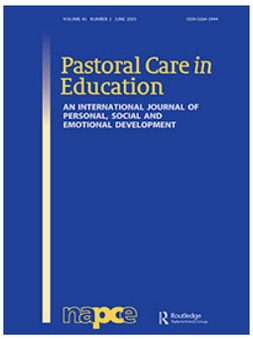

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From policy to practice: Education practitioners' engagement with Wales' framework on embedding a whole-school approach to emotional and mental health and well-being

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ABSTRACT

Good mental health and well-being are fundamental to the growth of children and young people, underpinning their ability to form healthy relationships and build enduring emotional resilience. In Wales, rising mental health concerns have prompted the integration of well-being into education policy, culminating in the publication of the Framework on Embedding a Whole-School Approach to Emotional and Mental Health and Well-being. This study explores how education practitioners (EPs) in Wales interpret and implement the Framework within their school settings. Using a mixed methods approach, survey responses from 85 EPs and qualitative data from 26 participants in focus groups and interviews were analysed to identify facilitators, barriers, and support needs. Findings reveal wide variability in awareness and implementation, with stronger uptake observed where leadership, collaboration, and professional learning were prioritised. Key challenges included unclear role responsibilities, limited Welsh-medium resources, and insufficient staff training. Despite these barriers, many reported that the Framework has helped embed well-being into the curriculum and school culture, fostering more preventative and sustainable practices. The study underscores the importance of targeted guidance, ongoing capacity-building, and equitable resource distribution to ensure consistent and meaningful application across schools. These findings offer valuable insights for policymakers seeking to bridge the gap between national aspirations and practical delivery, and reinforce the need for systemic support to embed whole-school well-being as a universal priority in Welsh education.

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Introduction

Good mental health and well-being are integral to a healthy child and young person's development, leading to positive social and emotional behaviour and laying the foundations for better mental health and well-being later in life. Recent UK data show a sharp rise in mental health issues among 6–16-year-olds, with one in six likely to have a mental health disorder and nearly 40% reporting a decline in well-being (NHS, 2021). This is also reflected in Wales, where mental health remains the most frequently raised concern with

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the Children's Commissioner for Wales by children, young people, and their parents or carers (School Health Research Network, 2023).

In response to rising mental health concerns, well-being has become central to education and social policy in Wales, with the Well-being of Future Generations Act (WG, 2015) requiring public bodies to promote holistic well-being. Following major educational reform based on recommendations from the Successful Futures report (Donaldson, 2015), the introduction of Curriculum for Wales (CfW) (WG, 2022) for 3–16-year-olds shifted from a prescriptive content-based curriculum to a purpose-driven process-oriented approach to encourage a continuum of learning. This focuses on developmentally appropriate practice, embedding well-being as a core element. To support this shift, the Welsh Government (WG) introduced additional guidance and resources aimed at embedding emotional and mental health across all aspects of school life. One of the most significant developments was the publication of the Framework on Embedding a Whole-School Approach to Emotional and Mental Health and Well-being (WG, 2021a). Designed to complement and operationalise the aspirations of the CfW, the Framework provides a structured, system-wide approach that enables schools to move beyond isolated well-being initiatives and toward a consistent, sustainable culture of support for learners and staff alike.

The Framework is a key policy tool that supports the practical realisation of the CfW with confidence, resilience, empathy, and social-emotional skills central to one of the four purposes of developing 'healthy, confident individuals.' It also supports the Health and Well-being (HWB) Area of Learning and Experience (AoLE), which is one of six core learning areas within the CfW that focuses on supporting learners' physical, emotional, and social health. It includes five 'what matters' statements that cover topics such as mental health, emotional regulation, physical well-being, decision-making, and healthy relationships – equipping learners with more depth and breadth of skills, knowledge and understanding as they develop (WG, 2022). The Framework, similarly to the vision of CfW, recognises that mental health is not only an individual issue but one shaped by the broader school environment, including staff well-being, relationships, and leadership. This enables a joined-up approach so that the knowledge and skills taught in the HWB AoLE are reinforced consistently through other AoLEs, school culture, pastoral care, and staff role-modelling. In short, while the HWB AoLE sets out what learners need to know and do, the Framework ensures the conditions are in place for this learning to be meaningful and sustained through a consistent, system-wide approach. To support implementation, the WG increased local authority funding to drive whole-system collaboration across education, health, social care, and the voluntary sector. Resources were allocated to extend counselling services to Year 6 and secondary pupils, and schools were encouraged to participate in the Welsh Network of Healthy School Schemes (WNHSS) and access external training through mental health organisations such as Place2Be and the Mental Health Champions scheme. Alongside this, the School Health Research Network (SHRN) – a collaboration between the WG, Public Health Wales (PHW) and Cardiff University – is key in generating data to inform practice (PHW, 2023). Through biennial surveys, SHRN provides schools with detailed reports on learners' well-being and school climate. Its most recent 2021/2022 survey of over 123,000 learners revealed a worrying decline in young people's mental health, with increased loneliness and higher rates of depressive symptoms compared to 2019/2020 (SHRN, 2023). These findings reinforced the need for

continued monitoring and support to sustain the ambitions of the Framework (Hewitt et al., 2018).

