

**“WHEN EMOTIONS MEET SCHOOL CHALLENGES”- AN
INTERDISCIPLINARY EMOTIONAL EDUCATION MODEL
FOR PRIMARY SCHOOL**

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Abstract: *In primary education, children can sometimes experience intense emotions and may not yet have stable language to describe how they feel. Sometimes, children may also mention common body discomforts during the school day (for example: abdominal discomfort, headache or malaise). In this context, the school can use simple emotional education approaches that provide accessible language to children and predictable routines for everyday situations. The article presents “When Emotions Meet School Challenges“ as a hypothetical educational model, based on the school environment, for primary education. The model describes the cooperation between a school nurse and an emotional education facilitator, using consistent, non-evaluative, classroom-specific language. The model refers to the narrative universe “Dog Legends“ as a narrative resource that provides a common, child-friendly vocabulary for classroom discussions about emotions and common bodily cues. The materials described include an animated story, a short adult-guided group routine, and an educational song. Together, these forms repeat single steps of „break/pause“ (observe-breathe-request help) in an age-appropriate format. The article presents the theoretical foundations of the model, the structure of the described materials and the roles of the school adults presented in the narrative framework. The article does not report implementation of data or measured results and does not describe clinical evaluation, diagnosis or treatment.*

Keywords: *emotional education; primary education; whole-school approach; narrative-based learning; language and classroom routines.*

Authors Note

The qualifications mentioned are provided for identification purposes only and do not indicate that clinical services are offered in this article. The model described in this article is hypothetical and conceptual and does not include implementation data or measured results.

Introduction

Some studies estimate that a proportion of children and adolescents report functional somatic symptoms (FSS), such as abdominal pain or headache, in the absence of an identifiable organic explanation (Jungmann et al., 2022). Literature notes that these experiences may be associated, for some children, with difficulties in daily functioning and school attendance (Jungmann et al., 2022). Other research also discusses the links between children's socio-emotional skills and later indicators of well-being (Greenberg et al., 2017).

In childhood, literature describes that intense emotions and yet limited emotional language can sometimes be accompanied by bodily experiences (Jungmann et al., 2022). For example, alexithymia, the difficulty of identifying and describing one's own emotions, has been reported to be positively associated with higher levels of some physical complaints in certain samples (Jungmann et al., 2022). In addition, the signal filtering model describes that body signals that are usually filtered can more easily reach awareness in contexts of chronic distress or increased activation (Rief & Barsky, 2005).

Middle childhood is frequently discussed as an important period for learning emotional awareness and age-appropriate regulation skills (Taylor et al., 2017). Meta-analytical work on universal Social and Emotional Learning (SEL) programs reports follow-up effects for some results when such programs are delivered in childhood (Taylor et al., 2017). Related literature discusses "raising awareness" as a possible process in which repeated attention to physical signals and uncertainty about their significance can contribute to time-enhanced perceptions (Rief & Barsky, 2005).

Schools are frequently discussed in literature as a practical framework for universal educational approaches, given the time spent by children there and the existence of common social and academic demands (Greenberg et al., 2017; Taylor et al., 2017). Some authors also note challenges related to coordination between school adults who support children in different roles (Greenberg et al., 2017). In this context, the

literature describes the value of using consistent language and coordinated approaches between adults in the school environment (Greenberg et al., 2017).

The above background is provided as context. This article presents a hypothetical educational model, based on the school environment, for primary education, which describes a coordinated approach to using simple language about emotions and about common bodily cues.

The purpose of the article is to describe how early emotional education can be used in school life and to present school as a learning environment where children can practice naming emotions and asking for help without labeling or evaluation.

Objectives and reasoning

In primary education, children may sometimes experience discomfort through ordinary bodily sensations or behavior and may not yet have stable language to describe how they feel. In this context, the proposed model provides a consistent, class-friendly approach based on cooperation between school nurse, teacher, child's family, and an emotional education facilitator.

The model provides a common language and simple routines that can be used in everyday school situations.

General Objectives

- Introducing simple and consistent language for common emotions and body cues in primary education;
- Supporting cooperation between adults in school so that children hear the same calm message in different contexts;
- Providing practical, class-appropriate routines for everyday moments;
- Transmission of information to parents and school management about the educational approach to the model and its use in the classroom.

