OXFORDSHIRE COUNTY COUNCIL

ATTACHMENT

and the consequences of disrupted childhood



The Virtual School for Looked After Children

Raising the achievement and aspirations of looked after children







This booklet is about **attachment** - the bonding and relationships that form between parents and their children.

These bonds are the basis for a child's future development and well-being.

The booklet explains...

What is needed for these bonds of attachment to form.

Factors that might spoil good attachment.

Things that adults can do to help children with disrupted childhoods and poor attachment to overcome their difficulties.

The guiding principles that inform the work.

How to strengthen children by helping them develop resilience.

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Children need nurturing

Children have physical, emotional, social and intellectual needs. These needs must be met if they are to develop. These needs are inter-related, for example an unhappy baby may not eat, and even if the baby eats, it may not thrive. It is useful in starting to think about children who have disrupted childhoods, to identify what is good love and care.

Children's development is enhanced by:

Love

A stable, continuous, dependable loving relationship with parents/carers is a basis on which a child learns she/he is valued and valuable. It is on the basis of being loved that a child builds self esteem.

Security

Children are helped by the security of stable family relationships, known routines and familiar places. When a child knows continuity and predictability, she/he has a base from which to venture into new and challenging situations.

New experiences

One of the basic tasks of childhood is learning how to learn. Children need new experiences which are appropriate to their age and stage of development. The cry "me do it" often signals the joy and the sense of achievement and emotional well-being that they get from the mastery of new skills. Children of all ages need new experiences.

Praise and recognition

When adults demonstrate pleasure in a child's achievements, the child is encouraged and self esteem is enhanced. A child's attitude to learning will determine how well she/he learns.

Responsibility

Giving age appropriate responsibility to children helps them gain personal independence. For this children need a framework of guidance, boundaries and relationships, in which they can practise age-appropriate independence and develop. Feeling good about oneself and being able to make mistakes safely and without fear, are a part of this process.

Attachment

Attachment is an innate behavioural and emotional system designed to maintain physical and emotional proximity between a developmentally immature infant and his or her caretakers. From the point of view of an observer, it is marked by proximity seeking. For the infant, it is marked by signs of emotional security. Attachment can be expressed through an intimate persisting affectional relationship, which between the dependant infant and their attachment figure, has a primary status and a biological function in development. (Cairns 2002)

Some children have attachment difficulties caused by absent, rejecting or multiple caretakers in their early life, institutional care, and/or neglect and abusive experiences. These causes can undermine their sense of self and their capacities to trust in relationships.

Disrupted Childhood

All children in the looked after system have had disrupted childhoods. Their experiences will have undermined the extent to which their needs have been met and their development has been enhanced.

Risk factors in disrupted childhoods include:

- Genetic influences.
- Environmental factors such as poverty, homelessness.
- Parents with physical or mental health problems such that children have to be young carers.
- · Family breakdown or parental conflict.
- · Parental substance abuse.
- · Domestic violence.
- Inadequate parenting, neglect or abuse.
- Child with a physical and or learning disability.

Understanding the kinds of disruption they have had to face, leads us to be able to plan more effectively to support the children in school.

Disruptive Factors

These children experience numerous, and often unplanned, moves of home. The move from their family of origin for whatever reason, disrupts their sense of who they are in the context of their family.

Siblings may have moved too, with the child or separately. The reactions of each child will be different. When siblings haven't moved, their links are disrupted by time and distance. It will take hard work on the part of carers/professionals to establish contact which can contribute to restoring some sense of kinship for the children.

The moves usually mean a break with extended family members, friends, neighbours and the local community. This undermines the child's sense of security and social well-being.

The process by which the child has come to be in the looked after system has had its own impact on the child. There will have been the experiences that prompted intervention, the anxieties around the accommodation/care placement, and the changes to the child's world, which will be disruptions too.

Only the children know the real details of their histories. They are often not able to have the insight to recount these, even to themselves. Their histories have shaped their personalities, learning styles, behaviours and their world views. It is this we see in school.

Some placements are temporary and/or short-term, such that neither the child nor the carers invest in a continuous, dependable relationship. For some children much needed work on early experiences may be postponed until a more permanent placement is found. This leaves the child and the carers/teachers struggling to understand the meaning of what has happened. Children need this work to be done to assess their difficulties and enhance their understanding, otherwise wrong assumptions may be made about the child's

emotional literacy.

