2022)	2	2	2	6	High
Pavri (2010)	2	2	2	6	High
Romer et al. (2018)	1	1	2	4	Medium
Splett et al. (2021)	2	2	2	6	High

Appendix E

Weight of Evidence C

In WoE C, four factors were assessed for topic relevance in line with the review's focus on education staff perspectives regarding MTSS and pupil wellbeing. Higher scores indicate a stronger alignment with the primary research question in this scoring system, while lower scores suggest decreasing relevance. The system allows for a systematic evaluation of how well each study addresses the critical aspects of the review's focus.

The first criterion examines the extent to which a study addresses the principal focus of the review, which is the experiences and perspectives of education staff regarding MTSS for pupil wellbeing. A score of 2 denotes that the study closely aligns with this central focus, providing substantial insights into education staff perspectives on MTSS and pupil wellbeing. A score of 1 is attributed to studies that, while not primarily centred on elucidating educators' general perspectives, still explore specific aspects of MTSS implementation, such as screening or confidence, which can be informative. Conversely, a score of 0 is assigned when the study's primary focus is not on education staff perspectives or any aspect of MTSS. This weighting system ensures that studies closely related to the core theme receive the highest weight, thus making the most significant contributions to the review's objectives.

The second criterion evaluates the study's sample composition with an emphasis on roles that are involved with the day-to-day implementation of MTSS and are universally present in educational settings, allowing for international generalisation. A score of 2 is given when over 90% of participants are teachers (class teachers or special educators), as this role involves the day-to-day implementation of MTSS on the ground (Blackburn, 2018). A score of 1 applies when at least 50% of participants hold these roles, acknowledging their relevance and potential for international applicability. A score of 0 is assigned when these roles are less than 50% of the

sample, potentially limiting their connection to the review's primary focus. This revised weighting system highlights roles globally common in schools and applicable to international educational contexts.

The third criterion evaluates whether the study's primary focus is on MTSS and if there is a clear description of the type of MTSS under investigation. A score of 2 is assigned when the study comprehensively explores education staff perspectives on MTSS, shedding light on the kind of MTSS in use. In contrast, a score of 0 is applied when MTSS is mentioned but is not the primary focus or when there is no mention of MTSS at all, as these studies may not significantly contribute to the review's central theme. This weight emphasises the need for studies directly addressing MTSS in the context of education staff perspectives.

To assess the study's relevance to the central theme, the fourth criterion investigates how relevant the study focus is to pupil wellbeing needs. A score of 2 is assigned when the primary focus of the study is on implementing MTSS for pupil wellbeing needs, and the study includes a clear definition of wellbeing. A score of 1 is given when the study explores dimensions related to wellbeing, such as social and emotional development, mental health, social and emotional learning (SEL), or physical health. Studies that explore dimensions related to wellbeing, in conjunction with other education needs, were given a score of 0. This weight system ensures that studies closely aligned with the central theme, addressing education staff perspectives on MTSS and pupil wellbeing, are assigned higher weights. Studies that do not address these aspects receive lower weights, ensuring the review remains focused on its core objective.

Table E.1

WoE C Criteria

Educator Perspectives
2= Focus of study is educator perspectives regarding MTSS for addressing wellbeing needs. 1= Focus of study is educator perspectives regarding specific aspects of MTSS implementation. 0= Focus of study is not on education staff perspectives and/or the implementation of MTSS
Composition of the Sample
2 = At least 90% of the participants are teachers (class teachers and/or SETs), directly involved in the implementation of MTSS. 1= At least 50% of the studies participants are teachers, SETs, or principals directly involved in the implementation of MTSS 0= less than 50% of the participants are teachers, acts, or principals directly involved in the implementation of MTSS. 0= Unable to determine.
Investigation of Multi-tiered System of Support
2= The study primarily explores education staff perspectives on the implementation of MTSS, with a clear description of the type of MTSS used. 0= Schools included in the study incorporate MTSS, it is not the primary focus of the study. 0= this study does not mention MTSS. 0= Unable to determine.
Conceptualisation of Wellbeing needs
2= The study has a primary focus on exploring education staff perspectives regarding their implementation of MTSS for people wellbeing needs and includes a definition for wellbeing. 1= The study investigates social and emotional development, mental health, SEL, physical health, and/or other core dimensions of wellbeing.

Table E.2

WoE C Scoring Descriptors

WoE C Weighting	Score Obtained
High (3)	5-6
Medium (2)	3-4
Low (1)	1-2
Zero (0)	0

Table E.3

WoE C Scores Obtained

Study	Sample	MTSS	Outcome	Total Score Obtained	WoE C Weighting
Askell-Williams et al. (2013)	2	0	1	3	Medium
Brann et al. (2021)	0	2	1	3	Medium
Cane et al. (2015)	0	2	1	3	Medium
Eiraldi et al. (2023)	1	2	1	4	Medium
Menzies et al. (2022)	2	2	0	4	Medium
Pavri (2010)	2	2	1	5	High
Romer et al. (2018)	0	2	1	3	Medium
Splett et al. (2021)	0	2	1	3	Medium

Appendix F

Weight of Evidence D

To calculate each study's final WoE D scores, equal weight was assigned to WoE A, WoE B, and WoE C. This involved standardising the scores, with High WoE assigned a rating of 3, Medium WoE received a rate of 2, and Low WoE assigned a score of 1. This approach ensured equitable consideration across the components, considering their respective original scoring ranges (WoE A: 0-5, WoE B: 0-6, WoE C: 0-8). The overall WoE D scores were subsequently determined by averaging these adjusted scores.

Table F.1

WoE D Scoring Descriptor

WoE D Weighting	Score Obtained
High (3)	2.5-3.0
Medium (2)	2.0-2.4
Low (1)	0.0-1.9
Zero (0)	0

Table F.2

WoE D Scores Obtained

Study	WoE A	WoE B	WoE C	WoE D
Askell-Williams et al. (2013)	Medium (2)	High (3)	Medium (2)	Medium (2.33)
Brann et al. (2021)	Medium (2)	High (3)	Medium (2)	Medium (2.33)
Cane et al (2015)	High (3)	Medium (3)	Medium (2)	High (2.67)
Eiraldi et al. (2023)	Medium (2)	High (3)	Medium (2)	Medium (2.33)
Menzies et al. (2022)	High (3)	High (3)	Medium (2)	High (2.67)
Pavri (2010)	Medium (2)	High (3)	High (3)	High (2.67)
Romer et al. (2018)	Medium (2)	Medium (2)	Medium (2)	Medium (2)
Splett et al. (2021)	High (3)	High (3)	Medium (2)	High (2.67)

Appendix G

Question Formulation (Mwanza, 2002)

Table G.1

Research Question Formulation using Mwanza's (2002) Eight-Step Model

The Eight Step Model			The Present Research		
Identify the:		Questions to ask:	Research Questions/ Concepts:	Web-based Survey:	Semi-Structured Interview:
Step 1	Activity of Interest	What sort of activity am I interested in?	How do stakeholders use the Continuum of Support to support and monitor pupil wellbeing?	-At what level of the CoS does wellbeing receive the most support in your school? -How often do you use the three-staged Continuum of Support framework for the wellbeing needs of pupils?	-From your experience, how does wellbeing fit within the CoS? -How important do you consider supporting pupil wellbeing needs in the context of your school? -How important do you consider supporting pupil wellbeing in the greater context of the DoE priorities?
Step 2	Objective	Why is the activity taking place?	To promote the wellbeing of all children in Irish primary schools.	-Compared to other areas of SEN, to what extent are pupil wellbeing concerns prioritised at the various tiers of the CoS? -	-Can you tell me about your experience of supporting pupil wellbeing within the three tiers of the CoS?

