

ATTACHMENT & TRAUMA ISSUES IN EDUCATIONAL SETTINGS

Supporting looked after, adopted
& vulnerable children

About BraveHeart

BraveHeart Education came about through many contacts with adoptive parents and foster carers whose children struggle within our educational settings. For children who have experienced early trauma it can be incredibly difficult for them to engage in learning and to feel safe enough to trust those adults around them.

There are many times when these children's fears and anxieties prevent them from learning, and actually the nurseries and school settings especially can add to their anxieties.

Find out more at:

<http://www.BraveHeartEducation.co.uk>

Join our community on Facebook:

<http://www.facebook.com/BraveHeartEducation>

By reading these short chapters we hope that you will gain a fresh insight into the issues for vulnerable children.

After reading this book, if you feel this knowledge will benefit your setting there are a few opportunities to gain more understanding:

1. Buy the 'Teachers Introduction to Attachment' book either direct from us here in the UK or on Amazon
2. Join us on our leading Online training programme which can be found at:
<https://www.bravehearteducation.co.uk/online-course>

If you would like more information on these opportunities please email the team today at: **team@BraveheartEducation.co.uk** or by calling us at **0121 405 0310**.

Table of contents

INTRODUCTION	5
Chapter 1 - ANXIETY	7
Chapter 2 - BEHAVIOUR COMMUNICATES NEED	9
Chapter 3 - TRUST	11
Chapter 4 - ACT YOUR AGE NOT YOUR SHOE SIZE	13
Chapter 5 - SELF-REGULATION	17
Chapter 6 - TRIGGERS	21
Chapter 7 - PREVENTION IS BETTER THAN CURE	25
Chapter 8 - COMMUNICATION IS KEY	29
Chapter 9 - HOW YOU RELATE	33
Chapter 10 - WHAT'S THE MOST IMPORTANT THING TO LEARN?	37
Chapter 11 - INNER AND OUTER RESOURCES	41



Introduction

40% of children experience some kind of trauma before the age of 18, so the statistics tell us. This could mean that in a class of 30 children approximately 13 will have experienced trauma. Of course this is to varying degrees of impact on a child, but there will be an impact. You will know from your contact with children that some find our educational settings very difficult to settle in. For these children learning is not a priority but getting through a day and surviving is.

This book is an aid to those working with children and young people on any level, whether in a classroom, nursery, early years, secondary, college, youth groups and church settings.

I hope that as you read this book you will start to see just how different it is for these children. Their lives have been, and still are in effect chaotic – they experience much anxiety every day as they try to make sense of their lives and trust the people around them. They need a completely different approach to the other children in the classroom and this e-book will help you to see that.

My knowledge comes from personal, day-to-day experience our with three adopted children who all have attachment difficulties. The theories are essential to know and understand, but the practical application of these is crucial – without it the theory means nothing!

My plea is that you use these insights into the world of attachment, so that you can help vulnerable children & young people develop and have a chance to to function well as adults in the future.

Thank You

Nicola Marshall



Chapter 1 - Anxiety



For children who have experienced (or are still experiencing) early trauma they are constantly in a state of heightened anxiety. Can you imagine how it must feel to never know what might happen next, that you may get a different reaction every time to something you do, or that you never know whether you will be safe or not? Well, for these children that stress and anxiety from home or from their past follows them everywhere.

To live in that constant fear and sense of vulnerability affects a child's mind and how they can settle and regulate in a learning environment. There are many worries for them in our environments. You can just imagine how many there might be; with the noise, the amount of other children and adults, the constant moving around, changes in teachers and other key staff members, changes in children and how they relate to you – they all create anxiety and hyper-vigilance.

The most stressful time for children like this can be the 'free time', the break, lunch times when they are expected to play with their peers. This again can heighten their anxiety, as relationships can be very troublesome at the best of times. They often don't know how to make and keep friendships, and as they grow older other children start to notice that they are 'different' and bullying and isolation can become a great problem for them.

Also the learning time within classrooms or playgroups can be a worry for them. Hyper-vigilance means they are always on the look out for danger. The slightest sound in the hallway, a child messing around behind them, a raised voice or difference in tone can take their concentration away from the task and onto their thoughts and fears "what is about to happen and how can I keep safe?"