Disruptive Factors

The moves of placement for a child rarely coincide with the common entry points to school such as: a start in reception, the move to junior school, or secondary school transfer. Any changes of school are difficult, but for the looked after child (LAC), who has moved to a new placement, she/he is also having to cope with the reasons that prompted the move and trying to fit into a family or placement too. The change of school can plunge a child into a school setting in a way which is highly visible and which can lead to the child feeling like an intruder.

There may be complexities of relationships within the placement. There can be a balance to be struck between the children in the home. There can be biological children/grandchildren, the child concerned, siblings, other foster children. The needs of black and ethnic minority children may not be adequately provided for and this then adds to the extent to which a child feels she/he can't get the much needed praise and recognition.

Given the children's experiences of disrupted care, they all need individual care and support. Some of the children may have had several moves of school or time out of school. Lack of continuity in school will have undermined their progress and left them less able to make relationships with teachers and trust in their guidance. Mistrust can act as a barrier to educational success and the enjoyment of school.

Some of the children have identified special educational needs. There may be other barriers to providing effectively for their needs, such as moves of placement/school and the consequent difficulties of assessment, effective interagency liaison and understanding of the child's behaviour. Carers may need help to understand all the child's special educational needs, access the appropriate professional help, and secure resources to support the child in school.



Disruptive Factors

What can be even more difficult is when a child has had adverse early experiences, moves of placement/school, and has unidentified special educational needs. If too much is made of the child's disrupted childhood, then the recognition of the real extent of the child's special needs can be at best delayed, and at worst overlooked completely. Managing with the impact of a disrupted childhood may mask other difficulties.

When children have had a lack of continuity in care and schooling, it can be particularly difficult for them to make and sustain relationships with peers. Some of the children experience bullying, racial abuse, and isolation, which compounds their difficulties and detracts from their self esteem still further.



"Teachers can turn these children around by being tolerant and giving them faith in themselves."

Molly - Foster carer

What Schools Offer?

Schools have a great deal to give children who have had disrupted childhoods. When planning individual support, it helps us as educationalists to be clear about what school offers.

- Opportunities to learn to make relationships with peers and adults, and particularly to make and retain friendships.
- A place away from the experiences of the past and the closeness of family life. A neutral ground, away from painful areas.
- A world where the child can assume a meaningful role in a predictable, child centred environment.
- Daily contact with concerned adults who model an interest in learning, development and problem solving.
- Routines and structures in which to build personal confidence and social skills.
- Structured learning geared to provide experiences of success and to build self esteem.
- An introduction to what is hopefully life-long learning, interests and hobbies.
- A system which has support agencies and networks that can be used to provide counselling and support for personal problems.
- Opportunities and achievements which are a gateway to adult life and the world of employment.

For children with disrupted childhoods, school can be a safe path, providing access to learning, development, independence and success.

"I like playing, design and technology, fun stuff and home time."

Daniel - 12 years

Guiding Principles - for teachers of all children who have had disrupted childhoods

- 1. Ask the parent/carer about the child's experiences and think about the messages the child may have taken from what has happened. Understand that no matter how much you care or you try, you can't put things right and that the child needs help to come to terms with what has happened and that this will take time.
- 2. The parent/carer lives with the child, and perhaps other children. She/he is a major figure in the child's life. Foster carers are special parents who have been assessed and trained, and have ongoing professional support. They need to be involved by and in school. See yourself as a partner with the parents/carer demonstrating how adults can work together for the child. Find out how the parent/carer and the child manage enquiries about the child's history and support the child to deal with intrusiveness at school.
- 3. Value effort as much as achievement and judge a child by his/her own progress not by that of the group. Positively notice the child during a day in a way which she/he can accept. Provide tangible recognition of success such as praise in a home-school book, a certificate, a comment written on work. Above all make learning interesting and fun.
- 4. Understand that poor self esteem and destroyed trust make it hard to build friendships. If you as the teacher demonstrate to the class that you value the child and can cope by positively reframing difficulties, then this provides a powerful model for the other children. Use your classroom routines and management to support the child with peers, providing good supervision and discrete guidance when needed. Help the child use the school to find situations such as sports, teams, clubs, in which to learn to relate to others.
- 5. Don't assume that all children who have had disrupted childhoods are the same or likely to be difficult. If there are presenting problems, these may or may not be due to past experiences. Be fair in your dealings, the child may be less able to explain than a child who has had no disruptions. Be alert to difficulties, and consider how you can actively involve school support agencies to help you help the child.

cont./

Guiding Principles - continued

- 6. Some children have grown up with neglectful/abusive parenting and they have learned to adapt their behaviour in order to survive. Abusive interactions and attachments may be all they have known and work for them while in those relationships. When in the care of sympathetic and supportive adults the new, positive management styles are unfamiliar and may not make much sense. The child may not initially relate to good nurturing; they may be dismissive and rejecting of it. This can leave very well intentioned adults feeling dejected and de-moralized. However, it is very important to sustain the nurturing management of the children because by doing so you can help them form positive attachments that will sustain them in the future.
- 7. Be clear what the concerns are for the child and how the care plans are drawn up. Attend meetings arranged to plan for the child and help prioritise education as one way of improving the life chances of the child.
- 8. If the child is in the looked after system, make sure you are familiar with the systems that operate to protect them. There is a Designated Teacher for looked after children in your school who will take a key role in supporting both you and the child.

