

Bill Ashton

My Journey





The Early Years 1970's

The Warnock Report 1980's



Emotional, social and behavioural challenges

Support in schools including outside agencies.



‘Lightbulb’ moment

**Learning to understand the impact of
trauma and broken attachments on
childhood development**

Common reasons why children display challenging and uncooperative behaviours.

Reasons why children of all ages present with challenging behaviour. These may include:

- Tiredness
- Hunger
- Boredom; or
- to seek attention

Common reasons why children display challenging and uncooperative behaviours.

Some behaviours are simply children trying to understand the rules of new contexts and testing boundaries is a natural part of their development.

However, some children are uncooperative as they have experienced relational trauma and/ or loss.

Common reasons why children display challenging and uncooperative behaviours.

Others will be represented by those who have experienced inconsistent parenting especially during the early years of development. The earlier the trauma and/or loss, the more inconstant the parenting the greater the effect on the child's perception of the world and their ability to form future relationships with peers and adults.

The behaviours of children who are challenging, uncooperative or withdrawn and unsociable should not be interpreted lightly.

These behaviours are actually complex and form a communication from which we must try and make sense if we are to manage them sensitively and effectively.

The impact of early year's trauma and loss.

Trauma or loss in the early years can include:

- mental health problem of parents
- witnessing or hearing domestic violence
- Neglect
- physical abuse
- sexual abuse
- broken attachments with parents and key family members; and
- bereavement.

The impact of early year's trauma and loss.

Children who are fostered or are in residential care may have experienced many of the above on a regular basis. With so many unresolved issues it is inevitable that they will be expressed in behaviours that are difficult to interpret and manage. In the end the term 'challenging behaviours' refers to a range of behaviours that present as a problem to others, not something intrinsic to the child.

They represent the greatest of unmet needs.

For ourselves working in mainstream schools or specialist provision it is important that we learn to take a professional approach to the understanding and response to the wide range of challenging behaviours.

In the end by doing it right we can be powerful agents of change for the better.

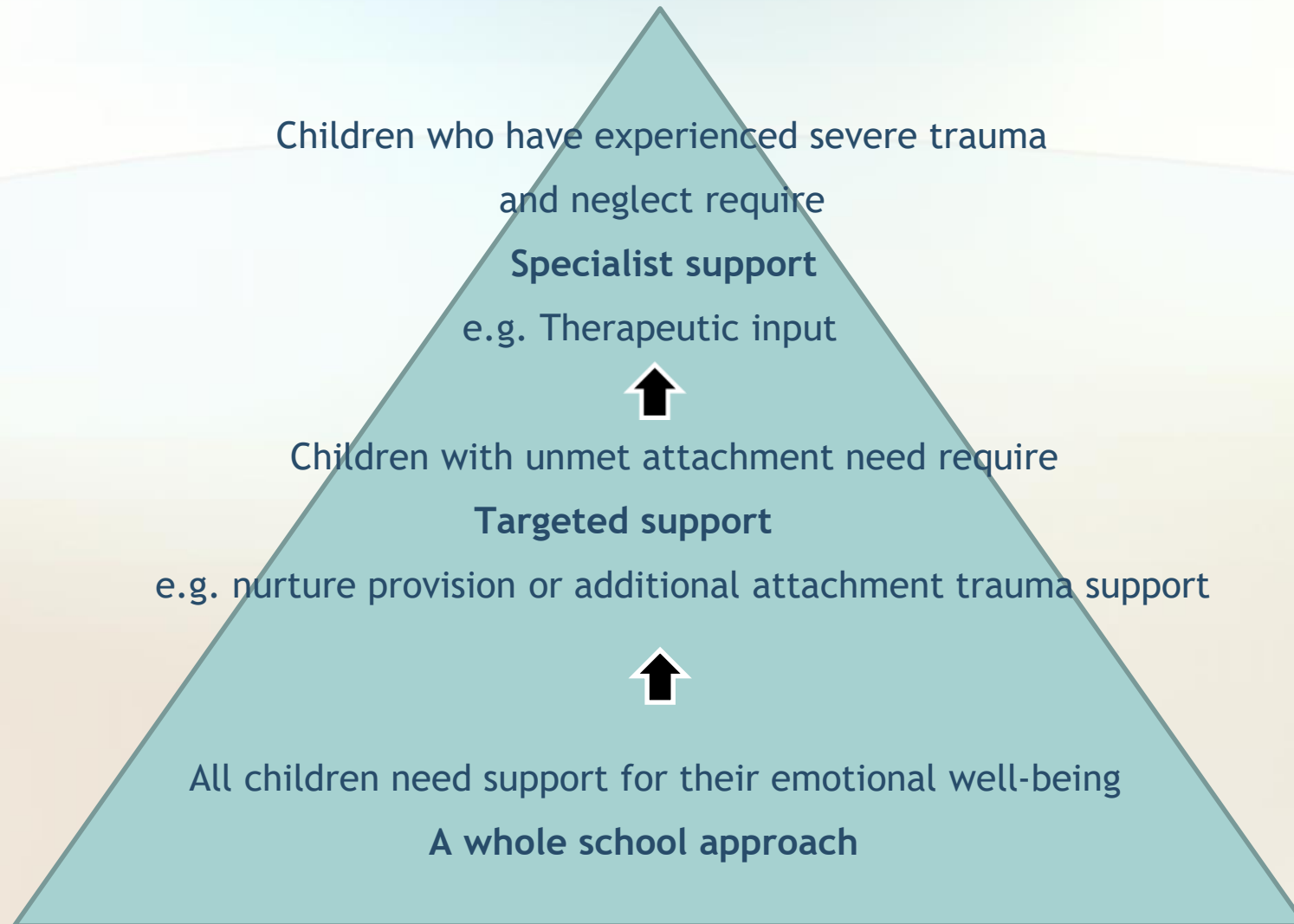
Key points to remember.