Step 3	Subjects	Who is involved in carrying out this activity?	For the purpose of the present research, the subjects will be the school principal, class teacher, special education teacher.	-Gender -Age -Role of respondent - Years of experience in current role -Highest level of qualification -In what area of the school do you teach? -How confident do you feel supporting pupil wellbeing?	-Gender -Role -Years of experience in current role -Highest level of qualification -In what area of the school do you teach?
Step 4	Tools	By what means are the subjects performing this activity?	RQ: How are structures, resources and supports used to support wellbeing within the COS?	-How are pupil wellbeing needs (1) identified and (2) monitored at each of the three tiers of the CoS? -Are there clear systems in place in your school which allow teachers to assess the effectiveness of whole-class interventions that are used and measure pupil progress towards priority targets? -How would you rate your teacher training in the area of supporting wellbeing needs? -Do you consider the evidence-base and relevance of such interventions during the selection process? -During the past 5 years, did you participate in any of the following kinds of professional development activities to enhance your teaching of wellbeing, and	-What "tools" facilitate the (1) identification, (2) support and (3) monitoring of pupil wellbeing needs in your personal practice and in your school in general? (e.g., skills, knowledge, guidelines, training, personnel such as the NEPS psychologist). -What if anything could have been used to further develop this support? (e.g., additional time allocation, support, and development work, etc.)

				what was the impact of these activities on your development as a teacher when supporting students wellbeing needs? -Would you like to receive continuing professional development (CPD) on how best to identify needs? - During the past 5 years, to what extent did the NEPS psychologist provide the following input to support pupil wellbeing needs?	
Step 5	Rules and regulations	Are there any cultural norms, rules or regulations governing the performance of this activity?	RQ: What expectations or rules influence the multi-tiered support of wellbeing through the CoS	-Please identify any barriers that influence your support of pupil wellbeing needs. -Are there any legislation or professional guidelines that guide your practice when implementing the CoS to support wellbeing? -	-Were there any expectations, or assumptions, in place for your work supporting pupil wellbeing? -How did these impact upon your support of pupil wellbeing needs/ -Were there any policies or procedures which governed your work identifying/ supporting pupil wellbeing needs through the CoS? How did the SETAM affect your work in relation to wellbeing needs? around the NAM)

					-How did these impact upon your work?
Step 6	Division of Labour	Who is responsible for what, when carrying out this activity and how are the roles organised?	RQ: What are the roles and responsibilities of each key stakeholder implementing the CoS to support pupil wellbeing needs?	-In your school, are the roles and responsibilities within the CoS clearly articulated? -Please rate the contribution of the following stakeholders when it comes to pupil wellbeing support. -When (1) identifying and (2) monitoring wellbeing needs, do you work collaboratively with other school staff? If you selected yes, please select which members of staff you would collaborate most with.	-Can you describe the roles and responsibilities undertaken by each stakeholder involved in the support of pupil wellbeing needs? -What factors do you feel influenced the roles and responsibilities undertaken by each stakeholder? -How were roles and responsibilities shared between these stakeholders?
Step 7	Community	What is the environment in which activity is carried out?	School community members (parents, SNAs, students). External service providers (NEPS, CAMHS, Disability	-School Type -Who is involved with the implementation of the Continuum of Support in your school? -Are you familiar with the referral pathways for children exhibiting high levels of wellbeing needs? -From your experience, at what level of the CoS does the NEPS psychologist most engage when addressing wellbeing needs? -How often do you collaborate with the educational psychologist to meet the	-Were there any services involved in the support of pupil wellbeing? -Please describe their impact on pupil wellbeing needs.

			Service, NCSE)	wellbeing needs of pupils in your class/ school?	
Step 8	Outcome	What is the desired Outcome from carrying out this activity?	Effective pupil wellbeing support.		-How did the CoS impact upon your approach to the (1) identification, (2) support and (3) monitoring of pupil wellbeing support in schools? How did it impact upon the everyday experiences of pupils with wellbeing needs/

Appendix H

Ethical Approval

MIREC-5

Research Ethics Committee

MIREC Final Decision Form

APPLICATION NUMBER:	A22-075

1. PROJECT TITLE

Children's Wellbeing in Irish Primary Schools: Stakeholder Perspectives on the Continuum of Support Framework when Supporting and Monitoring Pupil Wellbeing

2. APPLICANT

Name:	Caroline Dineen
Department / Centre / Other:	LSRE
Position:	Postgraduate Researcher (DECPsy)

3. DECISION OF MIREC CHAIR (✓)

☐	Ethical clearance through MIREC is not required and therefore the applicant need take no further action in this regard.
✓	Ethical clearance is required and is hereby granted by the Chair without need for referral to the MIREC committee.
☐	Ethical clearance for a funding application or a similar purpose is granted by the Chair ***pro tem*** without need for referral to the MIREC committee. However, the applicant must subsequently seek ethical clearance from MIREC prior to embarking on any related project work involving human participants or their data.
☐	Ethical clearance is granted following review of the application by the MIREC committee.
☐	Ethical clearance is not granted following review of the application by the MIREC committee.