Despite this strong policy infrastructure, implementing the Framework across schools in Wales has faced several challenges. While embedding HWB within a curriculum has been widely praised for its links to improved academic outcomes (Clarke, 2020; Kaya & Erdem, 2021; Țepordei et al., 2023), most teachers report insufficient training in this area, particularly in mental health, which requires specialist expertise. Further challenges in embedding the Framework include the emphasis on teacher autonomy in designing localised curricula (WG, 2022) without sufficient subject knowledge and confidence, staff capacity and well-being. Teacher well-being remains a critical issue that has yet to be adequately addressed, with research in Wales showing staff mental health is at an all-time low due to pandemic-related stress, workload, and burnout (Marchant et al., 2021). Evidence consistently shows that teacher well-being is vital to learner outcomes (Roffey, 2012), meaning that without adequate support for staff, efforts to improve learner well-being may fall short. Recent findings from the 2023 SHRN report also highlight that schools where staff report higher levels of support and well-being are more likely to see positive outcomes in pupil emotional health, indicating a reciprocal relationship between staff and learner well-being (SHRN, 2023). Furthermore, while the Framework encourages a whole-school ethos, some schools struggle to move beyond tokenistic or piecemeal implementation, often due to a lack of capacity or resources to enact the full scope of the Framework.

The WG's research bulletins on the Framework (WG, 2023b [Part One]; WG, 2024 [Part Two]) provide an evolving picture of its implementation across schools in Wales. Part One highlighted widespread awareness of the Framework, particularly in secondary schools, and early engagement with self-evaluation tools. However, Part Two revealed ongoing challenges in practical implementation, including inconsistent communication with CAMHS in-reach teams, limited awareness or uptake of WG funding, and low usage of key well-being guidance and training resources. Findings also highlighted inequalities in access to counselling services, particularly for primary-aged learners, and ongoing pressure on service capacity. Despite these challenges, most schools reported having a strategic lead and action plan, with learner involvement in well-being strategies increasing. These insights underscore the need for sustained support, clearer guidance, and targeted resource development to ensure the Framework can be effectively embedded in all school settings.

More recently, a qualitative study published in 2025 highlighted several barriers to effective implementation, including increased pupil mental health challenges post-COVID-19, insufficient in-house and external support services, staff well-being concerns, and significant workload pressures, particularly due to the concurrent rollout of the CfW. These factors have left staff feeling underprepared to address complex mental health issues, a situation exacerbated by limited access to relevant training (Brown et al., 2025).

Considering these challenges, this present study aimed to capture the lived realities of schools working to embed the Framework, with a particular interest in EPs' interpretation of it. Using a mixed methods approach, an online survey, focus groups and semi-structured interviews were conducted with EPs. The study explored where schools are in the process of embedding the Framework – what supports successful implementation, what obstacles persist, and what resources or strategies are needed to support them

further. This research offers a unique opportunity to explore EPs' perspectives on the Framework to inform more responsive policy development, ensure the Framework evolves in line with practitioners' needs, and help bridge the gap between national aspirations and practical, sustainable delivery at school level.

Research questions

(1) To what extent are practitioners in Wales interpreting and implementing the Framework?
(2) What obstacles and facilitators exist for practitioners, and what is needed to ensure schools fully embed the Framework?

Method

Participants and procedure

The study included survey responses from 85 EPs, along with focus group and interview input from an additional 26, all based in Southwest Wales, UK. Data were collected across English- and Welsh-medium primary, secondary and all-age schools from March to October 2023, which gave schools over a year to begin the Scoping stage of the Framework (stage one) and allow EPs to express their thoughts and views on their progress. Using Qualtrics Survey Software, a paragraph outlining the research and data protection and a questionnaire link were sent to schools. EPs were assured that the survey was voluntary, anonymous, and confidential. The questionnaire took approximately 15–20 minutes to complete.

Those who participated in the focus groups and interviews were already using the Framework. The authors contacted 12 schools, eight of which responded and were happy to participate. All three authors conducted focus groups and interviews, which were recorded with a Dictaphone. The focus groups and interviews lasted between 20 and 50 minutes. The authors' University granted ethics approval for the study.

Materials

The 21-question survey had a mixture of closed (15) and open-ended questions (6). The first seven questions asked about the background characteristics of EPs and their schools, such as gender, the age range of learners, their role, and years of experience. Question eight asked if they were aware of the Framework. Those who answered 'No' (23) were taken to the end of the survey and thanked for their time and participation. Questions nine and ten were open-ended, requiring EPs to state the benefits and challenges posed by the Framework in their practice. The following seven questions focused on their role and progress in the Scoping stage (stage one of the Framework). Question 18 referred to general resources used for emotional and mental well-being in their practice. The final three questions asked EPs to outline any gaps in their resources and what could be done to improve the embedding of the Framework into their current practice.