The signs you may find of stress and anxiety in these children are:

- Being overly emotional
- Engaging in regressive behaviour such as thumb-sucking or issues with toilet training
- Acting out inappropriately
- Being extremely tired
- Overeating or loss of appetite
- Behaving out of character, i.e. outbursts of aggression
- Showing poor concentration
- Being excessively clingy with friends or family members

Louise Michelle Bomber in her book 'Inside I'm Hurting' talks about other things to look out for in class:

- Alterations in a child's voice
- Children flinch or jump
- They tell stories
- They look startled
- They start clowning around
- They hum or sing at inappropriate times

One such example of when you might notice anxiety in a child is based on a child called Jane:

During first period Jane was having real difficulty keeping up with the pace of the discussion around the Romans. Out of the blue she started humming a made-up tune, tapping her feet and dancing on her chair. Straight away the teacher told her to stop being silly and that if she continued she would have to leave the classroom. The teacher was left feeling annoyed and confused as to why she might suddenly do this in the middle of a lesson.

So what can we do to help children with their inner struggle in our learning environments?

Here are a few suggestions:

1. Recognise that the anxiety is there. Notice it if you can (they may have it well hidden).
2. Try to give them space to express their concerns – they may need you to help them with the language needed – i.e. "I wonder if this noise is difficult for you", "I guess you are finding it hard to concentrate now we have had to move rooms". This may seem very basic but these children find it very difficult to understand their emotions and will not be able to articulate.
3. If they become too anxious to stay in the environment take them elsewhere but stay with them and help them to relax with breathing exercises. Help them to recognise their anxiety – use the technique in point 2 to get them to notice and articulate their feelings.

This is a huge subject in of itself, but as with all things being aware of where a child is at is a big step.

For more information and strategies refer to Louise Michelle Bombers book 'Inside I'm Hurting' – highly recommended as a must have resource!

Chapter 2 - Behaviour Communicates Need



Children who have experienced early trauma find it very difficult to communicate.

For most children I guess they find it hard at times. However for these children understanding their own feelings and being able to then articulate them is near impossible.

Research has shown that children like this find emotions hard to detect in others as well. They often misinterpret facial expressions, tones of voice and the little signals that those with a secure attachment know what they mean. For those children who've lived (or are still living) in an unpredictable environment it stands to reason that they may misinterpret what others want or will do.

So in turn, being able to express their needs to adults in a way that is appropriate and acceptable in our society is all mixed up for them. Therefore a child's behaviour may seem irritating, intentionally difficult and that they are 'naughty' children, when in fact they are trying to express a need in the only way they know how.

Some of the more obvious behaviours you might see would be rocking, head banging, skin picking or scratching. However the less obvious ones may be constant chattering, baby talk, humming and singing, stealing or hoarding.

The needs they may be trying to express are:

- Distress
- Fear
- Anxiety

- Frustration
- Loneliness and isolation
- Mistrust
- Relationship conflict

There are three types of insecure attachment in children.

The first is called **Avoidant Attachment**. This child will be eager to please and will try to help whenever they can. They are actually making sure they are liked, as they never know what might happen. This type of child is hard to notice, as they will try their best to keep under the radar. However inside they are overly anxious, hyper-vigilant and find it near impossible to concentrate on a task. Any slight distraction can send them into a panic of what might happen next.

Ambivalent Attachment is a very different story. You will know these children, as their attention needing behaviour is hard to ignore. They will be in your face, acting out and constantly fidgety and anxious. They may also be the ringleaders in trying to stir up trouble with other children. They will also be overly charming, know everyones names and details and be eager to help whenever they can - even if you don't want their help!

Disorganised Attachment is a combination of both - very confused. You never know where you stand with these children - sometimes they're quiet and compliant other times they may be in your face and desperate for attention.

For all the children with insecure attachments there is so much more going on inside them than we realise. Someone described it to me once as the game at a fairground where the things pop up randomly and you have to bang them down with a hammer. That can be like the

memories and feelings these children have of their past. It's always there and they work very hard to keep them down as far as they can. This constant repressing of feelings is exhausting!

Each of these types shows up in different ways, but all are trying to communicate the needs beneath. The key is to be aware of this and try to meet that need in some way. This will help the child regulate their feelings, so that their behaviour can change. Also they will know that adults are concerned about their feelings - in the past they may have felt that any kind of attention was better than none.