4. REASON(S) FOR DECISION

5. SIGNATURE OF MIREC CHAIR

Name (Print):	Dr Marie Griffin
Signature:	
Date:	18th January 2023

Appendix I

Demographic Information of Survey Respondents

Variables	Categories	Frequency	Percent
Gender	Male	24	16.67%
	Female	109	79.55%
	Non-binary	3	3.97%
Role	Principal	48	35.29%
	Class Teacher	53	38.97%
	Special Education Teacher	35	25.74%
Years of Experience	0-5 years	12	8.33%
	5-10 years	33	23.48%
	11-15 years	12	10.61%
	15 years or more	79	57.58%
Highest Level of Qualification	Bachelor's degree	47	34.07%
	Higher level diploma	34	25.19%
	Master's degree	48	35.56%
	PhD or Doctorate	7	5.19%
School Socioeconomic Status	DEIS	16	11.76
	Non-DEIS	120	88.24
School Type: Geographical Location	Rural	49	36.03
	Urban	87	63.97

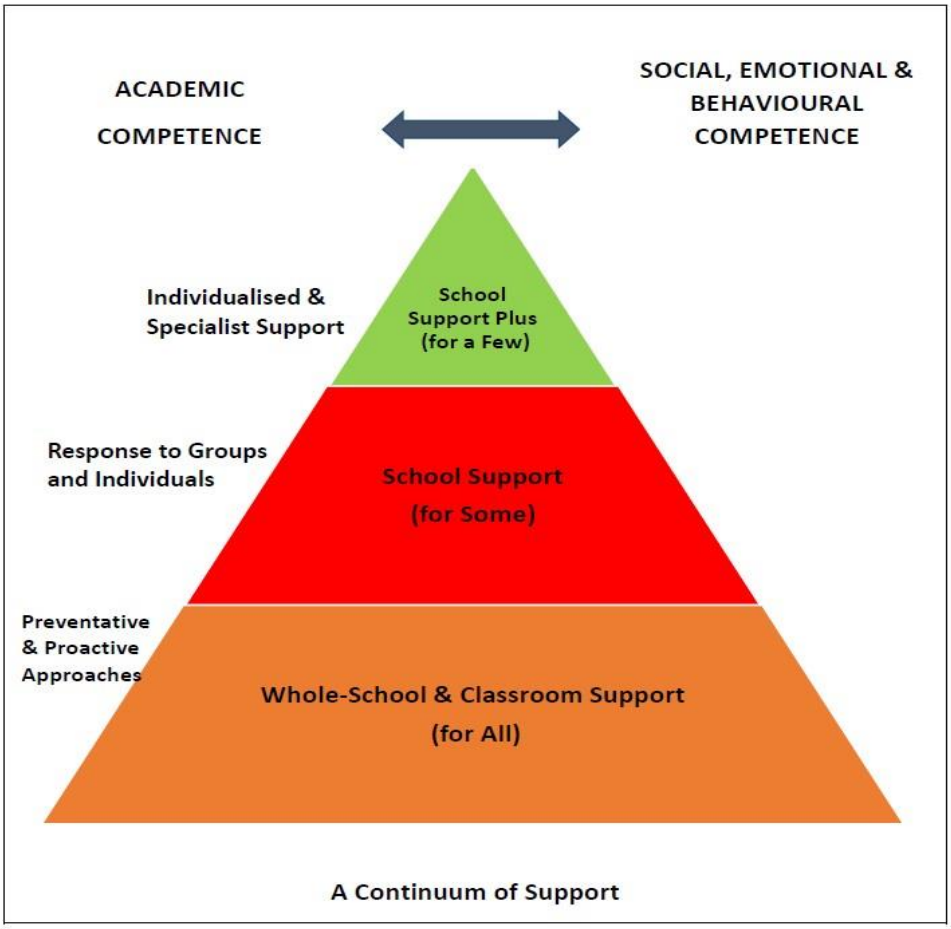
Appendix J

National Online Survey

The **Continuum of Support** advises that children who are identified as potentially having academic, physical, behavioural, social, and emotional difficulties are first supported at the **Classroom Support** (Tier One) level by the class teacher, who will observe the child, gather information, create an action plan, and monitor its effectiveness. If the child continues to exhibit difficulties, the teacher is advised to move to the **School Support** (Tier Two) stage of the continuum, wherein they will engage in a problem-solving approach with the special education teacher (SET), continuing to systematically gather data to inform the School Support Plan. This plan may then be jointly implemented, monitored, and evaluated by the class teacher and SET to evaluate the progress of the child. In some cases, children may require more intensive support at this stage and the teacher is then advised to move to the **School Support Plus** (Tier Three) level of the continuum. This may involve joint work with other professionals, such as speech and language therapists or NEPS psychologists, to engage in problem-solving, intervention and assessment work for the child in question (NEPS, 2007b, p.7).

Figure 1

The Continuum of Support Model (NEPS, 2010, p. 13).



1. Gender:
2. Age:
3. Role (Tick all that apply)
☐ Principal ☐ Class Teacher ☐ Special Education Teacher

4. Do you have an accredited degree from an Initial Teacher Education programme? ☐ Yes ☐ No
5. Years of experience in current role
☐5 - 10 years 11 - 15 years ☐15 years or more

6. Highest level of qualification
☐ Bachelor's degree ☐ Master's degree ☐ PHD or Doctorate

7. School Type (Tick all that Apply)
☐ Rural ☐ Urban ☐ DEIS ☐ Non-DEIS ☐

8. If you selected 'yes' above, please select the DEIS classification of your school:
☐ DEIS Band 1 DEIS Band 2 ☐ Rural DEIS

9. In what area of the school do you teach?
☐ Administration ☐ Junior Level (JI - 2nd Class) ☐ Senior Level (3rd - 6th Class) ☐ Special Education
10. How **important** do you think it is to prioritise the wellbeing needs of primary school pupils?
1-Very Unimportant; 2- Unimportant; 3- Neutral; 4- Important; 5 Very Important
Please explain your answer:
11. How **confident** do you feel in supporting pupil wellbeing?

1- Very Under-Confident; 2- Under Confident; 3- Neither Confident or Unconfident; 4- Confident; 5 Very Confident
12. **How often** do you use the three-staged Continuum of Support framework for the wellbeing needs of pupils? ☐ Never ☐ Rarely ☐ Occasionally ☐ Often ☐Very Often

13. At what level of the Continuum of Support does wellbeing receive the **most support** in your school? ☐ Support for All ☐ Support for Some ☐ Support for Few

14. In your school, are the roles and responsibilities within the Continuum of Support clearly articulated? ☐ Yes ☐ No ☐ Unsure

15. Please rate the contribution of the following stakeholders when it comes to pupil wellbeing support

Class Teacher: 1- Very Unimportant; 2- Unimportant; 3- Slightly Important; 4- Important; 5 Very Important

SET 1- Very Unimportant; 2- Unimportant; 3- Slightly Important; 4- Important; 5 Very Important

Principal: 1- Very Unimportant; 2- Unimportant; 3- Slightly Important; 4- Important; 5 Very Important

22. **How** are pupil wellbeing needs **identified** in your school within the tiers of the Continuum of Support? Tick those that apply