The focus group and interviews used 11 semi-structured questions, which particularly asked how their schools implemented the Framework and their experiences using it. We were also interested in how they interpreted the Framework, so we asked about their understanding of it and the terms well-being and mental health. Finally, we asked them

what further support and resources are needed to help them embed the Framework as a whole-school approach.

Analysis

The summed data and percentages from the surveys are presented in Tables 1 and 2. Several chi-square goodness-of-fit tests were calculated to determine differences

Table 1. Background characteristics of the EPs.

EP responses		*n* = 85	%
Gender	Male	17	20
	Female	67	79
	Non-binary	1	1
The age range of learners	Foundation learning (3–7 years)	14	16.5
	7–11 years	17	20
	Secondary (11–19 years)	41	48
	All-age (3–19 years)	13	15.5
Geographical area	Mid/West Wales	30	35
	South/East Wales	23	27
	Swansea	32	38
Number of children in their school	1–499 (small)	33	39
	500–999 (medium)	21	25
	1000+ (large)	31	36
Role in school	Head/Deputy	9	11
	Teacher	47	55
	TA/Specialist staff (Nurture/ELSA)	17	20
	Pastoral/well-being leads/ALNCo)	12	14
Years of experience as an EP	1–10 years (short-term)	30	35
	11–20 years (medium-term)	34	40
	21+ years (long-term)	21	25
Are you aware of the Framework?	Yes	62	73
	No	23	27

Table 2. Responses relating to the Framework.

EP responses		*N*	%
Where is your school in the cycle of embedding the Framework	Not started	2	4
	Scoping stage	28	62
	Action plan	11	24
	Evaluation	1	2
	Revisiting the action plan	3	6
Responsibility for the Scoping stage	Me	9	19
	Leaders	25	51
	All staff	5	10
	Don't know	10	20
What tools did you use to assess strengths/needs?	Direct Observations	11	39
	Accessing people's views	7	25
	Pre-existing school data	8	29
	External data	2	7
What resources do you use for emotional and mental well-being in your practice?	School-based activities	33	23
	Curriculum-based activities	56	39
	External specialised agencies	13	9
	WG resources	22	15
	Activities from CPD courses	21	14
What might help you embed the Framework into your current practice?	Clearer guidance	15	19
	Tailor-made resources	24	30
	CPD training	26	33
	Specialist input	14	18

across responses. Additionally, chi-square tests for independence were used to examine associations between several demographic questions (i.e. school size and role) and awareness of the Framework. Open comments were analysed using content analysis (Krippendoorf, 2018). The first author coded the entire dataset, and the second rated every 10th response (10% of the dataset) to ensure inter-coder reliability. Disagreements were discussed between the two raters until an agreement was reached.

The focus groups and interviews were analysed using thematic analysis, an inductive approach to pattern recognition and theme identification that provides a rich and detailed account of data. The data analysis followed the steps outlined by Braun and Clarke (2006), which began with the second and third authors transcribing each focus group and interview. Transcripts were read and re-read for accuracy and to familiarise themselves with the data. On the last read-through, the authors noted their general thoughts and impressions. The production of codes involved re-reading each transcript to identify emergent codes within the data. Coding was carried out independently before a meeting to compare and discuss how they were generated. The initial coding agreement was 94%, and discrepancies were discussed until a consensus was reached or data re-coded. To ensure rigour and credibility, codes were checked against the initial descriptions developed, and a final total of 62 codes was agreed upon to represent an agreement of almost 99%. Next, codes were grouped into seven themes, with 17 sub-themes, before clustering and renaming themes into five main themes with 13 sub-themes. Trustworthiness and authenticity were determined by multivocality (Tracy, 2010), which encourages researchers to provide space for multiple, varied voices and opinions. Such opinions are presented through thick descriptions and direct quotations, which are explored in the qualitative findings section.

Results

Survey results

Table 1 shows that the majority of respondents were female from secondary schools. Chi-square analyses indicated that significantly more teachers completed the survey than from any other job role (47, x^2 (6) 121.95, $p < .001$). Most respondents had over 10 years of experience working as an EP (55, x^2 (1) 7.35, $p = .007$). Significantly more EPs were aware of the Framework than not (62 and 23, respectively, x^2 (1) 17.89, $p < .001$). Sixty-two respondents were aware of the Framework, which was significantly higher for secondary school EPs (39%), x^2 (3) 9.02, $p = .029$.

The size of the school also affected awareness. Those in small and medium-sized schools were more likely to be aware than not. In contrast, over half of EPs in large schools with over a thousand learners were not aware of the Framework (x^2 (2) 1978, $p < .001$). Although overall significance was not reached (x^2 (3) 5.74, $p = .125$), almost half of TAs/specialist staff were not aware of the Framework (47%). Significant differences in awareness also arose across geographical areas. EPs from the Swansea area were more likely to answer yes to awareness (48%), whereas those from mid/west Wales were more likely to answer no (57%; x^2 (2) 11.74, $p = .003$).