Ways to help children express their needs:

1. Be in tune with the child to find out what's going on with them. Try to respond not react to their behaviours, which may seem extreme at times. Use the techniques in chapter 1 to help them identify their feelings.
2. Look up camsden.com on the internet - brilliant resource for teachers and parents to help children with many different feelings.
3. There are many tools available to help children understand different feelings and emotions. For example you can find mirrors with little faces around them that show the different expressions. This helps the child to recognise emotions such as anger in themselves in the mirror and also to see that in other people. There are many such resources available that will help with primary school age and younger.
4. Remember, above all things, that their behaviour is them communicating a need - they are not necessarily 'naughty' children acting up - they can be very distressed, anxious and scared behind the bravado. Noticing this will make all the difference to your reactions to them, and in turn that will help soothe their concerns.

Chapter 3 - Trust



Trust is a difficult area for adopted, looked after and vulnerable children. Why should they trust adults? Some have not been a great example to them so far - whether they've experienced a neglectful, abusive and/or inconsistent start in life - they may have then been moved around adults like old worn out clothes. This may seem a harsh thing to say but sometimes their realities are harsh.

So how does that impact you as someone trying to teach them or help them? How do you fit in the trust dilemma?

It is difficult to get children to let go and trust you especially when they will not have much time with you each day. They may also appear to trust but in reality they are holding back to see what might happen - will you let them down? Will you do what you say? Will you hurt them in some way?

Why is it important for them to trust you at all? Of course none of us trust people completely until we get to know them and we trust at different degrees with different people. However with these children not trusting has a more damaging effect. It stops them from being able to be at ease with people. It makes learning hard, as they are constantly worried about what may happen. Their minds and feelings are clogged up with anxiety that makes it doubly difficult to be open to learn and experience new things.

To illustrate just how long it takes them to trust - here's a story with one of my sons. Just for some context he was 7 years old and had been with us for 3 years.

Every time he has a bath we get to the point where he has his hair rinsed. I use a bowl and mix the water from the taps in the sink and then

pour over his head. Every time for the last 3 years he's asked to feel the water before I pour it on his head. This always is a reminder to me that he really doesn't trust that I will do the best for him.

Then one day he said he wasn't going to test the water - I nearly fell off my seat! Wow I thought we are making progress and for that day he didn't put his hand in the bowl - he just let me pour it on his head. It was a defining moment for me.

Of course you may be thinking great now I bet he trusts you completely? Well it's not that simple I guess - he went straight back the next time to asking to test the water and has continued ever since.

It is not something that happens overnight - it takes time, patience and the understanding that the smallest glimpse of hope is enough to build on and help that child to be able to trust other adults as well.

So what can you do to help them and to build trust?

Provide a key adult. This person needs to be someone constant that they can go to when things are difficult. Someone who works at building trust with them and is on their side. This person can help them with changes of routine at school or in the learning environment. They can also learn as much as they can about that child, understand their needs and anxieties and try to mediate with others involved.

The way you relate to the child is very important. Make sure you can keep to the things you say as much as possible. They remember everything even if they seem to not be listening. Don't make promises you can't

keep. Understand that they are watching your every move at times - what you model to them will make a huge difference to their development.

Know that it is not personal. Any way they react to you is not necessarily because of you. The closer they feel to you the more they may take out their anger, loss and grief on you. You need to stay strong for them in these circumstances, as much as you can, and know that any small trust they feel for adults is a step in the right direction.



Chapter 4 - Act your age not your shoe size



When I was at school (many years ago) we used this expression a lot – “act your age not your shoe size” and of course as you grow up it makes sense, if you’re a 20 year old but your shoe size is a 5. However for children it doesn’t make sense and can actually make understanding them more difficult. So a child has a shoe size of 12 but his chronological age is 7 – do we expect them to act older than their actual age?

As that phrase has been running around in my mind it made me think about children who’ve experienced early trauma. How do we benchmark them against others in their age range? Maybe we expect them to act like a 7 year old, whatever that means, because that is their age when actually their emotional age is more like a 4 year old.

So this chapter is about understanding the emotional age of children at school or in learning environments. When you can understand and really ‘get’ that they are not operating at their chronological age it makes learning easier for them, and for you, as someone trying to help them to learn.

Children who miss out on those essential early nurturing experiences in safe relationships may be functioning at a very immature level emotionally. They may not have reached the stage of ‘mutual play’ (Winnicott 1971), which is necessary for learning and being able to see things from other people’s point of view.