"I had one child from when she was five years old till she was ten. She went to the local school. They didn't know what had hit them at first. The special needs teacher helped me a lot by listening, listening is very important."

Rosalie - Foster carer

Difficulties in School - Pre-occupations

As a result of previous experiences, the child's mind may be pre-occupied with anxieties. Their past history or new experiences of being in a foster family or residential care may dominate the child's thinking, pushing school life and work into the background.

Possible Indicators

- · Often fiercely independent
- · Lack of interest in school work
- Doesn't think ahead
- · Difficulty fulfilling homework requirements
- Daydreaming child may appear 'absent'
- Poor concentration (too involved in basic emotional survival to develop skills or be settled in the learning environment)
- Unpredictable outbursts which may be consequent on triggers of past experiences

- Be active in helping child get on with this new phase of their life, whilst remaining discreet.
- Within kind limits use a varied response... keep child thinking... engaged... involved.
- When there has been an incident deal with it assuming there will be a reason which the child may not be able to articulate.
- Talk about wanting to understand, show you are willing to listen and state that you care.
- Wherever possible provide work which builds on the child's strengths and interests, and maximises opportunities for success.
- Give support through whole class initiatives, circle time, etc.
- Involve child in relevant school activities. Pick up on any strengths and match with what school has on offer.
- Ensure homework tasks are clearly explained and fully recorded.
- If you are the designated teacher for looked after children, or the child's class teacher or tutor, help other staff to understand and support the child's difficulties.

Difficulties in School - Uncertainty

Looked after children have often experienced huge disruptions and change in their lives. Due to the nature of the difficulties they have experienced, many children are unsettled and volatile in their interactions with the wider world. They can be unpredictable and have real problems conforming to expectations. Children who have experienced abuse or neglect are particularly sensitive; their experiences have taught them not to trust adults. Deprivation and lack of stimulus can also result in a kind of naivety, the child lacks knowledge about everyday events and situations.

Possible Indicators

- · Inability to recognize cause / effect
- · No fear of being caught or punished
- · Lying even when it would seem to give no gain
- Spoiling (breaking things, soiling)
- · Disorganized, or possibly obsessively tidy
- · Attention seeking, need 'babying'
- · Impulsive, might be aggressive
- · May not show remorse following poor behaviour
- · Not confident to trust others
- Uses expressive work to explore issues of neglect / violence (for example, may want to draw fights, traumatic events)

- · Be consistent and provide regular reminders, "What we do now is..."
- · Set clear boundaries and consequences.
- Provide opportunities for experiences...routines and rituals can help engage the child and build predictability into the child's life.
- · Model and encourage social skills.
- Don't over pressurize homework, for example.
- · Help the child to build bridges.
- When faced with problems offer solutions and involve the child in choosing what to do next.
- Check the curriculum is safe, some content might be particularly difficult, so consider other ways of delivering it to preserve the child's well being.
- Support the family, parents or foster carers, they are having to deal with the same issues, for longer and often at night!

Difficulties in School - Change and Control

As victims of circumstances beyond their control, children with disrupted childhoods can be left insecure and vulnerable. Feelings of loss and abandonment make the child very anxious, fearing further rejection and uncertainty. This is shown in attempts to control what is happening around them.

Possible Indicators

- Little or no regard for rules
- · Child exerts influence bossy, has to have last word.
- Learns to 'push buttons' and wind people up (exerting control)
- Might 'turn on' the tears, often a clear difference between real and crocodile tears is apparent
- Child says sorry but does not modify behaviour subsequently (this is an indicator the behaviour is *compulsive*, not deliberate)
- Desire to split adult relationships
- · Obsessed with friendships being made / broken
- · Demanding to know details, who? what? when? where?
- Difficulty negotiating any kind of change

- Be clear in your classroom management what is negotiable and what is not.
- Explain rules and regularly positively reinforce appropriate behaviour.
- Understand and manage the child's desire to manipulate.
- Allow some legitimate chances to control...organizing equipment, leading a group, for example.
- · Stay calm, demonstrate your self control.
- Give advance notice of change and allow time and space for the child to adapt. For example, holding the door whilst class go to assembly.
- When dealing with difficult behaviour, take care to separate it from the child itself. Preservation of their positive self image is essential.
- Give support to make and retain friendships.
- Plan work groups carefully, child needs to be with steady, robust characters who can hold their own and help him/her.
- Avoid oppositional situations that enable child to dictate, (they can gain control by refusing,) - negotiation and agreed actions are preferable. It is wise to avoid delivering ultimatums for the same reason.