The *n* number differs for some of the responses in Table 2 due to the inclusion of optional questions and non-responses. When asked, 'Where is your school in the cycle of embedding the Framework?' Of the 62 who were aware of it, 45 responded. Almost two-thirds (62%) were in the scoping stage (assessing the school's needs/strengths (x^2 (4) 57.11, $p < .001$).

Out of the 49 responses relating to the responsibility for the scoping stage, senior management appeared to hold responsibility in most cases (25), (x^2 (3) 35.98, $p < .001$). Of the nine who selected 'me', five were senior management, and four were those responsible for well-being at the school. Ten EPs did not know who was responsible, and the remaining five cited 'all' held responsibility.

EPs were also asked what they did during the scoping phase. Assessment, evaluation tools, and action plans were the most prevalent responses for all who responded, followed by consultation with others (parents, staff and governors). Table 2 shows that most EPs used direct observations and pre-existing school data, such as absence records (39% and 29%, respectively). Twenty-five accessed people's views to assess strengths/needs of the school, and the remaining EPs used external data, such as Estyn reports/well-being index (7%). Twenty-five responded to the question regarding feedback on what the school had done during the Scoping phase. Almost three-quarters (17) had received information during meetings or INSET days. Table 2 shows that EPs utilise various well-being resources, with curriculum-based activities featuring the most (39%; x^2 (4) 9.79, $p = .044$). There was no significant association between the resources used for emotional and mental well-being across school-age groups x^2 (12) 1.95, $p = .999$), indicating no preference for a particular resource across different school types.

Responses to the open-ended questions on benefits and challenges allowed us to explore how EPs felt about the Framework. Many EPs mentioned the importance of the Framework in raising awareness of mental health and well-being. In particular, the Framework enabled time and support for staff to focus on well-being issues within their teaching and, more widely, within the school ethos and vision. For some, for the first time, the promotion of a whole-school approach *'put well-being as a priority'* and *'enables equality, equity and justice in their well-being provision that influences effective learning'*. For one EP, the Framework allowed schools to put *'well-being at the heart of the curriculum so that it is as much of a focus as language and literacy, mathematics and numeracy'*. It was also clear that through the Framework, *'positive relationships and resilience'* could develop, which *'help to reduce the stigma surrounding mental health'* and promote *'preventative rather than interventionist approaches to emotional and mental health and well-being'*.

Several challenges were raised. Some respondents identified time as one of the significant challenges, explaining that they needed *'quality time'* to expand on their knowledge and understanding of well-being, discuss and share information with all stakeholders, and deliver specific programmes. EPs also expressed that time was scarce for appropriate staff training, with one respondent stressing that courses are *'rushed'* and are mere *'samples'* of what they need. They spoke of needing more time for tailored well-being approaches to help address learners' emotional and mental health needs and engage with their well-being.

Some more general challenges included added pressures with the introduction of CfW, the Additional Learning Needs Code of Practice (ALNCoP, WG, 2021b), and an increase in learners' mental health and emotional needs following the COVID-19 pandemic. The lack

of knowledge and time to implement the Framework in an *'already full curriculum'* was evident across many EPs. For some, well-being's evolving and individualistic nature led to comments such as *'the need for bespoke support for individuals and different schools'*. There also appeared to be concern about attitudes towards implementing a whole-school approach. For example, *'getting all staff on board'* and *'the challenges of getting everyone speaking from the same book'*. Getting the support of stakeholders such as parents and outside agencies is also a challenge, which supports concerns from the EPs in *'acknowledging that the Framework's vision should be everyone's responsibility'*.

When asked to comment on the gaps in resources, responses indicated they were insufficient, especially regarding limited Welsh medium resources, which affected the time staff spent translating material and posed a challenge to receiving guidance from external agencies. A need for support from various external agencies was stressed, and a call was made for more regular *'drop-in'* and conversational-style support from experts in the field, such as the NHS. Most comments related to the need for more support and training. In particular, EPs cited *'more CPD for staff'*, specifically, *'regulation and calming strategies'*, *'resources for staff well-being'* and *'trauma, ASD, ADHD, Poverty'*.

How EPs monitor and assess the effectiveness of their resources and strategies for well-being highlighted issues in monitoring practices. Of the 44 responses, ten were either unsure or not monitoring effectiveness, while six believed it was someone else's responsibility. Almost half (21) were monitoring effectiveness by speaking with learners and staff, with the remaining seven responses selecting external tools such as the well-being index. The final question asked EPs to select what they think might help embed the Framework into their current practice. The responses in Table 2 show that the largest percentage of responses were for tailor-made resources and CPD training (30% and 33%, respectively). The remaining 37% comprised clearer guidance on the Framework and more specialist input (19% and 18%, respectively).

Qualitative findings

Exploring how EPs in Wales interpret and implement the Framework reveals a complex picture of understanding, commitment, and challenge. The findings presented here are organised into five overarching themes with 13 sub-themes. Each theme offers insight into the extent of engagement with the Framework and the factors that facilitate or hinder its implementation.

