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Promoting academic buoyancy as a pro-active approach for improving student mental health and wellbeing

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This paper provides a rationale for undertaking a systematic review of the academic buoyancy construct which aims to answer four research questions: what is academic buoyancy?; Can academic buoyancy change?; How is academic buoyancy measured?; Do academic buoyancy interventions currently exist? To provide a rationale for undertaking the proposed systematic review this paper will reflect upon the latest educational policy reforms and recent national mental health statistics for young people in England to justify that further understanding of the academic buoyancy construct could prove useful for educational policy and practice.

**Keywords:** academic buoyancy; everyday resilience; wellbeing; systematic review

**Introduction**

Providing all children and young people in England with ‘world-class’ education and care is at the forefront of the Department for Education’s (DfE) agenda (DfE, 2016a, p.3). To achieve this aim standards and expectations for pupils have been raised to compete with higher-performing countries across the world. These educational reforms are ‘stretching’ student outcomes further than before and are inevitably adding pressure on young people to improve their attainment (DfE, 2016a, p.12).

On average, one in ten young people in England have a clinically diagnosed mental health problem and in light of the new ‘gold standard’ qualifications and assessments it is becoming increasingly important to provide our students with the necessary skills and tools to be pro-active in dealing with their mental health and well-being (DfE, 2018). A key government priority is to support schools in developing and building resilience in their students. However, by way of definition this implies a reactive approach to dealing with major adverse situations. On the contrary, academic buoyancy promotes a more pro-active approach to dealing with the unavoidable stresses and challenges that students encounter during their academic lives (Martin & Marsh, 2008; 2009).
This paper provides a rationale for undertaking a four-part systematic review to summarise how academic buoyancy is defined, whether the construct is malleable, how it is measured and what interventions currently exist. This paper will begin with a contextual outline of current educational policy and mental health statistics to justify that further understanding of the academic buoyancy construct could prove useful for educational policy and practice.

**Policy Context**

As the ‘engine’ of the UK’s economy, education remains firm on the political agenda (DfE, 2015). With the UK’s economy at the forefront of political decision-making, this has guided and shaped reforms which aim to produce a better-educated and well-rounded workforce. To remain economically competitive on an international platform, the government’s central goal for education is to raise standards to compete with schools in higher-performing countries, such as Canada and Finland, announced by the OECD’s international league tables (Ofqual, 2014). The DfE promote three key objectives which strive to ensure that all students in England experience an excellent education, are safe and prepared for their adult lives. To achieve these aims three of the DfE’s strategic priorities include: embedding more rigorous standards, curriculum and assessment; supporting and protecting children’s mental health; and building character and resilience (DfE, 2016a).

In recent years, educational reforms have focused on raising attainment through embedding rigorous standards, curriculum and assessment across the key stages. In the primary phase improving literacy and numeracy have been the main priority, primary assessment measures have been strengthened and Key Stage 2 tests have been reformed. Older pupils have welcomed knowledge-rich programmes of study, more demanding subject content at key stages 3 and 4, gold-standard qualifications at key stages 4 and 5 and more rigorous examinations than before (DfE, 2014; 2016a; 2018). Schools are responsible for
teaching their students the knowledge and skills that will prepare them for careers in the industries which will enable the UK to compete in a ‘rapidly changing world’ (DfE, 2018). By way of example, the most recent 1 to 9 GCSE examinations have seen pupils aim higher than in previous years where students strived to achieve the best A* grades replacing these with grade 9 to inspire better performance and expose pupils to more demanding qualifications. Top 9 grades are inviting employers and universities to identify the most gifted individuals in England and higher pass levels reflect the average performance of 16-year-olds in higher performing countries across the world (Ofqual, 2014).

However, adding pressure on pupils to improve their performance has raised concerns about the emotional health and wellbeing of young people. Research literature documents a link between high educational attainment and good mental health (Public Health England, 2014). Theresa May has pledged to support and protect vulnerable children by working with schools and young people to transform mental health services. First-aid training will be provided to teachers and staff in secondary schools across England (DfE, 2017). Schools must be proactive in protecting their students by tackling issues early and providing them with the necessary skills to build character in order to be ‘well-rounded’, ‘confident’, ‘happy’ and ‘resilient’ individuals and remain ‘mentally healthy’ (DfE, 2016a, p.35; 2016b, p.6). The DfE support that building resilience in students will help to improve their academic attainment, employability and ability to engage in society (DfE, 2016a).