	Tier 1	Tier 2	Tier 3
Parental consultation			
Staff consultation			
Unstructured Teacher Observation			
Teacher-designed measures /assessments			
Learning environment checklist			
Pupil consultation - My Thoughts About School Checklist			
Structured Teacher observation (e.g. ABC charts, frequency measures			
Screening tests (e.g. Behaviour Checklist, Strengths and Difficulties Questionnaire).			
Input from External Agency (NEPS, Disability Service, TUSLA, Jigsaw)			
Other (please name):			

23. **How** are pupil wellbeing needs **monitored** in your school within the tiers of the Continuum of Support? Tick those that apply

	Tier 1	Tier 2	Tier 3
Parental consultation			
Unstructured Teacher observation records (e.g. observational notes)			
Teacher-designed measures /assessments			
Learning environment checklist			
Pupil consultation My Thoughts About School Checklist			
Structured Teacher observation (e.g. ABC charts, frequency measures			
Screening tests (e.g. Behaviour Checklist, Strengths and Difficulties Questionnaire).			
Input from External Agency (NEPS, Disability Service, TUSLA, Jigsaw)			
Other (please name)			

22. Are there clear systems in place in your school which allow teachers to **assess the effectiveness of whole-class interventions** that are used? ☐ Yes ☐ No ☐ Unsure

23. Do you consider the **evidence base** and **relevance** of such interventions during the selection process? ☐ Yes ☐ No ☐ Unsure

24. The **Student Support Plan** allows teachers to monitor the student's progress overtime. Do you find this useful when planning for students with wellbeing needs? ☐ Yes ☐ No ☐ Unsure

25. Please select the **top three barriers** that influence your support of pupil wellbeing needs:

☐ Time ☐ Resources ☐ Competence/ Level of Skill ☐ Insufficient Training☐ Internal Support ☐ External Support ☐ Burnout☐ Curricular Demands ☐ Parent Demands ☐ Pressure to Prioritise Other SEN

☐ Other:

Please explain your answer:

26. How would you rate your **teacher training** in the area of supporting wellbeing needs? 1-Poor, 2-Fair, 3-Good, 4-Excellent

27. During the past 5 years, did you participate in any of the following kinds of **professional development** activities to enhance your teaching of **wellbeing**, and what was the **impact** of these activities on your development as a teacher when supporting students wellbeing needs?

	Yes	**No**	1-Poor	2-Fair	3-Good	4-Excellent
Staff Training from NEPS						
Staff Training from NCCA/ NCSE						
Staff Training from External Agency						
CPD Summer Course						
Participation in a network of teachers formed specifically for the professional development of teachers wellbeing promotion						

28. Would you like to receive **continuing professional development** (CPD) on how best to identify needs? Yes ☐ No ☐ Unsure

29. Over the past five years (2018-2023), **how often** have you **collaborated** with the **NEPS psychologist** to meet the wellbeing needs of pupils in your class/ school? ☐ Never ☐ Rarely ☐ ☐ Sometimes ☐Regularly

30. During the past 5 years, to what extent did the NEPS psychologist provide the following input to support pupil wellbeing needs?

	Never	**Rarely**	**Occasionally**	**Often**	**Very Often**

Input on school policies and procedure (e.g. development of whole-school wellbeing promotion policies)					
Consultation (e.g. advice on approaches to teaching and learning)					
Input to staff development					
Advice on classroom management strategies					
Assessment and intervention strategies for teacher implementation					
Direct 1:1 Intervention with Children					
Other:					

31. Are there any legislations or professional guidelines that guide your practice when implementing the Continuum of Support to support wellbeing (e.g., NEPS policies, school policies or circulars around the Special Education Teacher Allocation Model)? Yes ☐ No ☐ Unsure

If you selected Yes, Please list examples:

32. Are you familiar with the **referral pathways** for children exhibiting **high levels** of wellbeing need? Please rate your level of understanding. ☐Yes ☐No; 1-Poor, 2-Fair, 3-Good, 4-Excellent

Appendix K

Semi-Structured Interview Protocol

Hello [Interviewee's Name], thank you so much for taking the time to participate in this interview. Your insights are incredibly valuable. Today, we're here to have a thoughtful discussion about your experiences as a CT/ SET/ Principal. There are no right or wrong answers – your perspectives make this research meaningful.

As we delve into the questions, feel free to share as much or as little as you're comfortable with. Your input is very valuable, and any thoughts you have will contribute significantly to my thesis. Before we begin, please introduce yourself and share a bit about your role in the school.

- Highest Level of Education
- School Type (School Staff Only)
- Current Role
- Years of Experience in Current Role

Thank you for that information. As you know, my questions will be about your experiences supporting pupil wellbeing needs using the Continuum of Support (CoS). The CoS framework outlines various stages of support, ranging from classroom-level assistance to more specialised interventions for more complex needs. It's designed to provide a structured approach to addressing diverse student needs. Here is a visual depiction of the CoS. The definition of wellbeing that is being used in this interview is outlined on this prompt card for your information. You might recognise it as the definition incorporated by the Department of Education. If you are ready, let’s begin!

Question 1: Roles and Responsibilities

- How do you perceive your role as CT/SET/Principal in supporting students with wellbeing needs in your school?
- Can you describe your experience using the CoS framework to support wellbeing needs? Could you elaborate on the work undertaken?
- How confident do you feel as CT/SET/Principal to support wellbeing needs within the CoS framework?
- Who participates in the problem-solving process at various CoS tierss in your school?

- How are roles and responsibilities shared among stakeholders?
- What factors influence the roles and responsibilities of each stakeholder in supporting wellbeing?
- Describe your experience collaborating with other school stakeholders when supporting wellbeing within the CoS.
- How can effective collaboration be promoted when supporting wellbeing within the CoS?

Question 2: Resources and Supports

- When addressing wellbeing concerns within CoS tiers, what tools do you use to gather information for decision-making? Can you discuss the approach to observation taken when identifying pupils' needs?
- What do you use to set targets and devise plans for pupils, identifying needs that can be monitored and recorded?
- What tools do you use within CoS tiers monitor pupil wellbeing progress?
- Tell me about interventions/programmess/strategies in place at each CoS level. How are these tools identified and evaluated?
- What is your experience with the contribution of the NEPS psychologist in addressing wellbeing concerns within each CoS level?
- Since graduating, have you received additional training in wellbeing support? Provide examples.
- Can you describe parental involvement in supporting students with wellbeing needs in your school?
- Are external services involved in supporting pupil wellbeing?
- Does following the Continuum of Support ensure the effective allocation of school resources to meet the needs of pupils with wellbeing needs?

Question 3: Expectations

- Are there expectations or assumptions influencing your ability as a CT/SET/Principal to support pupil wellbeing?
- What, if anything, could have improved your approach to pupil wellbeing within the CoS? (e.g., additional time allocation, support, development work, etc.)