- The earlier the traumas and/or loss the greater the potential for harm to the child's development;
- Children may present on many different levels as much as younger than their peers. That is because some parts of the brain have a maturity lag.
- Memories are stored in a very complex system around cognitive and sensory formats. Whatever the age of trauma the brain is able to remember it;
- The part of the brain that has responsibility for empathy, cause and effect and logic is the Frontal Cortex. It is this part which is likely to suffer a defect as a result of early years' trauma or inconsistent parenting;

Key point to remember continued..

- Many children become hard wired for self-protection. In the early years the brain may have become hyper-vigilant against threat. This may remain in later years and can interfere significantly with behaviours and learning;
- Teachers and support staff who develop strong relationships with these children can either confirm or challenge what has gone on before. We need to disappoint their brains by challenging what has happened to them.
- The brain is changing throughout life and can change positively with understanding teachers who can listen and nurture. The earlier we intervene the more chance of good, satisfying learning outcomes.

Schools can meet a spectrum of needs to improve learning outcomes and behaviour



Different frameworks for supporting behaviour

- Research on attachment suggests that a relational rather than behavioural framework for supporting children's behaviour (Bergin and Bergin 2009; Riley 2010; Cozolino 2013.)
- A behavioural framework which relies entirely on rewards and sanctions to modify children's behaviour is not necessarily the most effective model and does not always work.
- A relational framework promotes universal well-being, learning and behaviour and can be especially helpful with children who have attachment difficulties or other vulnerabilities.

Different frameworks for supporting behaviour continued..

- A relational framework acknowledges that all behaviour is a form of communication and adopts a “no blame” ethos.
- Relational frameworks include the strategy of emotional coaching- this is a useful tool for supporting children’s well-being, learning and behaviour.

SIDS PLACE 2002-2014



SIDS PLACE 2002-2014

The unit was established in the grounds of a secondary school in Redcar, Cleveland.

The reasons for the creation was primarily related to the school being in an exceptionally deprived community.

SIDS PLACE 2002-2014

There were a number of impacting factors at work:

- Significant numbers of children exhibiting a wide range of emotional, social and behavioural challenges including low attendance.
- The school had little or no capacity to respond to or assess the needs of so many children.
- Outside agencies having little or no effect on complex issues.
- The highest number of fixed term and permanent exclusions in the borough.
- High levels of anti social behaviour in the community.

SIDS PLACE 2002-2014

CASE STUDY 1



SIDS PLACE 2002-2014

The project was comprehensive and included:

- A facility converted for purpose.



SIDS PLACE 2002-2014

The project was comprehensive and included:

- A facility converted for purpose.
- A whole school approach headed by a trained team of specialist non-teaching staff working inside SID's place headed by a highly trained and experienced manager.
- outside agencies, whose key role was to assess, determine need and monitor outcomes.
- Key players in the project were a team of trained therapists who worked on site.
- Support for parents and carers as part of an agreed offer.

SIDS PLACE 2002-2014

As an adjunct to the above support 'SIDS Place' engaged with up to 60 children each and every day.



SIDS PLACE 2002-2014

Their role was to provide respite from the day to day challenges of school and to meet the more immediate needs of children. Included in this offer was a large garden in which many children worked.





SIDS PLACE 2002-2014

The 'team' consisted of:

- highly experienced non-teaching staff working on a day to day basis with the children inside SID's place
- pastoral leaders
- a senior behavioural manager
- Therapist
- Police
- social workers
- Parents; and
- other relevant agencies e.g. nurse.

SIDS PLACE 2002-2014

Outcomes:

- Children engaging with the curriculum
- Significant improvement in attendance - 83% - 92% in two years
- Significant fall in challenging behaviour
- Highest excluding school to lowest within 12 months of opening
- Targeted intelligent support for individual children and their families
- Children needing long-term support could continue in SID's Place
- Significant improvement in examination results

SID'S PLACE 2002-2014

Additional outcomes

- We provided assessment places for children from other schools including feeder primary schools
- We also became a centre for excellence for assessing children in the LA

The LA asked us to provide therapists to work in many schools across the borough, which we succeeded in doing.

SIDS PLACE 2002-2014

CASE STUDY 2



SID'S PLACE 2002-2014

Where are we now?

- 'SID's Place' no longer exists
- The school is the highest excluding school in the borough
- There is no therapy service working in the schools across the borough

HOW SUPPORT AND THERAPY CAN WORK IN PRACTICE IN SCHOOLS

SID's Place became a good example of how a comprehensive offer of support and therapy can work for children and families in the short, medium and long term.

A network of therapists working together across a geographical area can make a measureable difference.

Teams of therapists have the ability to share new developments and skills learned. They can ensure a high level of training and clinical support is embedded in their daily work

HOW SUPPORT AND THERAPY CAN WORK IN PRACTICE IN SCHOOLS

If therapists are to be able to deliver successful outcomes for children they must do so as part of a team of professionals working in schools with children and their families.

SOME IDEAS TO LEAVE YOU WITH

1. Therapists who work with children must be trained to a high level to work in early years trauma and attachment disorders. Also they need a sound understanding of childhood conditions which can significantly impact on their natural development.
2. Therapists must be able to access clinical support that is both rigorous and intelligent.
3. Action research needs to be identified that can point therepists to new and sound developments.
4. Government is considering the idea of funding all schools to provide access to counsellors.

Without all of the above and the 'team around the child' approach in my opinion this would be a tree bearing few fruit.