Theme 1: Interpretation and Understanding of the Framework

A key determinant of how effectively the Framework is implemented is how it is interpreted at the school level. The data reveals that practitioners' understanding of the Framework significantly influences how it is prioritised, communicated, and embedded within school culture.

Conceptual Clarity and Misconceptions

While many practitioners acknowledge the importance of well-being, conceptual clarity varies. Some practitioners possessed a deep understanding of the Framework's purpose, viewing it as a foundation for holistic education that links well-being directly to learning outcomes and school culture. However, misconceptions persist, for instance, well-being was sometimes perceived through a deficit lens, as a reactive response to pupil behaviour or mental health issues, rather than a proactive, universal, and preventative

approach. In some contexts, well-being was reduced to tokenistic efforts, such as isolated events or one-off activities, rather than being viewed as a continuous, embedded part of the curriculum and school ethos. For one EP, *'health and wellbeing is not a curriculum subject, 'it's often in reaction to something, the majority of it's caught not taught, a reaction to something in the playground, and then that becomes its own lesson . . . ' (FG4, P6).*

Whole-School Ethos

Practitioners who embraced a whole-school ethos demonstrate a more embedded approach. For these schools, well-being was not confined to PSHE lessons or one-off interventions; it permeates teaching, learning, relationships, and leadership. For example, *'it just naturally integrates into things, it is the centre, the core of the curriculum' (FG4, P7)*. This ethos views well-being as 'everybody's business'. It is supported by internal collaboration, regular consultation with stakeholders, and a values-driven commitment to well-being, *'all staff are involved, all stakeholders, pupil groups' (FG2, P2).*

Alignment with Curriculum and Policy

Understanding was often enhanced when the Framework was aligned with broader educational policies, such as the CfW and the ALNCoP, *'with the new CfW, we are very much looking at how we can incorporate all these different strategies throughout our curriculum' (FG2, P3)*. Schools that successfully integrated well-being into their School Development Plans and curriculum planning tended to have a more coherent, shared vision for well-being, supported by collaboration among staff and leadership. For example, '*the whole point of the Framework is that it is through everything. It's about all stakeholders . . . it's not about teaching a science lesson in isolation – it goes through every single thing you do' (FG2, P3).*

Theme 2: Implementation of the Framework

Implementation of the Framework differed widely, reflecting differences in school context, leadership priorities, staff capacity, and levels of understanding. In some schools, implementation was strategic, intentional, and rooted in holistic, child-centred practices. These settings adopted flexible, reflective approaches that were responsive to the needs of their learners, using a combination of evidence-informed practice, local data, and professional judgement to guide their actions.

Approaches to implementation

In schools where the Framework was being enacted meaningfully, practitioners adopted child-centred and holistic strategies tailored to their contexts, *'we have pupil groups leading things, and we give children ownership of different things' (FG2, P4)*. One EP gave an example of a tailored well-being activity open to all children, *'we do something called "chat and chomp" . . . making sure that everybody was having the opportunity to have breakfast . . . it was a chance just to be in that nurturing, welcoming environment where they could open up, share how they feel with four or five other children' (FG1, P2)*. Reflective, data-driven practices that draw on local knowledge and existing resources and align with broader educational initiatives were also highlighted; *'we've utilised the SHRN questionnaire to develop and plan provision and experiences for the learners . . . we use the data from the pupils too . . . (Interview 1)*. In these examples of strong implementation, schools embedded emotional and mental well-being across subjects, daily routines, and school culture. Staff engaged in reflective dialogue, evaluating the impact of their strategies and making adjustments based on what works best for their pupils, *'it does highlight things*

that you need to do and things you need to go back to and things that maybe you did before that you're not doing now, or things that you could do to enhance things and move things forward' (FG2, P1).

Collaboration and communication

Collaboration and effective communication were essential to the successful implementation. For many, effective practice often involved engagement with families, external agencies, and community partners. One school spoke of their work with CAHMS, *'CAHMS created an action plan with traffic lights. I then work with the well-being lead at the school' (FG4, P5)* and parents, *'we had a lot of meetings with parents on RSE [Relationships and Sexuality Education] . . . to show them exactly what we use. There were lots of misconceptions . . . but parents were quite happy that we'd answered their questions and put their minds at ease' (FG1, P1/2)*. The importance of internal communication was also evident, *'the information gets shared in files everyone has access to. It is a part of our weekly well-being bulletin. . .' (FG6, P4)*. This networked approach allowed for adaptive and responsive strategies built on shared learning.