Specific Objectives

- Providing a set of age-appropriate educational activities using storytelling, symbolic play, short breathing routines, gentle movement breaks and guided discussions;
- Supporting the practice of naming emotions and simple steps of "break/pause" through group activities, storytelling, and a short educational song;
- Offering basic information sessions for adults so that similar language can be used at school and at home when it is appropriate;

- Describing simple coordination steps between the school nurse and the emotional education facilitator when a child repeatedly asks for help during the school day.

Literature Review

Note: The concepts and terms described below are presented as a general background, based on published literature. The model described in this article is hypothetical and conceptual; the use of clinical terminology in this section does not imply statements of diagnosis, treatment or efficacy for the model described later.

The Relationship Between Emotions and Somatic Manifestations in Children

In literature, a frequent starting point is the distinction between medical symptoms with organic etiology and functional somatic symptoms (FSS), described as bodily manifestations without sufficient organic explanation and discussed as occurring in childhood and adolescence. FSS may include abdominal pain, headache, dizziness, nausea, fatigue, or other complaints that may interfere with school and psychosocial functioning. Studies discuss that such complaints are reported at these ages and may be influenced by stress, emotion-related processes, and parental factors (Jungmann et al., 2022).

Somatization is described in literature as a way in which affective suffering can be expressed in body language: complaints (pain, discomfort, or other autonomic bodily reactions associated with emotional stress) for which an organic cause is not confirmed by clinical examination and in which emotional factors may be involved. According to Zawilski (2022), a summary list of common bodily manifestations associated with negative emotions, include abdominal pain and headache, palpitations, fatigue, shortness of breath, “lump in throat”, numbness, and diarrhea.

In the kindergarten years and the beginning of primary school, literature discusses that children may have limited linguistic and metacognitive resources for consistent self-observation and verbalization of internal experiences. This may complicate the recognition of possible emotional contributors and may be associated with repeated presentations to school health services (Zawilski, 2022).

Research reports associations between FSS and variables related to emotional regulation in children. For example, FSS have been reported to be negatively associated with adaptive strategies such as acceptance and positive with strategies such as rumination and alexithymia (difficulties in identifying and describing emotions) (Jungmann et al., 2022).

Parental factors are also discussed in the literature. For example, parental somatization and debilitating reactions to a child's emotions have been reported to be correlated with higher levels of somatic complaints and negative affect in children (Jellesma, 2016). These findings are discussed as supporting a relational and contextual perspective on somatization, rather than an exclusively individual one. Some preliminary interventional studies suggest that approaches involving the child's supportive environment, including parents, may be associated with changes in the intensity of symptoms, child functioning, and parental stress indicators (Etkin et al., 2024). Other papers discuss the fact that anxiety at young ages can be under-recognized and sometimes expressed through bodily complaints, and describe school environment as one of the places where early recognition and support can be discussed (Zawilski, 2022).

Emotional Education in the School Environment

Emotional education is described in many frameworks as relevant to child development, and school is frequently discussed as a context for learning socio-emotional skills. Within this frame, emotional literacy - identifying, naming, and discussing emotions- is described as a basic component of socio-emotional learning.

The SEL paradigm describes five central areas: self-awareness, self-management, social awareness, relationship skills, and responsible decision-making (CASEL, n.d). Meta-analytical evidence reports positive average effects of SEL programs on socio-emotional skills, prosocial behaviors, and academic results in studies included (Durlak et al., 2011).

European educational policy documents discuss the school's role in prevention and mental health promotion and describe universal approaches supported by the wider school environment, including whole school/systemic perspectives (European Commission, 2021).

Bio-Psycho-Social Approach

The bio-psycho-social model is described as a framework for understanding health as an interaction between biological, psychological, and social processes (Engel, 1977). In the literature on FSS, this perspective is often mentioned because physical complaints can be reported in the absence of a clear organic etiology and are discussed in relation to processes related to emotions and relational context (Jungmann et al., 2022).

Narrative and Symbol as Educational Tools

For children from preschool to primary, many authors discuss the usefulness of languages suitable for development, including playful

and symbolic formats. Storytelling and symbolic characters are described as ways that can support the expression and discussion of internal experiences.

