**Aisha’s Life Journey – what we know**

***This is the synopsis that the film is based on*** *:- Aisha is being blackmailed, using explicit images of herself, by an older male who she was previously involved with. Aisha intends to meet this man to take a package to him. A residential worker interrupts her and takes one of two approaches – a positive or negative communication style. When interrupted by the residential worker, the user is transported into Aisha’s past life, where it becomes known that a male family member sexually abused her.*

*The second part to this scenario follows on from the negative communication style as seen previously and takes the user to the living area of the residential home. After returning from meeting the man, the residential worker engages Aisha having reflected on their previous conversation herself. This leads to Aisha disclosing what she is going through to the residential worker.*

**Background information**

Aisha (15) is currently living in a residential placement, a new arrival. She was removed from her parent’s care when she was 7 years old.

**Home Life**

* Aisha lived with her mother and father up until the age of 7. It was an exceptionally deprived home life with the absence of anything needed for a healthy upbringing. The family had very little in the home except for a huge TV with dominated the space living space.
* Money came into the home from numerous different adults who attended the property, but substance misuse by mum made it impossible to care for Aisha who had to fend for herself much of the time as well as her younger sibling.
* The family became known to Children’s Services after Aisha’s younger sibling was born when Aisha was 5 years old, following a concern raised by a Health Visitor and a hospital admission for the new-born sibling.
* Aisha was subjected to frequent sexual abuse by her father and made a disclosure to her mother which was not believed. Mother refused to engage with social workers, telling Aisha to stop telling lies and to just be a ‘good girl’.
* Since Aisha was removed from the care of her mother, they have had sporadic contact due to her mother’s addiction. There has been no contact with father since her disclosure.
* Aisha’s younger sibling was adopted and there is now no direct contact as a result which Aisha struggles with.
* Aisha had several unsuccessful foster care placements; disruptions were frequent. She was described as ‘hard to manage’, ‘impossible to work with’, and ‘a very challenging child’, due to her behaviour.
* Aisha has recently been moved to live in Residential care and has been identified as having an older friendship group.
* Aisha has little ambition for the future and maintains she has no interests outside of being with her friends, social media and makeup.
* She expresses her excitement about her new ‘boyfriend’ as he is older than her friends’ boyfriends as well as incredibly generous. His uncle runs a local takeaway, so all the food is free!

**School**

* When Aisha started primary school, she was described as ‘unkempt’ and would often be tired, sometimes falling asleep in lessons.
* She would frequently be caught taking other children’s food or turning up early for school asking for breakfast.
* Aisha had no concept of personal space with adults/ tactile with adults who she was not familiar with.
* Aisha was always collected late from primary school, with mum always having a reason for this although at the time, the family lived just 10 minutes from the school. Little challenge from school over this, even though one member of staff once noted that mum appeared to have been drinking.
* Aisha was a carer to her younger sibling and would often be agitated about how the younger sibling might be, particularly when Aisha was collected late from school.
* Attendance at secondary school was poor, with foster carers unsure as to why she was not attending. When challenged, Aisha would become aggressive with adults and go missing for hours.
* When at school her attainment is very low, way below that expected of a secondary pupil. Teachers described her as being pre-occupied, removing herself from lessons and being exceptionally difficult to manage. Two teachers (History and Art) related well to Aisha and appear to ‘understand’ her better than others. Aisha was prevented from doing Art when her behaviour was poor, having to spend time in isolation instead – reflecting on her behaviour.
* When Aisha was 14 there was a sudden and unexplained change of friendship group, with Aisha claiming that she had a new ‘boyfriend’, and she was seen by several teachers in the local area with him and his older friends and a couple of other older girls whom they did not recognise.

**Health**

* Whilst at Primary school, Aisha constantly had nits and even when school informed mum of this, offered to help address the issue and provided lotion to support the severe infestation, things did not improve. Aisha would often be sent home from school with nits in order for treatment to take place only to return with no change. Aisha would spend much of the day scratching her head – no formal action was taken by the school.
* Aisha was described as underweight by a Health Visitor early on but again no action was taken. At school, Aisha would be found on a few occasions taking food belonging to other children, for which she was disciplined. As she went through school, and in foster care placements, food became a real issue for Aisha, which resulted in aggressive behaviour if she felt she was unsure where her food would come from, or what she would be eating.
* Aisha was not known to the sexual health clinic.
* Enuresis was a health issue when first placed in foster care and this has taken some time to be fully addressed.