The problem
Despite an ambitious strategy to raise educational standards in England, national statistics present an alarming image of children’s mental health conditions in Great Britain. In 2004, the Survey of Mental Health of children and Young People in Great Britain revealed that one in ten children aged between 5 and 16 years had been clinically diagnosed with a psychiatric condition (Green, McGinnity, Meltzer, Ford & Goodman, 2005). For context, on average this equates to three children in a standard class-size of 30 students.
In a more recent report published by Public Health England (PHE) (2016) statistics highlighted that anxiety disorders were among the most common causes of childhood psychiatric problems occurring in 4.4% of children aged 11 to 16 years. Children who worry about events, behaviours or personal abilities from the past, present or future are believed to have Generalised Anxiety (GA) (Eysenck & Calvo, 1992). Green et al. (2005) highlight possible risk factors for developing GA include worrying about school work, exams and uncertainty about their future. Other anxiety disorders include panic disorder, obsessive-compulsive disorder and social phobias (Green et al., 2005).

Another common disorder was depression which affected approximately 67,500 young people in England. It was found to be seven times more common in secondary aged students than primary school children. Risk factors include emotional distress caused by high levels of critical self-thought. Furthermore, self-harm was more common in children with a mental illness, with one in ten children admitting that they had self-harmed. There were 149 children aged between 10 and 19 years who committed suicide in 2014. Environmental factors such as academic pressures were believed to be possible risk factors (PHE, 2016).

The DfE recognise that poor mental health and wellbeing ‘undermine’ academic attainment. Therefore, to raise standards and deliver ‘world-class education’ it is essential to take proactive measures to build students’ characters and provide them with the necessary tools to cope with the inevitable stresses associated with academia (DfE, 2016b, p.19; DfE, 2018). Feelings of anxiety, high levels of critical self-thought and academic pressures are potential risk factors that many students could experience during their time at school. Therefore, to lower the risk of developing psychiatric problems, early intervention and proactive strategies are important to sufficiently equip students with the skills they need to remain in control of their mental health and wellbeing.

**Resilience**

PHE (2016) and the DfE (2016a) promote building resilience as an important strategy for
schools to support their students with emotional wellbeing. Resilience is a widely used term across several disciplines, however, inconsistencies in defining, operationalizing and measuring the construct are commonly recognised problems amongst researchers (Pangallo, Zibarras, Lewis & Flaxman, 2015). In a systematic review of definitions, Windle’s (2011) concept analysis presents a working definition:

‘The process of effectively negotiating, adapting to, or managing significant sources of stress or trauma. Assets and resources within the individual, their life and environment facilitate this capacity for adaption and “bouncing back” in the face of adversity. Across the life course, the experience of resilience will vary.’ (Windle, 2011, p.152)

The resilience construct acknowledges two main themes: positive adaption in the face of adversity and a successful outcome (Garmezy, 1993; Masten, Best & Garmezy, 1990; Rutter 1999; Werner & Smith, 1992; Luthar, Cicchetti & Becker, 2000; Masten, 2001). Over the last decade, research on resilience in educational settings has increased substantially and is now receiving interest from policy makers due to its perceived potential to positively impact on students’ health and wellbeing.

**Academic Resilience and Academic Buoyancy**

Within the context of education, academic resilience may be defined as ‘the ability to thrive academically despite adverse circumstances’ (Windle, 2011, p.155). Martin et al. (2008; 2009) claim that academic adversity can present itself in the form of major negative events, such as: anxiety; depression; chronic failure; truancy; and disaffection from school. On the other hand, literature suggests that academic buoyancy is an important attribute for navigating low-level or ‘temporary’ adverse events such as the ordinary challenges of school life (Collie, Martin, Malmberg, Hall & Ginns, 2015; Dahal, Prasas, Maag, Alsadoon & Hoe, 2017, p.3). Minor events include: poor performance; discouraging feedback; regular stress
levels; dips in confidence or motivation; or threats to self-confidence (Martin et al. 2008; 2009). It is the initial aim of the proposed systematic review to define how academic buoyancy is used and understood by other researchers. The author supports a more proactive strategy for tackling student mental health and wellbeing through exploring the academic buoyancy construct.

**Research Questions**

An initial non-systematic literature search presents academic buoyancy as a growing yet underdeveloped area of research. The aim of the proposed research is to conduct a detailed and unbiased systematic review to answer four key research questions on the topic of academic buoyancy:

1. What is academic buoyancy?
2. Can academic buoyancy change?
3. How is academic buoyancy measured?
4. Do academic buoyancy interventions currently exist?

To the best of the author’s knowledge a systematic review of this kind has not been completed before and considers this to be the most appropriate method for summarising and evaluating existing research evidence to inform the selection or creation of the most promising academic buoyancy intervention.

**Research Implications**

This research aims to systematically and effectively review existing academic buoyancy research literature to provide a rationale for outlining the most promising format for an academic buoyancy intervention, if this is a malleable construct. The step-wise nature of the research questions will extend current knowledge by providing a coherent summary which accurately reflects how academic buoyancy is defined conceptually and operationally.
published academic literature. The author supports that the outcomes of this research could have further reaching implications for students, researchers, practitioners and policy makers in the education sector.

References