Limited implementation

Conversely, other schools faced challenges that limited the depth and consistency of implementation. For some, a lack of clarity, time, or resources resulted in sporadic or surface-level activities that did not reflect the intended whole-school approach. This was evident in the following statements: *'maybe more should be a part of it, at the moment it's only the teaching staff that are involved (FG4, P3), . . . they don't have the training that we have, so it's not whole-school' (FG4, P10)*. Even when schools valued well-being, competing priorities, such as curriculum pressures and staffing constraints, made it difficult to fully realise the vision set out in the Framework, as seen in one EP response, *'it's a juggling act . . . it is hard to fit everything in . . . and when new things come in, even though this is vital and important, it's like . . . when am I going to fit that in now' (FG2, P1)*. In these cases, implementation tended to rely on the commitment of individual staff members rather than a shared, coordinated effort, leaving it vulnerable to inconsistency and unsustainability.

Theme 3: Facilitators to Implementation

Several key factors emerged as facilitators that supported the successful implementation of the whole-school approach.

Leadership and Accountability

In schools where leadership teams actively champion the Framework, there was a clearer vision, stronger alignment with strategic priorities, and a sense of shared ownership across the whole staff. For one EP, implementing the Framework *'was too much for one person, so I brought it to a staff meeting, and some teachers said we do this, and we do that, and it was so good to link it with everyone contributing' (Interview 2)*. Effective leaders prioritised well-being in policy and planning and modelled its importance in everyday interactions and decision-making. By delegating responsibilities and empowering staff at all levels, leadership fostered a collaborative culture in which well-being was truly integrated, not just aspirational. The same EP praised management support, *' . . . our senior leadership team is really good. They'll give me time for health and well-being. No pressure, no stress'*.

Resources and Professional Learning

Schools that were well-supported through funding, time allocation, and targeted CPD were better positioned to embed well-being meaningfully. One EP spoke of how training opportunities enhanced staff confidence and deepened understanding to implement evidence-informed strategies with greater precision and consistency, '*the trauma-informed schools training has helped us in understanding some of the challenges of these pupils. . . and we're also looking at the behavioural policy in the school and how the trauma-informed can feed into that (FG7, P2)*. When professional learning was context-specific and ongoing, it improved knowledge and encouraged reflective, adaptive practice.

School and community relationships

Equally important were the relationships within and beyond the school community. A positive and trusting staff culture in which well-being was collectively valued created a strong foundation for implementation. Schools with collaborative teams, open communication, and shared values around well-being were more likely to sustain momentum and overcome challenges, evident in the following example: *'It's a culture. . . our support staff, even more so than the teachers, took charge of the project. The support staff member is like their class mum, so they have these lessons, chat or activities as individuals or groups to help those manage things (Interview 2)*.

Engaging parents and carers strengthened the home-school connection and reinforced consistent messages of support for learners. Many schools also benefited from community partnerships, which extended their capacity to meet diverse learner needs through additional services, fundraising, and joint initiatives. One EP stated, '*We will organise a coffee morning for parents during the summer term, and someone from CAMHS is going to come and do parenting sessions' (FG3, P2)*. These collaborative relationships, whether among staff, families, or external stakeholders, create the ecosystem necessary for whole-school approaches to thrive.

Theme 4: Barriers to Implementation

While many schools were committed to embedding the whole-school approach, several significant barriers hindered meaningful implementation.

Resource and situational constraints

A primary challenge was inadequate resources, including time, funding, and staff capacity. Many schools reported being under pressure to do more with less, and without dedicated time or financial support, even the most motivated staff struggled to implement the Framework effectively. Many EPs spoke of limited time, ' . . . *of being released to actually implement things and plan. You have half a morning a week. It's taken a long time to get the audit done, let alone the implementation of it' (FG2, P1)*. The demand to balance well-being with academic targets, often under tight accountability frameworks, deprioritised well-being initiatives, *'what you have at the moment is the new curriculum, and this is a lot of work and takes priority' (FG3, P1)*. Schools also expressed difficulty justifying sustained investment in these areas without explicit recognition of well-being in inspection criteria or national performance measures. Another persistent barrier was the one-size-fits-all nature of some external programmes or guidance, which may not align with individual schools' specific needs, cultures, or contexts. This left staff feeling disconnected from the Framework or uncertain about how to adapt it meaningfully.

The impact of COVID-19 further complicated implementation efforts, disrupting momentum and exacerbating well-being challenges among staff and learners. Many schools are still dealing with the aftermath, facing heightened emotional needs, increased staff burnout, and difficulties rebuilding consistent routines and relationships. Resistance to change also emerged as a notable barrier. In some schools, traditional views of education that prioritise academic attainment over holistic development limit the acceptance and prioritisation of well-being, . . . *'it can be difficult to change the mindset of staff away from information and assessment and curriculum' (FG3, P3)* and *'we are talking about a change of mindset in a very traditional system . . . , they see it [well-being] as school work rather than something for real life' (FG3, P2).*

Knowledge and confidence gaps

Some staff viewed the Framework as an additional responsibility rather than an integrated part of their professional role, particularly when they lacked clarity or confidence in applying it. For one focus group, staff knowledge and confidence appeared to be the main obstacle to implementation,

> I wouldn't be confident that they understand much about it. If I asked teachers in the staff room, in the corridor, what they know about it, they would know nothing. I haven't talked to all the teachers yet . . . we don't have enough opportunity to cascade further

(FG3, P2). Variability in understanding and training across staff members further contributed to uneven implementation, where the success of well-being initiatives relied too heavily on a few passionate individuals rather than being embedded in whole-school practice.