There are many times when these children will not be able to do the things expected of others their age. Their brain development is

delayed and damaged, to the extent that they live more in the primitive part of the brain – the survival instincts – than in the logical, reasoning, emotional regulation and reflection part of the brain. Therefore the processing skills involved in learning are just not there many times, and if they are there it will need lots of emotional regulation to enable the child to access them.

It has been found that there is a strong link between our cognitive ability and our emotional development. Our first experiences of learning as a human are in those very early stages of infancy, through the relationship with our primary caregiver. How that relationship is; whether it's a trusting, strong, safe relationship of stimulation affects our future relationships and our ability to learn. The relationship with a teacher is very important as an extension of that early relationship with our primary caregiver.

Bowlby (1969) talks of an 'internal working model' – how a child feels about himself in the world based on interaction with his mother. When that relationship has been good enough and all secure attachments made – the child's sense of identity and worth develops. The child then uses that safe base to go and explore the world, his 'internal working model' is one of a lovable, significant person in relation to an adult who loves and is interested in him. In his future this model is transferred to his teacher who may be considered an 'educational attachment figure' (Barrett and Trevitt 1991).

This puts pressure on the teacher/helper, especially if you do not understand this complex dynamic. Without the understanding there may be confusion about behaviours and the differences between children of the same chronological age. "Why does Billy always want to draw attention to himself?" "Why can't Sally just get on and play nicely with others?" "What

can I do to engage Dylan in sharing a game?"

Knowing that a child may not have reached a developmental stage is helpful. Bench marking can create difficulties for children, as they will feel the pressure and anxiety associated with having to 'perform' in a certain way. We all know that having to perform can make it incredibly stressful, and for these children many times they come to school in a heightened emotional state already. They will take time to regulate to a calm state where they can listen and learn.

Some of the research around helping children with early trauma to heal talks about allowing them to experience the earlier stages of development again. They may not have ever known how to share, how to listen to others, how to empathise and how to use their imaginations in play. If you imagine a child who has never been played with in their early years – to then be expected to know the rules of play, how to interact with others and what is acceptable would be near impossible.

Of course we're not saying that as someone in an educational setting you will be able to offer the earlier stages of emotional development that children may need, in terms of nurturing and bonding to a primary caregiver. What you can do however is understand where they are at and modify activities and tasks to that emotional level. Of course there are targets to be met. But how great would it be to be able to provide opportunities for children that could encourage them to develop, whilst not making them feel 'abnormal' compared to their peers?

Some things you can do:

1. Be aware and understand that a child's behaviours may be more about their emotional development than their academic level.

2. Notice children like this and see the effect if you approach them as you would someone at an earlier stage of child development. They may be 10 but acting like a 5 year old - what would you do with a 5 year old?
3. Consider different ways to bring children along in their presenting stages of development, ways that can encourage them to regulate their anxieties, so that they can access other parts of their brain in order to learn.





Chapter 5 - Self-Regulation



Self-regulation is the ability to control your urges and impulses, change your behaviour if needed, and follow other peoples' instructions – like your Mum and Dad or the teacher.

It is also about being able to soothe yourself when you are hurt emotionally. To be able to know that it is not the end of the world if you miss out on a sweet this time. Life will be good to you again.

From around 12 months old, a baby starts to develop the ability to control their urges and can listen and do what they are told (notice I said can – doesn't mean they will).

As they grow so does their ability to stop themselves from doing something they want to

do but are told not to, like hitting their sibling. Also they start to be able to do things that they don't want to do like tidy their rooms.

Without the ability to self-regulate children will grow into adults who find it very hard to function, learn and grow, build relationships and 'hold down' a life in general.

In a securely attached child who has not experienced early trauma the development stages are as follows:

- Self-regulation begins between 12-18 months. They are more aware of social expectations, and develop the ability to change behaviour when asked by an adult. This stage does of course require an adult to be there, helping and guiding.

- By 24 months children start to develop self-control and the ability to follow instructions even when the adult is not present.
- By 36 months most children can internalise adults instructions and wishes. They will act in ways that they believe are what the adults wanted. So their self-regulation now needs less guidance from adults.

Interestingly self-regulation is linked to brain development and bodily responses to stress particularly. Your brain and body are constantly sensing and responding to the needs you have. Specialised 'thermostats' monitor internal and external environments. When they sense something is wrong i.e you are hungry or stressed, they then activate your brains' alarm systems, in order to get what you need – feed yourself or find ways to calm down.