- Are there legislations or professional guidelines guiding your practice when implementing the CoS for wellbeing support?
- How has your practice evolved under the Special Education Teacher Allocation Model, in which a diagnosis is no longer needed to access support within the CoS?

What, if anything, do you know about the Wellbeing Policy Statement and Framework?

Appendix L

Thematic Analysis Checklist (Braun & Clarke, 2006)

Process	Number	Criteria
Transcription	1	Detailed transcription of data has occurred, verifying transcripts against tapes for accuracy.
Coding	2	Equal attention granted to information in the data set during the coding process.
	3	Themes have been created using a comprehensive, inclusive process. Preference not given to more vivid data (often anecdotal in nature).
	4	Relevant information from each theme has been extracted and collated.
	5	Themes have been checked against each other and the original dataset for accuracy and consistency.
	6	Ensured internal coherence, consistency and distinctiveness of themes.
Analysis	7	Analysis extended beyond paraphrasing to interpretation
	8	Ensured alignment between analysis and data, using extracts to illustrate analytic claims.
	9	Analysis offered a persuasive and structured narrative that effectively communicates the findings and insights about the data and topic.
	10	Maintained a good balance between analytic narrative and illustrative extracts
Overall	11	Sufficient time has been allotted to thoroughly complete each phase of the analysis, preventing the need to rush through any stage or perform a superficial review.
Written Report	12	Assumptions regarding thematic analysis and the specific approach employed are clearly articulated
	13	Strong alignment between the claimed methodology and the demonstrated execution, ensuring consistency between the described method and reported analysis.

14	The terminology and conceptual framework presented in the report align with the epistemological stance of the analysis.
15	Researcher is portrayed as an active participant in the research process

Appendix M

Hybrid Thematic Analysis with Sample Theme Generation

The researcher adopted a recursive process for qualitative data analysis, moving fluidly between phases of Braun and Clarkes' (2006) Reflexive Thematic Analysis as needed. Both deductive and inductive coding was conducted. The following step-by-step approach was incorporated, ensuring that the analysis was conducted in a precise, consistent, and exhaustive manner in order to enhance the credibility and trustworthiness of data interpretation (Nowell et al., 2017).

Phase 1: Familiarisation with the Data.

Orthographic transcription of interviews was conducted by the researcher, fostering complete immersion in the data and ensuring familiarity (Robson, 2011). Repeated reading and listening to the original recordings ensured accuracy and deepened immersion in the data set (Braun et al., 2008), allowing the researcher to identify emerging patterns and potential points of interest, which were noted in the Research Journal. Continuous checking and proofreading procedures were also implemented to counter potential inaccuracies associated with computerised data transcription and contribute to data trustworthiness (Eaton et al., 2019). Active listening incorporated during interviews allowed the researcher to capture non-verbal cues, facial expressions, and shifts in tone, therefore affording insight into both what was said and what was left unsaid by participants (Cohen et al., 2018; Egan, 2013). Observations were noted during transcription, contextualising interviews more as social encounters and not merely a gathering of research data (Cohen et al., 2018). A concise annotation process was employed throughout the analysis to prevent the loss of crucial context during interpretation. These annotations, recorded in Analytic Memos, enriched the generation of initial codes and themes, contributing to the overall depth and richness of the data interpretation.

Phase 2: Generating Initial Codes.

This phase involved reading the transcribed data and systematically identifying and labelling key concepts, phrases and themes using NVivo 12 software. Each data item underwent a thorough examination, and codes were assigned to capture the essence of participant responses at both semantic and latent levels (Braun et al., 2006). Repeated data reading and code

assignment ensured equal attention was granted to the entire dataset and facilitated the identification of the saturation point of open coding (Cohen et al., 2018; Braun & Clarke, 2006). The utilisation of NVivo 12 enhanced researcher reflexivity throughout this phase, facilitating the creation of memos that documented thought processes and highlighting items for further exploration (Woods et al., 2016). This phase lay the foundation for subsequent analyses, setting the stage for a deeper understanding of participant experiences (Nowell et al., 2017). An example of this phase of generating initial codes is outlined in Table K1 below.

Table M1

Sample of Initial Coding Process

Data Extract	**Initial Code**
Interviewer: Can you share your perspective on the challenges you face in addressing wellbeing as a class teacher: Class Teacher 1 (CT1): (Participant gives exasperated laugh). To be honest, there's just so much going on in schools and it's, it's really challenging to keep on top of everything you know. I think you need to do the latest course now about what's going on in maths or in STEM or whatever. But this area of wellbeing is really important and like, I would genuinely say that the most important thing is that all of the children are happy, and that you know, they're doing their best and you know, that they're socially getting on well and everything. Like on the one hand, I think this is the most important thing, but then regarding training and everything, it's not reflected, you know, I just don't think there's a balance there. And I guess, when it comes to standardised tests and whole-school evaluations, its really the grades people focus on. It’s so difficult to assess and really pinpoint wellbeing because it's the overall development of the person you know, yeah. Like there’s another	• Competing Priorities • Teacher attitudes • Importance of Wellbeing • Lack of training • Difficulties assessing wellbeing.

thing, to be honest I just worry about whether I'm actually identifying any needs correctly. Like I worry about the quieter kids a lot, you know? I feel like it's not easy to kind of quantify or whatever. I find that my confidence about assessing something else is much better.	• Emotional impact on teacher • Confidence in assessing wellbeing
Interviewer: I wonder, why is that?	
CT1: You know, like you assess something in literacy or numeracy and you have access to so many resources and tests to pinpoint where the child is going up or down or whatever. But then, with wellbeing, a lot of it can be going on internally for the child, like anxiety or trying to identify their level of self-esteem; it's just kind of a more difficult thing to identify and pin down?	• Other subjects • Identifying internal wellbeing needs • Lack of wellbeing assessment tools
Interviewer: I understand, thank you. Can you tell me about how you currently assess the wellbeing of pupils in your class?	
Interviewee: A lot of it is really just teacher observation, you know. Now there are like checklists in the green book and so on. But it's a very difficult thing. I work with the children every single day, and as a teacher you spend a lot of time with your students, and the relationship obviously builds up, and they do definitely become more comfortable in speaking to their teacher. It's a huge responsibility to identify, you know, if there are any concerns. Its a constant pressure.	• Teacher observation • Assessment tools • Teacher- pupil relationship • Burden of Responsibility
But there will be incidents where a child may be seems anxious or worried about something, you know, and like in my current class, there isn't an SNA. So it's just myself and the children and there might be, you know, something happened, that child is anxious and I really would like to give them like time, you know, five or	• Lack of Resources • Lack of Time • Teacher intervention

10 minutes just so that they can explain and then we can move on from this, you know, because it's not good for a child to get stuck in the cycle of worrying about something. But, you know, sometimes I feel that time is a big challenge, like because as I said before, you know, a lot of children are very comfortable with their class teacher. And if I could just have that time you know. This is something that it's definitely difficult to deal within in the context of the classroom	• Teacher- pupil relationship

Phase 3: Creating initial themes.