Theme 5: Support and Future Directions

Sustained support and clear strategic direction were essential to ensure the long-term success and evolution of the whole-school approach to emotional and mental health and well-being.

Capacity Building and Resource Development

Schools consistently highlighted the importance of capacity building through ongoing professional development and practical tools and resources that support staff in evaluating, adapting, and embedding their well-being practices. The frustration of limited access to resources was expressed by one EP, *'teachers are busy, and they are looking for things they can learn quickly and do straight away. . . they don't want to read a lot of information. . . there is no time. They want practical advice on how to help and what to do in the classroom . . . and giving information to parents (FG3, P1).*

The most effective schools were those encouraged to reflect on what works, drawing on both internal experiences and external research to evolve their approaches in a responsive, evidence-informed way. For one EP, *'the evaluation process is constant . . . we find ourselves going back. It's not a tick box. There are still things to improve' (Interview 2)*. This reflective practice allows schools to remain agile and adaptable, particularly in shifting priorities or emerging challenges. There was also a growing call for cyclical evaluation frameworks that help schools monitor progress, identify gaps, and refine strategies in a structured and flexible way. Schools that build on success stories and good practice, whether within their own setting or through networks with other schools, were better placed to create sustainable change. Sharing these examples of effective

practice more widely contributed to a broader culture shift across the education system, where emotional and mental well-being were fully recognised as foundational to educational achievement. Future directions also focused on emerging areas of need, such as transitions between educational stages, the role of outdoor and nature-based well-being activities, and more targeted support for vulnerable groups.

Staff well-being

A critical aspect of future planning was recognising that staff well-being is inseparable from pupil well-being. As one EP explained,

> at any time you have a group of staff with their own needs . . . and what I've noticed since COVID, you're aware of staff where things go on in their lives outside of school that affect how they will be at school. . . and we are all under pressure anyway in these jobs. . . if the teacher is not resilient, they will not be able to support anyone else

(FG3, P3). To effectively support learners, practitioners suggested that schools must ensure that their staff feel valued, supported, and equipped to meet the emotional demands of their roles. This includes addressing workload pressures, ensuring access to mental health support, and recognising the emotional labour involved in pastoral care. Practitioners spoke of creating a culture where staff well-being is openly discussed and prioritised, which is necessary for sustainable implementation, *'I think it's making it a priority. . .because if it isn't, then what are you doing . . . your staff are your most precious resource . . . if there is more help available for staff . . . that would help' (FG2, P8).*

Discussion

The survey data that explored how EPs in Wales implement the Framework revealed varied levels of awareness and differing stages of implementation. While overall awareness of the Framework was relatively high among EPs, awareness was notably lower among EPs working in smaller local authority areas, highlighting the need for more targeted engagement and support. This suggests that closer collaboration with smaller authorities is essential to ensure consistent understanding and implementation of the Framework across regions. Tailored communication, accessible training, and shared resources could help bridge this gap and promote more equitable practice nationwide. While responsibility for the scoping process was most commonly attributed to senior management, over a fifth of respondents were unsure who held this responsibility. This lack of clarity underscores the importance of working closely with schools to ensure that all staff are aware of their roles in implementing the Framework. Clear communication, role definition, and collaborative planning are essential to foster a shared understanding and cohesive approach across school teams.

It was encouraging to see curriculum-based activities as the most frequently used well-being resource, reflecting the intended alignment with the CfW. This suggests that schools are beginning to embed well-being into everyday teaching and learning, as envisioned by the Framework. Such integration supports a whole-school approach and reinforces the importance of promoting well-being through the curriculum. Furthermore, schools recognising well-being as a priority aligns with the Framework's overarching vision to embed emotional and mental health across the whole school system.

Alongside their comments on the development of positive relationships and resilience, this reflects a shift towards more preventative, rather than purely interventionist approaches – an essential principle within the Framework's design to create sustainable, long-term support for well-being in schools.

While many EPs felt the Framework helped prioritise well-being and embed it into school culture and curriculum, they also highlighted considerable challenges. Time constraints, insufficient staff training, and competing educational reforms were cited as major barriers to implementation. Concerns were also raised about the evolving nature of well-being, the difficulty of securing whole-staff buy-in, and the lack of stakeholder engagement, an issue highlighted in the most recent WG bulletin (WG, 2024). A critical gap identified was the availability of Welsh-medium resources and access to expert support, an issue raised in other areas. For example, limited Welsh-medium support for children with ALN was highlighted in a paper by the Children's and Welsh Language Commissioner (2023). This shortfall is attributed to a shortage of Welsh-speaking professionals, insufficient Welsh-language resources, and inconsistent practices across local authorities. To address these disparities, there is a need for a comprehensive national review and enhanced collaboration among local authorities to ensure equitable, Welsh-medium provision across the country.