Difficulties in School - Low Self Esteem

Children can interpret what has happened to them as rejection of themselves. They have feelings of unworthiness, of being undeserving of love and affection. These feelings lead to low self esteem and self image. Some behaviours may develop that enable the child to protect and comfort themselves.

Possible Indicators

- Passive child may be distant, slightly rigid, gloomy, easily defeated
- OR, present as over cheerful and confident to compensate
- · Superficial charm
- · Cannot relax and enjoy things
- · Hoarding, stealing
- · Lying, fabrication, inane chatter, fantasy
- · Denial will pass blame onto others
- Self Harm
- · Destroying work or perhaps unable to start work
- · Expressing low opinion of themselves or their work
- · Rejection of praise

- See the work you do as helping them grow and change.
- Notice, value and praise the child's strengths. Recognize effort as well as achievement. Quiet praise may be more welcome than public.
- · Build the opportunity for success into tasks.
- Give opportunities, supportive discussion, and 'scaffolding' on which to build learning.
- Choose workmates carefully to avoid highlighting perceived difficulties.
 As a general rule child needs to be with similar or lower ability -this helps preserve a good self image.
- Be very careful with humour and off hand comments or friendly teasing and never disparage or be-little.
- Try to avoid *blame*, the child may have a desire to be punished, (seeking confirmation of low self esteem.)
- Don't let them feel their needs are a problem, try to 'be there' for them.
- Have a planned weekly one to one support time geared to building self confidence.

Promoting resilience for children

Children who have had disrupted childhoods vary in their capacity to overcome adversity. Work to support children in school and at home can be informed by research into promoting resilience for children. Protective factors which promote resilience are:

- Resilient temperament, in terms of constitutional make up.
- · Children with good health and development.
- Children with good problem-solving skills/coping strategies.
- Children with positive relationships with parents and grandparents.
 Children brought up in their birth family with the presence of at least one supportive parent.
- Parent or carer interested in the child's activities, including school.
- Access to high quality early-years education.
- Children with a friendly, sociable peer group.
- · Children attending a school with 'a good ethos' and minimal bullying.
- Children with access to challenging activities in and out of school.



"When I go to secondary school, I am looking forward to getting bullies told off when they pick on me. I will tell the head teacher; they won't put up with it there."

Lewis - 11 years

Accommodated, some parents have difficulties promoting the development and well being of their child(ren). If these are referred to Social and Health Care and after home-based strategies have been tried, children may be accommodated with parental agreement and support, with relatives or friends, in foster care, or a children's home.

Adoption, the legal transfer of parental responsibility from the birth parents to the adoptive parents. This can only be done by a court. The child is then a permanent member of the adoptive family, the child takes the family's name, and a new birth certificate is issued.

Behaviour Support Teacher (BST), a specialist teacher who visits schools on a regular basis to support pupils, staff and parents with pupils' emotional and behaviour issues.

Care Order, a court order obtained on the basis of evidence that the child's development and well being cannot be promoted without an order. Once an order is granted, the Social Worker has shared parental responsibility.

Child and Adolescent Mental Health Service (CAMHS), a team of psychiatrists, clinical psychologists, psychiatric nurses and family therapists who assess and treat children and young people who may have mental health difficulties/issues.

Child Protection Plan, when there are concerns that a child(ren) is being significantly harmed, Social and Health Care are required by law to investigate these. If there is evidence this is the case, a case conference will be called to discuss concerns with other agencies and decide on a child protection plan.

Common Assessment Framework (CAF) is an assessment tool used by professionals working with children, to assess the additional needs of children and young people at the first sign of difficulties.

Core Group, when a child protection plan is made at a Child Protection Initial Case Conference, the conference identifies a smaller (core) group of professionals who will implement the plan, and meet regularly to share information and co-ordinate their work to support the child(ren) and family.

"I am not a big fan of school... but I liked the Humanities work on crime and punishment."

Ryan - 16 years

Designated Teacher, a member of staff in each school who has the responsibility to know the children who are looked after, arrange support where needed and liaise with the other agencies, especially the Social Worker for the child.