Studies on shared reading report associations with socio-emotional skills, including empathy, emotional vocabulary, and understanding of social situations, (Schapira & Grazzani, 2025). In addition, some syntheses discuss creative bibliotherapy and non-therapeutic games as approaches associated with changes in results related to emotions (Veraksa et al., 20225; Redman et al., 2024).

Neuroscience-oriented literature discusses music as relevant to emotional processes and cognitive functioning, describing effects on psychological state, attention, and brain activity. Research reports that listening to and producing music activates multiple cortical areas related to emotion, memory, motor activity, and regulation-related processes and discusses links with neuroplasticity and well-being indicators (Demarin et al., 2016).

Methodology

This article presents a hypothetical educational framework for the primary education environment. It is conceptual and literature aware and does not test a clinical hypothesis and does not report implementation data; instead, it describes an educational model based on literature on emotional education, FSS, SEL, bio-psycho-social perspective, whole-school approaches, and narrative and play-based learning.

„When Emotions Meet School Challenges“ Model Description

“When Emotion Meet School Challenges“ is an integrated approach to emotional education for primary school, designed to help children explore the relationship between emotions and common bodily responses. It is presented as a model described for possible application in the school environment and is based on the collaboration between school nurse and emotional education facilitator, with an emphasis on emotional vocabulary, normalization of emotions and the practice of simple routines of soothing and refocusing, rather than on clinical evaluation or diagnosis.

The program can be delivered in a modular format (usually 4-8 weeks, one session per week, 45-50 minutes), using age-appropriate activities such as story-based play, short breathing routines in class. A distinctive feature of the model is the use of the narrative universe “Dog Legends“ as a child-friendly symbolic resource that supports a common language to talk about emotions and observe ordinary bodily cues in an accessible and attractive way.

Model's Objectives

The model is designed to support basic emotional learning in primary education through an age-appropriate educational approach centered on experience, story, and relationship. It is built around the narrative universe, "Dog Legends", which provides children with a common, friendly language to discuss emotions and observe common bodily cues.

The model uses three coordinated elements, presented consistently:

1. An animated story (a cartoon) with the characters "Dog Legends" and two familiar adults in the school, presenting an ordinary school situation (for example - a test), emotions that may arise and typical body reactions - along with simple, age-appropriate steps that children can try in class.
2. A short educational song, inspired by the story, used as a constant routine in class and as a reminder of the simple steps of "break/pause" (observe-breathe-ask for help).
3. A short, adult-guided group activity that includes gentle body observation, slow breathing, simple movement, and a brief recapitulation of the main message in everyday language.

Together, these elements repeat the same educational message in story, song, and activity, helping children practice speaking about emotions and bodily cues in a supportive classroom setting without evaluation or diagnosis.

Recognition and Naming of Emotions

The first goal is to help children observe and name a small set of basic emotions (e.g., joy, sadness, fear, anger, surprise, contempt, and disgust) and relate them to familiar school moments. Children are invited to practice simple questions such as "What do I feel?" and "What happened?".

In the model, this is supported by an animated story in which children watch the characters "Dog Legends" in everyday school situations (for example a test or a difficult task). With the support of two familiar adults in school, children receive simple, friendly words for emotions.

Learning focus: practicing naming emotions in everyday language (for example: "I think I'm afraid").

Observation of Ordinary Body Cues

The second goal is to help children notice that emotions can sometimes be accompanied by ordinary bodily sensations. Children are invited to

observe simple bodily cues and consider emotions as a possible part of the bigger picture without making assumptions.

In the story, an adult follows the usual school procedure and uses calm, age-appropriate language when a child mentions discomfort. In group work, children are invited to observe simple sensations (for example, stomach, chest or throat) in a short, optional and non-intrusive way.

Learning focus: observing and discussing body indices in plain, non-alarming language.

Practicing Simple Steps of “Break/Pause”

The third goal is to introduce a narrow set of simple, class-appropriate steps that children can try out when they feel overwhelmed. These are presented as daily routines that can be used in schools.

The model includes:

- Slow breathing together;
- Short, gentle pauses of movement (for example stretching, easy shaking of hands /arms);
- Asking for help from an adult, clearly presented in the story.

The song is used as a predictable routine that repeats the same steps in an easy-to-remember form.

Learning focus: practicing a simple sequence like “pause-breathe-ask for help“.

