



Think Equal's contribution to health and wellbeing

Think Equal's early intervention, through a concrete Social and Emotional Learning Programme for 3–6 year olds, is focused on prevention of emotion dysregulation and anti-social behaviours and attitudes, coupled with encouraging and strengthening pro-social behaviours and attitudes, in a comprehensive, continuous and sustained manner. The Think Equal programme is strongly evidence-based and has been proven to contribute to mental and physical health and wellbeing.

Think Equal's contribution to producing young healthy brains

Think Equal's programmatic innovation, has been designed in the form of a preventative intervention or vaccination, with tangible plug-and-play prescriptive tools, created or curated by the world's top global experts in psychology, neuroscience and education. It advocates that Social and Emotional Learning (SEL) has a holistic impact on long-term personal and public health and wellbeing and should be seen as one of the core purposes of Early Years Education, and should be incorporated into national curricula. As far back as the framing of the Convention on the Rights of the Child and the Human Rights Declaration experts and policy thought leaders have advocated that "education should be directed to the whole personality of the child" and not numeracy and literacy alone.

There is a wealth of scientific evidence from neuroscience that the brain has a unique neuroplasticity in the early years, and that the ages of 3–6 are when neural connections are made to last, and a child's identity, habitual ways of responding, emotional regulation and cognitive, behavioural and attitudinal architecture are built. The human brain undergoes rapid growth during childhood, with development in all domains being finely integrated across neural circuitry. 90% of the adult brain is fully formed by the age of 5; very young brains are creating neural synaptic connections at the rate of 1,000,000 connection per second. The early years until the age of 6 offer up an optimal window for positive and pro social attitudinal and behavioural modifiability which then lasts into adulthood and is proven (over several longitudinal studies) to have lifetime effects. As Bill Gates observed: "The first 5 years have everything to do with how the remaining 80 turn out". .

The outcomes which Think Equal's tangible and prescriptive programme is designed to achieve are: **reduced anti-social patterns of behaviour, emotions, and attitudes** (including: anxiety, depression, stress, low self-esteem, discrimination, anger, aggression, violent behaviours) and at the same time **increasing and strengthening pro-social and positive behaviours** (including: self-worth, emotional literacy, self-regulation, critical thinking, inclusion, problem-solving, empathy, peaceful conflict resolution, resilience, gender equality, racial equality, relationship building skills). We believe **these outcomes will have substantial positive consequences for later life outcomes, for public health, and for the economy.**

Prof Jack P. Shonkoff MD, head of the Harvard Center for the Developing Child also suggests that **many adult diseases "should be viewed as developmental disorders that begin early in**

life and that persistent health disparities [...] could be reduced by the alleviation of toxic stress in childhood” (Shonkoff et. al 2012, p.232). The cumulative and lifelong impacts of early experiences, of stress, anxiety, aggression, anger, and emotion dysregulation on a child’s development and future health, are profound.

Think Equal’s contribution to improving physical health

The stress-management techniques that are introduced to children through the Think Equal programme have long-term health benefits. Indeed, research has demonstrated the links between stress and higher risks of cardiovascular disease, “with an attributable risk that is on par with that of other major cardiovascular risk factors” (Tawakol et. al, 2017, p.834).

This is incredibly significant since, according to the British Heart Foundation, **“heart and circulatory diseases cause a quarter of all deaths in the UK**, that’s more than 160,000 deaths each year – an average of 460 deaths each day or one every three minutes in the UK’.

Stress can lead to other chronic diseases, including diabetes, symptoms of mental disorders, depression, eating disorders, obesity and chronic pain. As Tawakol et al. explain, “Psychosocial stress is... an important precipitant of morbidity” (2017, p.834).

Think Equal teaches children how to deal reflexively with stress, anger, anxiety, depression and other overwhelming negative feelings with an array of simple and effective tools which ensure that when these feelings emerge they are immediately controlled and not allowed to develop into habits of mind or patterns of emotional behaviour.

Think Equal also teaches children self-esteem through books and exercises. Whilst too often overlooked in the current education curriculum, self-esteem is incredibly important not only for the mental health but also the physical wellbeing of children. Indeed, researchers McGee and Williams found that **low levels of self-esteem in adolescents could lead to eating disorders, suicidal thoughts and other health compromising behaviours** (2000, p.569).