This phase involved the development of initial themes by clustering codes that shared similar concepts or ideas. This process aimed to discern meaningful patterns in participants' diverse perspectives and experiences. For example, initial codes, including “Timetabling SET”, “Appointing Posts”, and “Investing in Teacher Resources”, were amalgamated together under one overarching code, “Principal Administrative Responsibilities”. In order to enhance clarity, some codes were also split. For example, the code “Staff Skills” was divided into “Staff Qualifications” and “Staff Interpersonal Skills” in order to facilitate a comprehensive investigation of each code. This process allowed codes of similar meanings to ultimately be grouped under overarching themes. For instance, the above codes of “Staff Culture”, “Staff Skills”, and “Staff Wellbeing” were clustered with other tools used to support pupil wellbeing needs within the CoS, under the overarching theme “Staff Resources”.

Phase 4: Reviewing Themes

This phase involved refining and defining themes in order to ensure the robustness and clarity of identified themes (Braun et al., 20016). Initial themes were iteratively reviewed, defined, and named in order to capture the essence of the data and the participants' experience accurately. Braun and Clarke (2006) emphasise that themes should be internally consistent and distinct from one another while also relating to the entire dataset, reinforcing the importance of a thorough and rigorous approach to thematic analysis. It was decided that some initial themes were too broad and failed to capture nuances in the data set effectively. To address this, themes were restructured into subthemes, allowing for a more focused and precise representation of the extracted data, for example, the overarching theme “Wellbeing Orchestrators” was divided into

‘Intervention in Action’, ‘CT as Assessment Tool’ and ‘Initiating the Continuum of Support’ in order to capture and comprehensively explore nuances in the role of the Class Teacher. A thematic map was subsequently created to illustrate the entire data set, capturing “the relationship between codes, between themes, and between different levels of themes” (Braun et al., 2006, p. 89).

Phase 5 and 6: Defining and Naming Themes and Producing a Report:

During the fifth phase, the focus shifted to reviewing and refining the candidate themes for coherence, clarity, and comprehensiveness. This involved ensuring that the titles assigned to each candidate theme could accurately capture the content of the subthemes included. Several candidate theme names were subsequently refined and edited into more concise and informative titles. For example, upon reflection, it was decided to change the theme “Spearheading Whole-School Support” title to “Keeping the Wheels on the Track”. The metaphor of keeping wheels on track suggests the dynamic and multifaceted responsibilities of school principals, emphasising not only leadership in whole-school processes but also the intricate and delicate balance undertaken to ensure the smooth functioning of various components, such as leading change and allocating resources. It was believed that this more accurately captured the principal's role and the respective subthemes' content.

Candidate themes were mapped on the CHAT framework in preparation for the sixth phase, which involved the final report's write-up.

Appendix N

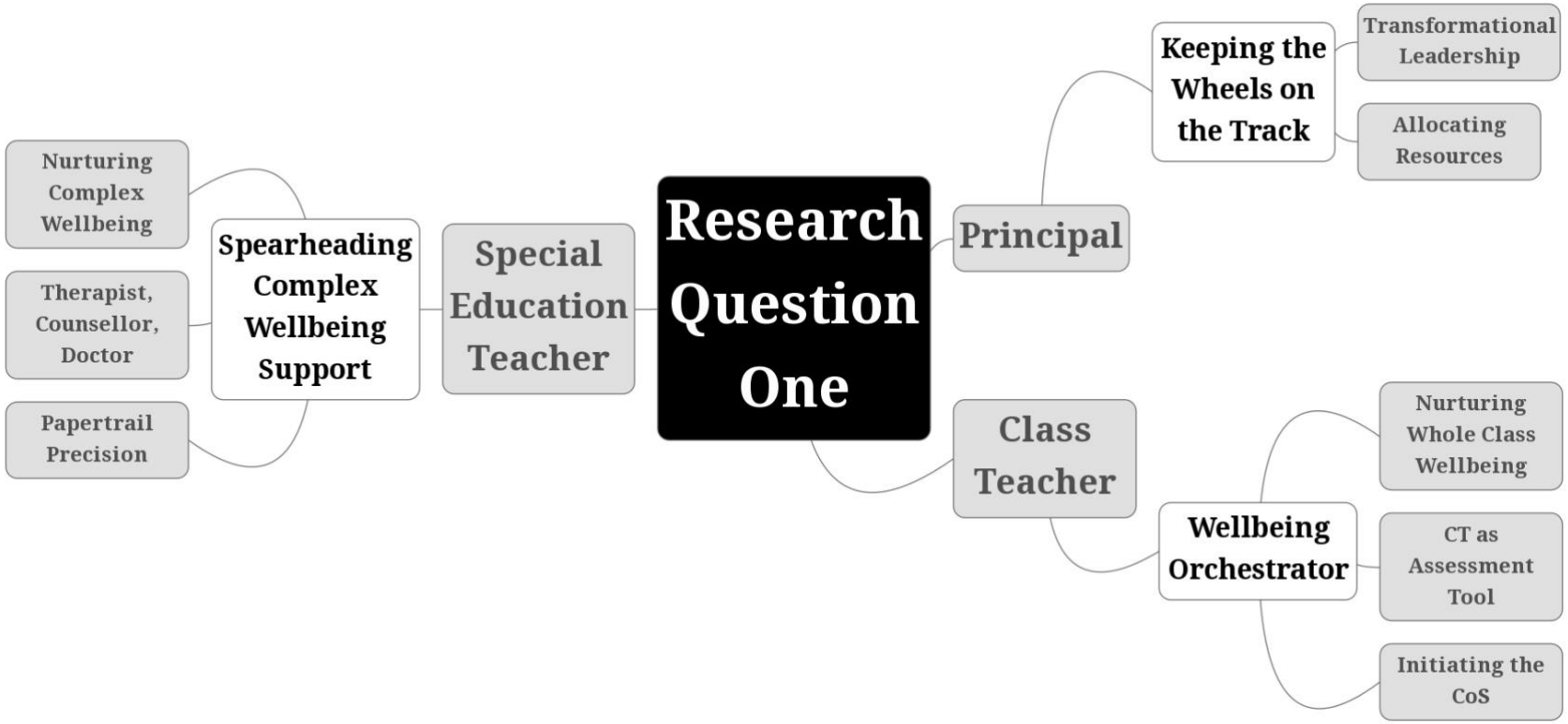
Sample of Direct Quotes, Final Codes, Subthemes, Themes within CHAT node.