A Predictable and Supportive Classroom Message

The fourth goal is to support a school environment where emotions can be mentioned without labeling and where children know what kind of support is available.

This is supported by:

- Using “Dog Legends” characters as a common story language;
- Repeating simple messages (for example, “sometimes the body reacts when emotions are strong“);
- Presentation of the cooperation between two adults in the story;
- Calm responses to children’s emotions without dramatization.

Learning focus: creating a consistent and gentle way to talk about emotions and ask for support at school.

Target Group

Primary group: primary school children

The model is intended for children between 6 and 10 years old. At this age, children still learn how to:

- Put their emotions into words;

- Observe and describe ordinary bodily cues;
- Use simple routines of “break/pause” with the guidance of an adult especially in agitated moments;

The model is designed for use at class level/ the whole school to:

- Integrate simple language of emotions into school life;
- Provide the same message and routines to all children;
- Avoid separation of children in “special groups” according to need.

Content can be adapted according to age:

- 6–8 years: more game, pictures, short story segments, predictable routines;
- 8–10 years: more extensive guided discussions, extended emotional vocabulary, school scenarios.

Adults involved (support group)

Teachers, parents, and school staff

The model also provides a common set of words and routines that adults can use consistently.

Teachers:

- Use a common, simple language for emotions and bodily cues;
- Introduce short routines (for example: a short break, slow breathing, a pause for movement);
- They respond in a constant way, without labeling, when children show strong emotions;

Parents:

- Receive simple informative guidelines on how emotions can arise in everyday life;
- They use similar language and routines at home if they choose to.

School staff (including auxiliary staff):

- Use the same simple language and consistent responses when children ask for help or mention discomfort;

Common message (model tone):

A unique, consistent message is repeated throughout the model; emotions are common, the body can react, and children can practice simple steps with the support of an adult.

Materials and Resources

The model uses a small set of class-friendly resources, connected to the narrative universe “Dog Legends“. These resources are presented in a simple format, using storytelling, music, and short adult-guided group routines, without any additional handouts or written material. The resources are intended for use in primary education classes and regular support spaces in the school.

Dog Legends (animated educational story)

A central element of the model is a short, age-appropriate animated story in which the “Dog Legends“ characters (Rey, Ryo, Shiba, and Algo) appear as students in a school setting.

The story follows a familiar school moment (for example a difficult test) and shows that children may notice emotions and bodily cues at some moments (for example “a sensation in the tummy“, a lump in the throat or restlessness).

In the story, two adults within school have clear and complementary roles:

- The school nurse provides simple, calm explanations, and a basic reminder;
- The emotional education facilitator provides simple words for emotions and models short “break/pause” steps that children can try out at school.

The story repeats a simple message: sometimes strong emotions can be accompanied by bodily cues, and children can take a break, breathe, and ask for help from an adult.

Educational use: the story provides a common example that can support class discussion about emotions, body cues, and asking for help.

„When Emotions Face a Test“ Song (class routine)

The model includes a short, story-inspired song that repeats the same message in a predictable and child-friendly format. The song follows a simple rhythm and includes a short sequence of steps to “pause” (observe-breathe-ask for help).

The song can be used:

- As a short routine at the beginning or end of a lesson;
- As a predictable transition during the day;
- As a simple reminder of the main message.

Educational use: the song supports repeating the same steps in a familiar format.

Group Routine “When the Body Speaks, We Listen”

The model also includes a short, adult-guided group routine that brings together story, song, and simple class steps. It is carried out with the entire group and does not require children to share personal information.

The routine includes three parts:

- Observation of the body: children are invited to observe simple sensations (for example, abdomen, chest, neck) in an optional, non-intrusive way;
- Steps of the “pause”: slow breathing together and a short, gentle pause in movement (for example, stretching or gently shaking arms/hands);
- Recapitulation of the message: a brief recapitulation in a common language (for example: “Emotions are common. The body can react. We can take a break and ask for help”).

The routine does not involve individual exposure and does not require auxiliary materials.

Educational use: routine provides consistent and repeatable class practice for observing emotions and body cues and using simple steps for “pause”.

Conflict of Interest

The authors state that there are no institutional conflicts of interest related to the preparation of this manuscript.