Educational Psychologist (EP), visits schools, nurseries, and family centres on a regular basis working with teachers, parents and other professionals, in a joint problem solving capacity to assist children's learning and behaviour, assess psychological development and special educational needs.

Education Social Worker (ESW), visits schools on a regular basis to monitor attendance, advise staff about keeping attendance registers and promoting attendance when there are concerns. They work with parents where they have difficulties getting their child(ren) to attend school regularly.

Emotional and Behavioural Difficulties (EBD), refers to young people whose emotions and behaviour are presenting significant hindrance to their social and educational success.

Family Support Worker (FSW), support staff who work with the guidance of Social Workers to advise children and families.

Foster Care, this is provided by single people, parents, families, who care for children when their own families (family of origin) are not able to do so. Foster care can be short term, long term, or foster plus for children with complex high level needs.

General Practitioner (GP), family doctor who advises and treats general illnesses, and refers to more specialist medical services.

Health Visitor, a nurse who has had training in advising parents on issues such as feeding problems, immunisations, behaviour difficulties, support, and local services.

Individual Education Plan (IEP), is a way of planning, teaching and reviewing what is arranged in school for children with special educational needs. It is a working document for all teaching staff recording key short-term targets and strategies for an individual pupil that are different from or additional to those in place for the rest of the group or class. The interventions are geared to different levels of need: school action, school action plus, and statements of SEN.

Kinship Care is an arrangement where a child who cannot be cared for by their parents, goes to live with a relative or family friend. If a private kinship arrangement is likely to last longer than six weeks, the Local Authority needs to be involved.

Multi-agency, when professionals from more than one agency work together.

Pastoral Support Programme (PSP), is set up to help a pupil who is at serious risk of disaffection or exclusion. If in addition the pupil has SEN the IEP should reflect appropriate strategies to meet their needs.

Personal Education Plan (PEP), many looked after children have under performed in school. The PEP is led by the Social Worker and the Designated teacher in school, and is aimed at ensuring that these pupils achieve as well as possible in school.

Pre-School Teacher Counsellor (PSTC), supports and advises parents of pre-school children with significant special needs, developing home-based learning programmes with them and other early years professionals.

School Action, when a class or subject teacher identify that a pupil has special educational needs and they provide interventions that are additional to or different from those provided as part of the school's usual curriculum and strategies. An IEP will usually be written.

School Action Plus, when the class or subject teacher and the SENCo are provided with advice or support from outside specialists to help a child with special educational needs. At this stage of action, alternative interventions (additional and different strategies to those provided for the pupil through school action) can be put in place. The SENCo usually takes the lead although day-to-day provision continues to be the responsibility of class or subject teacher. A new IEP will usually be written.

School Nurse, visits school on a regular basis to ensure the health needs of children in school are met, and acts as a link to other services.

SEN Code of Practice, a legal document from the Department for Education and Skills (2001) that describes a graduated response to recognising and then supporting pupils with SEN, with the school intervening as described under school action and school action plus.

SEN Register, found in each school and records the pupils with SEN within the SEN Code of Practice.

Social Workers, advise families about services available and assess children and families' needs for support including respite care and short-term care. Social workers also monitor and manage individual cases, ensuring provision matches need.

Special Educational Needs (SEN), refers to any difficulty a young person may have that affects their educational achievement or behaviour in school.

Special Educational Needs Co-ordinator (SENCo), there is one in every school who has responsibility for ensuring children's additional needs are met, by liaising with staff, organising reviews, completing paperwork, and so on.

"I like school because most of my friends are here."

Charlotte - 8 years

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The Virtual School for Looked After Children

We believe in the potential of every child and young person, no matter who they are, or what they have been through. We believe that all looked after children and young people deserve to be given opportunities to enable them to live their lives as fully as possible.

We aim to support the five outcomes of Every Child Matters: be healthy, stay safe, enjoy and achieve, make a positive contribution and achieve economic well-being.

We do this by:

- Empowering children and young people to overcome barriers to success.
- Inspiring children and young people to aim high.
- Equipping children and young people with the tools to achieve and succeed in adult life.
- Boosting confidence, enjoyment and self-esteem as well as promoting independent learning.
- Monitoring and evaluating progress to secure early and targeted intervention.
- Being good partners to the other professionals who support children's education, ensuring that we are always open to learning in new ways from them and helping others to learn from us.
- Employing our multi-agency team to solve problems and move children and young people forward.
- Supporting and providing guidance and training to our partners in Education and Social Care.

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