Direct Quotes	Codes	Subthemes	Themes	CHAT Nodes
P1: I suppose firstly I have to ensure that teachers have everything they need in order to teach wellbeing. If a class teacher comes to me and they say that they want to attend a course on Friends for Life, or The Incredible Years, we will give them financial help. If they need to attend a course, if they need to, if they want to get other books and resources, there's always, you know, there was never a problem. It's my job to encourage them to express what they need and what they want. And if they have any particular needs about particular students with wellbeing problems, that I can be their advocate in planning meetings with NEPS. There's a lot of planning and paperwork involved. I ensure that while I oversee the appointment of post-orders and pick people who have a particular interest in various areas, be it PE, be it the Green Schools, be it healthy eating, be as teachers in charge of the choir that post orders are appointed who will promote these different areas for children. I have to ensure, you know, that we have post holders that are very involved. And I've only actually appointed one in the last few weeks, who will be in charge of the promotion of wellbeing.	Supporting Teachers Financial Oversight Advocacy for pupils with NEPS. Strategic Appointment of Post-holders.	Allocating Resources	Keeping the Wheels on the Track.	Divison of Labour.
SET 1: The principal is very important with the Continuum, because in our school, the principal is in charge of all the team and in charge of the assessments and everything. If you want to give a child some SET time or make any referrals you have to engage the principal. SET timetables are made up by the principal and all. All assessments and dealings with outside agencies are through the principal.	Timetabling Advocacy for pupils with NEPS.			

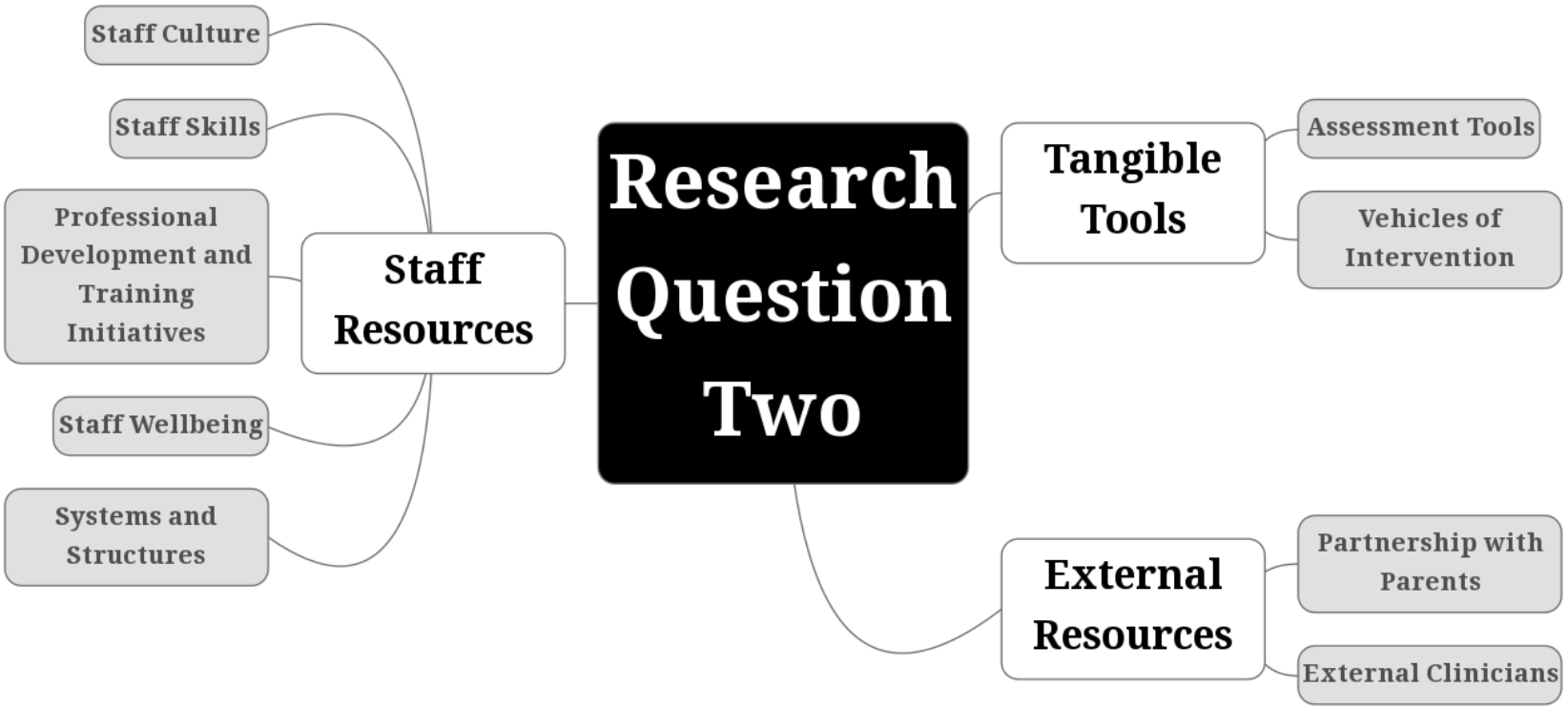
P2: In ways I feel like my role is not so much delegating but focusing people on, you know, focusing on wellbeing and getting information about different classes and children from middle management. So they report back on various aspects of wellbeing and various aspects of support that's needed within the school. So, as principal I make sure that's recorded every month, you know, because you kind of must have a full understanding, because it's not kind of haphazard anymore. Teachers send a monthly report to me before I go on to inform the Board of Management and the psychologist when they come in. So, for me, it's kind of being on top of certain children who are targeted, who need more help, making sure they don't fall by the wayside. So once you have that, read reports when they're there, those reports then go together and form my report to the Board of Management. So I am in charge of sourcing the supports we need, you know, what kind of counselling someone might need, but then if we need to resource this really, they say what resources are needed, where our finances are then and say, Can we get extra help in here? Can we get, you know, can we pay privately for this-which which we've done many, many, many times, pay privately for the professionals to come in."	Paperwork. Advocacy for pupils with NEPS. Financial Oversight