Think Equal’s contribution to tackling mental ill-health

The UK is in the middle of an extremely serious mental health crisis. The COVID-19 pandemic particularly impacted the nation’s mental wellbeing for obvious reasons. According to the Office of National Statistics, “Around 1 in 5 (21%) adults experienced some form of depression in early 2021 (27 January to 7 March); this is an increase since November 2020 (19%) and more than double that observed before the coronavirus (COVID-19) pandemic (10%)”.

The NHS reported in July 2020 that one in six children aged 5 to 16 are likely to have a mental health disorder.

Furthermore, according to the Samaritans, in 2020 alone, 4912 people died by suicide in England, 285 in Wales and 805 in Scotland. The latest figures from Northern Ireland stated that 209 people died by suicide in 2019.

In this context, the Think Equal programme should urgently be implemented as a Covid response (quite apart from its myriad other beneficial outcomes) to mitigate mental ill-health.

Think Equal contains 3 best practice initiatives within its programmatic contents: the SEE LEARNING Programme [Social and Emotional Education] from Emory University; the KINDNESS CURRICULUM of the Institute for Healthy Minds (Wisconsin Madison University), co-created by neuroscientist Professor Richard Davidson and the Dalai Lama; and the RULER Programme created by Dr Marc Brackett and Dr Robin Stern from Yale University's Center for Emotional Intelligence. These 3 programmes within our programme, experientially mediate (amongst 20 other competencies and skills) emotional well-being and intelligence, mindfulness, impulse control, and trauma management. With all its resources (80 narrative picture books, 270 lesson plans and 250+ resources) taught 3 times a week over 3 age appropriate levels, THINK EQUAL achieves positive adjustment [and] **decreased mental health problems in children and young people such as anxiety, depression, substance use, violence, and antisocial behaviour** and **"(if) offered to all students is more likely to have an overall public health impact"** (Cefai et al, 2018, p.29).

The one-off total cost of Think Equal in every Early Years Setting in England is £3.9 million which is 0.0337% of the annual wider mental health costs in the UK (£105.2 billion).

Sources:

British Heart Foundation, "Facts and Figures", October 2021, <https://www.bhf.org.uk/what-we-do/news-from-the-bhf/contact-the-press-office/facts-and-figures>.

Cefai, C.; Bartolo P. A.; Cavioni. V; Downes, P.; *Strengthening Social and Emotional Education as a core curricular area across the EU. A review of the international evidence*, NESET II report, Luxembourg: Publications Office of the European Union, 2018. doi: 10.2766/664439

Dimsdale J. E. (2008). *Psychological stress and cardiovascular disease*. Journal of the American College of Cardiology, 51(13), 1237-46.

McGee R., Williams S. (2000). *Does low self-esteem predict health compromising behaviours among adolescents?* Journal of Adolescence, 23 (5), 569-582. doi.org/10.1006/jado.2000.0344

NHS, "Survey Conducted in July 2020 Shows One in Six Children Having a Probable Mental Disorder." *NHS Choices*, <https://digital.nhs.uk/news/2020/survey-conducted-in-july-2020-shows-one-in-six-children-having-a-probable-mental-disorder>.

Samaritans, "Latest Suicide Data", <https://www.samaritans.org/about-samaritans/research-policy/suicide-facts-and-figures/latest-suicide-data/>.

Shonkoff, Jack P et al. "The lifelong effects of early childhood adversity and toxic stress." *Pediatrics* vol. 129,1 (2012): e232-46. doi:10.1542/peds.2011-2663

Tawakol, A., Ishai, A., Takx, R. A. P., Figueroa, A. L., Ali, A., Kaiser, Y., Truong, Q. A., Solomon, C. J. E., Calcagno, C., Mani, V., Tang, C. Y., Mulder, W. J. M., Murrrough, J. W., Hoffmann, U., Nahrendorf, M., Shin, L. M., Fayad, Z. A., & Pitman, R. K. (2017). Relation between resting amygdalar activity and cardiovascular events: A longitudinal and cohort study. *The Lancet*, 389(10071), 834-845. [https://doi.org/10.1016/S0140-6736\(16\)31714-7](https://doi.org/10.1016/S0140-6736(16)31714-7)