One of the authors is the creator of the narrative universe, “Dog Legends“ referred to in this article. “Dog Legends” materials have been commercially distributed in the past through third-party self-publishing and distribution platforms.

This manuscript is not a marketing communication and does not contain sales link, prices, testimonials, recommendations or statements regarding results.

The model described in this article is hypothetical and is presented as a conceptual educational model. It was not implemented as a study in the school and no child data was collected for this manuscript. The article does not report experimental results and does not claim clinical efficacy.

No results are guaranteed and no specific results are promised from using the hypothetical model or any stories/materials “Dog Legends”.

If the model were implemented in the future, it would be intended as a school-based educational approach and would not involve medical or

psychological diagnosis, treatment or psychotherapy. It would not replace clinical evaluation when necessary.

It is not intended to obtain any commercial benefit, royalties, licensing fees or other compensation from the use of the hypothetical model in schools. Narrative materials are referred to as educational resources and are not intended to direct children, families or schools to commercial platforms.

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The opinions expressed belong to the authors and do not necessarily represent the opinions of their institutions.

Qualifications, where mentioned, are provided for identification only and do not indicate that clinical services are offered in this article.

“Dog Legends” Universe as Educational Reference

In this article, the “Dog Legends” narrative universe is referred to as a narrative resource that can be used in primary school in emotional education. In this approach, the story is presented as a common classroom setting to talk about emotions and to observe ordinary bodily cues in age-appropriate language. The story is described as a symbolic learning space in which children can observe characters, practice naming emotions, and link emotions to ordinary body experiences in a calm, unlabelled way (Motorca, 2025).

A defining element described in the narrative analysis is the orientation towards accompaniment, not correction: the child is positioned as an active participant in learning, not as a passive receiver of the rules (Motorca, 2025). In this sense, the characters are described as recurring landmarks, and the story is presented as a structured way of reflecting on everyday school situations and choices (Motorca, 2025).

In educational use, the “Dog Legends” universe is described as being accompanied by simple multimodal elements (e.g., story, song, and short adult-guided group routines). These elements are presented as compatible with common learning formats in primary education that use images, repetition, play, and short routines (Motorca, 2025). In the model description, these materials are framed as common language that school adults can use consistently (for example, in the coordination between school nurse and emotional education facilitator).

The broader literature on FSS discusses associations between children’s body complaints and emotion-related processes, including difficulties in identifying and describing emotions (Jungmann et al., 2022). In this context, focus on an educational, school-based approach, words for simple emotions that can occur in the classroom, and routines is presented as a relevant educational direction for discussing

awareness of the emotion-body link without involving clinical goals or results.

Characters as Landmarks in Classroom

The “Dog Legends” characters are described in narrative analysis as stable figures with symbolic identities that can reflect common themes (e.g., fear of error, the need for protection, shame, the desire to do good, the desire to be seen) in an indirect, story-based way (Motorca, 2025). In the model description, the characters are only used as landmarks for class discussions about emotions, body cues, and simple routines of “pause/break”.

Rey - Calm and Gentle Presence

Rey is described as a calm and gentle character (Motorca, 2025). Within the model, Rey can be used as a reminder of simple steps: pause-breathe-ask for help.

Ryo - Structure and Limits

Ryo is described as a character associated with structure and fairness (Motorca, 2025). Within the model, Ryo can be used as a benchmark for predictable steps and simple language about limits (for example: “Where do I go?”, “Who can I ask for help?”, “What can I do first?”).

Shiba - Movement and Stabilization

Shiba is described as a character connected with vulnerability and perseverance (Motorca, 2025). Within the model, Shiba can be used as a benchmark for short, gentle breaks of movement as a part of a “pause” routine that can be used in the classroom.

Algo - Kindness and “Small” Emotions

Algo is described as a character associated with kindness and a bright tone (Motorca, 2025). Within the model, Algo can be used as a benchmark for everyday language that allows children to mention “small” emotions that they may be hesitant to mention.

The Classroom Dialogue Framework

In this approach, the characters function as the “third point” in conversation. Between children and adults in school (e.g. the nurse, teacher, or emotional education facilitator), the story provides a neutral reference that can make the conversation less personal and less evaluative. In the model’s description, the story, the song, and the short routines are presented as a consistent format for classroom dialogue, including simple transitions from “It hurts my tummy” to “I think I’m afraid”, using common language and a predictable adult response.