Appendix O

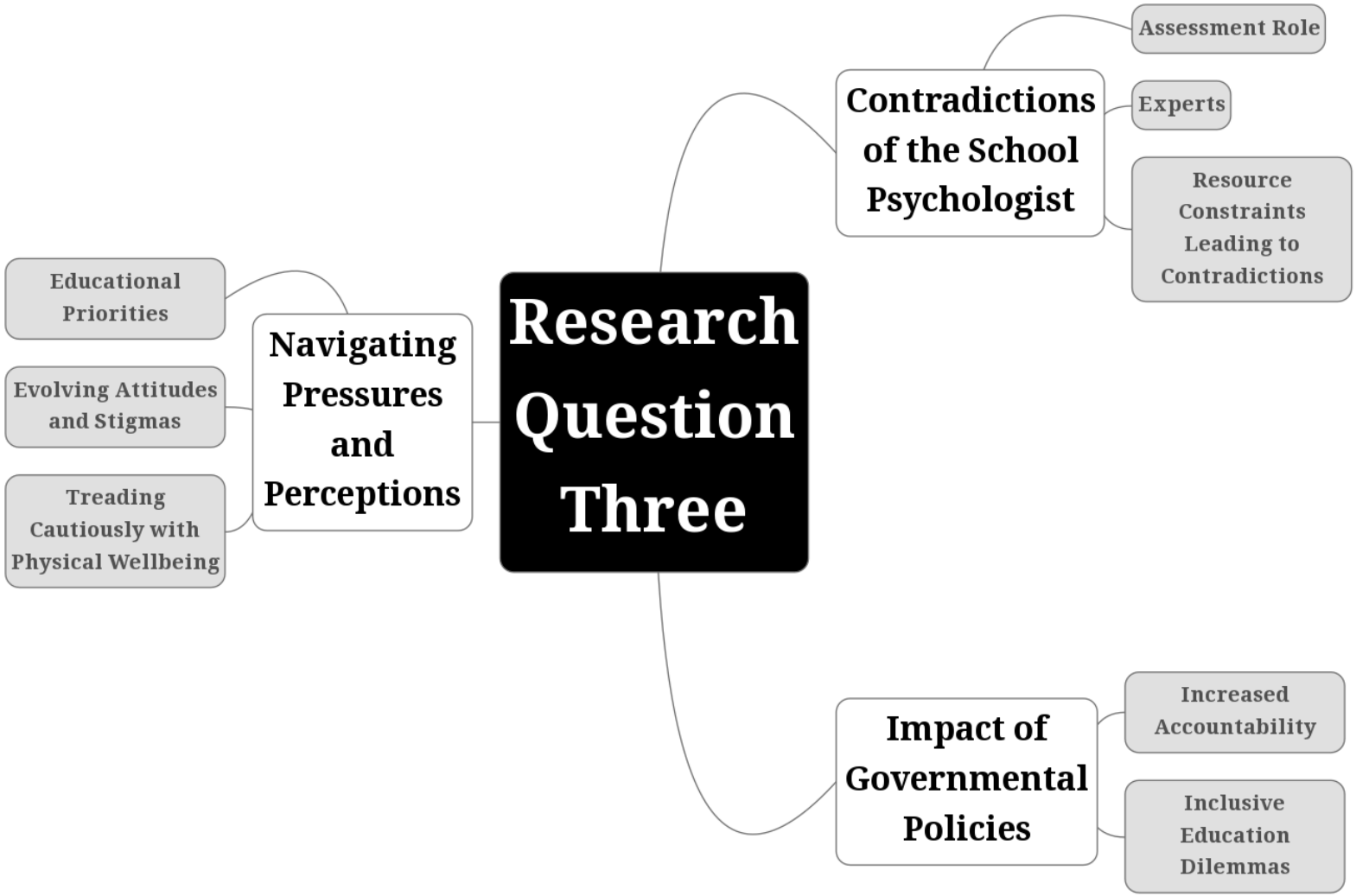
Thematic Map One



Thematic Map Two



Thematic Map Three



Appendix P

Extracts from Reflexive Journal

Extract 1:

P2 seemed a bit nervous at the outset of the interview. I reassured him of confidentiality and anonymity and spent time establishing a rapport. I was struck by his clear passion and understanding of wellbeing. He was exceptionally familiar with initiatives, and school procedures and was a genuine advocate for the wellbeing of pupils. This seems rooted in the DEIS (disadvantaged) status of the school, as throughout the interview there were lots of references to "a school like this". Wellbeing seems to take centre stage here- more so than in School 1. Perhaps this is rooted in increased funding or the difference in cultural prioritisation of academic success. P mentioned GUILT several times throughout the interview. He discussed bringing worries home/ how what's going on for certain families and pupils is often on his mind. I found it difficult not to spend longer on this and fall into a more therapeutic role. Is there enough support for DEIS teachers wellbeing needs? There was a brief interruption at 12.55pm for Radio na Scoile lunchtime initiative where one class broadcasted their class news on the school intercom. The interruption did not disturb the interview; if anything, it added to the sense of rapport. I was greatly struck by the sense of belonging evident by pupils in this school.

Extract 2

My interview with CT2 brought up some feelings from my time as a mainstream class teacher in a DEIS school from 2015-2019. I found myself feeling compelled to share personal experiences with CT2 throughout the interview, as her experiences really seemed to parallel mine. In particular, I noted that her descriptions of finding it hard not to right every wrong and the subsequent feelings of isolation and pressure resonated with my own experiences. We both acknowledged the significance of relational practices in our approaches to supporting pupils. We discussed the importance of fostering genuine connections with each child, expressing praise, and showing sincere interest in their wellbeing. Despite initial concerns about overstepping my role as an interviewer, upon reviewing the transcript, I realise that sharing these common experiences fostered a deeper and more nuanced conversation (compared to last week's interview with CT1

where I did not reveal personal insights and experiences) Moving forward I will consider the value of personal connections in fostering richer conversations during interviews.

Extract 3:

The data analysis stage has been more challenging than expected- mainly regarding its time-consuming nature and the depth of immersion required for data analysis. Taking regular breaks and scheduling intervals between transcripts has been crucial to combat fatigue/ overwhelm at the volume of data, and I realise the importance of approaching each transcript with a fresh perspective. I have gained a newfound appreciation for the *iterative* nature of the process. Realising that multiple drafts and revisions are necessary to refine the final themes is almost comforting.

Extract 4:

Throughout my qualitative analysis, I have relied on Braun and Clark's 15-point checklist to ensure the integrity and efficacy of the process. While working on the 'dialogue' component of 'information power', I was propelled to reflect on my approach to challenging participants during interviews in order to achieve robust dialogue, i.e., have I been effectively challenging my participants? To address this concern, I spent time reviewing each transcript. During my interview with SET1, she described how wellbeing was not supported at tier 3 of the CoS as resources were allocated based on diagnoses for this more intensive level of support. In response, I probed whether she believed this practice was unique to the context of her school or a more widespread occurrence, considering the new allocation model. I believe this challenge effectively conveyed a sense of respect for her experience while subtly referencing the SETAM policy with regard to needs-based allocation. Similarly, in discussing physical wellbeing with CT3, I referenced the DE's conceptualisation of wellbeing in order to challenge her conceptualisation of wellbeing needs. This allowed me to gain a deeper awareness of her conceptualisation of wellbeing and, further, how wellbeing is conceptualised on the ground.