Monitoring practices for evaluating the effectiveness of well-being initiatives were inconsistent, with many relying on informal feedback from staff and learners. These findings align closely with the wider literature that identifies training gaps and capacity issues as major obstacles to successful implementation (Brown et al., 2025; Marchant et al., 2021). The autonomy afforded by the CfW (WG, 2022) demands a confident and knowledgeable workforce – yet many EPs reported uncertainty on how to translate national guidance into meaningful local action. This supports Țepordei et al. (2023) and Clarke (2020), who argue that even evidence-based well-being policies are unlikely to be effective without the infrastructure and expertise required for delivery.

Importantly, the findings echo national survey data showing that progress varies significantly (WG, 2023a). This reinforces previous conclusions from SHRN (2023), which found wide variability in how well-being is prioritised and enacted across schools in Wales. In particular, staff well-being, identified in earlier research (Brown et al., 2025) as a key component of successful implementation, is consistently raised as a barrier that is not yet being sufficiently addressed. The perception among EPs that well-being efforts often rely on informal monitoring systems also reflects SHRN's (2023) concern about the need for structured evaluation methods to ensure accountability and consistency.

The findings from the focus groups and interviews mirror those of the survey and highlight that the successful implementation of the Framework in Wales is largely shaped by how it is interpreted and understood at the school level. Where there is a clear conceptual understanding and alignment with broader educational policies, well-being becomes a core element of school ethos, curriculum, and culture. However, implementation strategies varied widely, with some schools demonstrating strategic, child-centred approaches, reflective practices, and strong collaboration, while others faced challenges such as limited understanding, lack of resources, and competing priorities that hindered consistent and meaningful adoption. These differences reflect what Donaldson (2015) warned about in the Successful Futures report: that the success of reform depends not only on vision

but also on the local conditions that support or constrain practice. The diversity in experience further validates the call by the Children's Commissioner for Wales for more equitable support structures to help realise national goals at a local level.

EPs' interpretation of well-being and the Framework were key to successfully embedding a whole-school approach. The data indicates that when EPs understand well-being and the Framework, it is more likely to be integrated into school culture and strategic planning. In these cases, well-being is viewed as a proactive, preventative, and universal priority, embedded across teaching, leadership, and relationships. However, where misconceptions persist, well-being is often approached reactively or reduced to tokenistic activities. Schools demonstrating a strong whole-school ethos, often shaped by EP involvement, are more likely to align the Framework with broader policies such as the CfW, leading to more coherent and sustainable practices.

Facilitators such as distributed leadership, professional development, and strong relationships within the school and wider community significantly enhanced implementation. However, barriers, including resource constraints, variability in staff confidence, resistance to change, and accountability pressures, continued to impact progress. Looking forward, the sustainability of the Framework relies on continued investment in staff capacity, reflective practice, and resource development, alongside a strong emphasis on staff well-being and addressing emerging needs. This emphasis on sustainability and capacity-building closely mirrors the strategic aims of the Well-being of Future Generations Act (WG, 20152022), reaffirming that long-term change requires a systems approach. It also reflects recent policy literature urging the WG to ensure that mental health and well-being are integrated not only into school curricula but also into staff support structures and accountability frameworks (SHRN, 2023; WG, 2021b). Supporting schools through clear guidance, shared best practice, and system-wide recognition of the value of well-being is essential to ensure its full and lasting integration.

The findings from this study offer several policy and practice implications. At the school level, there is a clear need to further embed well-being as a core part of the whole-school ethos, ensuring it is recognised as 'everybody's business' and meaningfully integrated into School Development Plans, teaching, and relationships. Ongoing, tailored professional development is essential to address variability in staff understanding and confidence, helping practitioners implement the Framework with clarity and purpose. Schools should also foster strong internal collaboration and external partnerships with families, agencies, and communities to extend capacity and promote a shared understanding. Prioritising staff well-being through supportive policies, workload management, and recognition of staff contributions is critical to sustaining engagement and resilience. From a policy perspective, there is a pressing need for consistent national guidance that clarifies the intent and practical application of the Framework, particularly in relation to existing initiatives like the CfW and ALN reforms. Investment in professional learning and ring-fenced funding for well-being initiatives would further support equitable implementation across schools. Additionally, accountability systems should evolve to value well-being outcomes alongside academic achievement, with inspection frameworks recognising the importance of whole-school approaches. Finally, policymakers should promote knowledge exchange by supporting regional networks, case studies, and collaborative opportunities that allow schools to learn from effective practice and adapt strategies to their unique contexts.

Conclusion

Overall, the extent to which practitioners in Wales are interpreting and implementing the whole-school approach Framework varies significantly. While many embrace the ethos and are taking meaningful steps toward integration, challenges remain, especially around resources, clarity, and capacity. However, where leadership is strong, collaboration is valued, and professional learning is prioritised, the Framework has the potential to transform school culture and outcomes. Continued investment in support, dialogue, and reflection will be essential for realising the full promise of the whole-school approach across the Welsh education system.

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