Roles of the Adults Involved

1. The role of the School Nurse

In this model, the role of the school nurse is limited to routine school health support and age-appropriate explanations; it does not involve psychological evaluation or treatment, and medical concerns follow existing school procedures. This role does not replace medical evaluation when the child's condition requires it.

In the model, the school nurse is described as an adult who responds calmly when a child mentions physical discomfort during the school day. The role includes basic support and clear, age-appropriate explanations.

Main elements of the role include:

- Observation of common physical discomforts that children may mention at school (e.g. abdominal discomfort, headache, fatigue);
- Noting the times when such discomfort is mentioned (for example, around demanding moments in class);
- Offering a short break/pause (for example, a quiet moment, short rest, water when appropriate, or a simple routine of returning to class) without dramatization;
- Using simple language to note that bodily sensations can have different causes and that sometimes-strong emotions and cluttered moments can be accompanied by bodily cues;

In the animated story, the nurse is presented as a calm adult who uses simple explanations and reminds the child that they can ask for help at school.

2. The Role of the Emotional Education Facilitator

Within the model, the emotional education facilitator is described as an adult who supports children to find simple words for emotions and practice short steps of "break/pause" in the classroom. This role is presented as educational and does not include evaluation or diagnosis.

Main elements of the role include:

- Giving simple, friendly words for emotions (for example "I think I'm afraid", "I am angry", "I am worried") without labelling children;
- Facilitate short, class-appropriate routines that can be used with a group (for example: slow breathing together, a short break in movement, and a reminder to seek help from an adult);
- Sharing basic information with teachers and parents about the language and routines of the model so that adults can use similar words when appropriate;

In the animated story, this adult is presented as a facilitator who uses calm language and simple steps that children can try at school.

3. Coordination Between the Adults in the School

In the description of the model, the school nurse and the emotional education facilitator are presented as using consistent language and simple coordination in common school situations. This coordination is described as:

- Using the same basic message in the story and routines (emotions are common; the body can react; children can take a break and ask for assistance);
- Keeping the child's experience in a common language, not labels;
- Simple communication between adults when the child asks for repeated assistance during a school day, so the child can receive a consistent answer.

In this framework, school is described as a place where children can use a common language to discuss emotions and body cues, and can reach out to familiar adults for support during the day.

Discussion and Limits of the Model

“When Emotions Meet School Challenges” model is presented in this article as a hypothetical educational model based on the school environment. It is described as a class-centered approach that provides simple language and routines to talk about emotions and observe common bodily cues in common school situations.

A distinctive element of the model is the use of storytelling, music, and short adult-guided group routines as the main format of classroom learning. These elements are presented as an age-appropriate way to introduce a common vocabulary and predictable routine without individual evaluation.

Limits

This article does not report implementation data or measured results. The model described here is not intended to provide medical or psychological diagnosis, treatment or psychotherapy, and does not replace clinical evaluation when necessary. If elements of the model were to be used in the future in a school setting, it would require clear role limits and alignment with existing school procedures when concerns go beyond regular classroom support.

Practical use may vary depending on the time availability, personal and local resources, and consistency with which adults use the same language and routines.

Future directions

Future work may include adapting the model to different age groups and school context, and clarifying implementation steps for school staff. If research evaluation is to be pursued in the future, it should be designed and reported separately, with appropriate permission and safeguards.

Conclusions

“When Emotions Meet School Challenges” model is presented in this article as a hypothetical educational model based on the school environment. It describes a classroom-centered way of introducing simple language for ordinary emotions and bodily cues, along with short, repeatable “pause” routines that can be used during common school moments.

In this framing, children are invited to observe and name emotions, observe body cues in a calm way, and use simple steps such as pause, slow breathing, and asking for help from an adult. The model description does not report implementation data or measured outcomes and does not claim clinical effects.

The “Dog Legends” story world is referred to as a narrative resource that can be used to provide a common and friendly vocabulary for classroom discussion. Storytelling and music are presented as group learning formats based on repetition and familiar routines without individual assessment.

Finally, the model describes the coordination between school nurse and emotional education facilitator as a way to maintain consistent language and consistent routines within the school setting.

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