This regulation happens automatically much of the time and you are unaware of its activity. As you mature your brain wants you to participate in your own regulation. So when you internally need something – food or drink for example – you then satisfy that need externally. If the external world is threatening in any way you regulate that yourself by the fight, flight or freeze responses. You also, as an adult, develop techniques to self-regulate before the external stressor, i.e. you make sure you have enough sleep, eat well, have fun, relax – whatever you feel will help in order to cope with life.

However, we are talking about children here who have not had the help and guidance in their early years in order to self-regulate. When this happens they are at risk of experiencing many problems – for example persistent tantrums and aggression, impulsive behaviours or difficulty regulating sleep and diet.

What helps the stress-response to develop

adequately is repetitive exposure to needs being met, in a controllable way. So for example a child will know after many times of being hungry and crying, that they will have food and be satisfied. They learn what that feeling of being hungry is for a start, and then that they get that need met. As they grow they know how that need is met and can regulate that on their own – ask for food or get food themselves as they grow. They can also say when they are full and stop eating.

However, for children who have not had such a consistent response they will be confused and have conflicting feelings around hunger, for example. Some children who have not been fed regularly will find food a real issue. They may not be able to tell when they are hungry and when they are full, and will definitely have anxiety around availability of food.

A big issue for these children is understanding their emotions and the alarm responses internally. A fearful child may act sullen and angry, unaware that they are actually anxious about a change in routine in the classroom. A hungry child may act distracted, irritable and uncooperative, unaware that what they really feel is hunger. This is hard enough to discern sometimes in ourselves or other adults – at times you may not identify that you are anxious about something, when you can't sleep or your appetite changes.

The point here is that these children will have more difficulty than most in identifying their feelings and the things that stress them. Those around them can very often then misunderstand them.

How can you identify poor self-regulation?

Children with underdeveloped self-regulation will present with many different signs – some are:

- Impulsive behaviour
- Hypersensitivity to transitions and change
- Overreaction to minor challenges
- Inattentiveness
- Physical hyperactivity
- Frequent tantrums at later stages of development
- Inability to know when they are hungry, thirsty – may ask for food, drink constantly

So once you identify those for whom self-regulation is poor – here are some ways to help them:

- Model self-control and self-regulation through words and actions. For example “I just found that quite stressful so I need to sit down and have a cup of tea, or go for a walk”.
- Provide structure where possible – they need strong boundaries and structure as they will not have the internal guide to help them
- Predictability whenever possible – they

need to know when things will happen and that they will happen – for example knowing when the snack breaks are, lunch time, and home time are all important to them

- Anticipate transitions and change wherever possible – write things down for the parents as the children may not take in verbal instructions
- Identify those who are most impulsive and poorly self-regulated and try to keep them apart – they will probably gravitate towards each other, but this will make things harder to manage in the learning environment
- Remember that children with poor self-regulation very often are comfortable with chaos and may try and create an atmosphere of chaos – counter this with structure and boundaries
- Seek help and clarification – talk to the parents or other professionals to find ways to help the child to self-regulate

Remember that self-regulation takes time for all children – it does not develop over night but it is such an essential part of being a functioning adult.





Chapter 6 - Triggers



There are many triggers in our educational environments for children – things that may create a reaction in them, whether they are emotional, physical or mental reactions. These triggers can send a seemingly content child into a rage at times. You may have seen this yourself, where a child seems perfectly happy doing a task one minute, and then the next they have thrown their pencil down and refused to carry on.

This chapter is about those triggers – what are they? How can you recognize them? What impact do they have for a child? And what can you do to help them deal with these triggers?

I hear many times people say “how can a child remember what has happened to them when they were so young? They couldn’t even speak or really know what was going on around them”. I am amazed at how this seems to work. Children who have been taken into care, for

example as babies, still show signs of struggling as they grow, even when it appears they did not suffer from prolonged abuse. In fact in some cases these children seem to struggle more than those who went into care later in their childhood.

One of the books I recommend is the *Primal Wound* by Nancy Verrier. The author suggests that a baby’s separation from its birth mother has devastating effects – it is indeed the primal wound that children then strive all their life to recover from. She claims that the wound will always be there, but the way in which the child learns to adapt to that wound makes all the difference. Like being born with only one arm, the bearer has to adapt to lead a functioning life.

The idea that a baby cannot be affected unless they are old enough to understand does not hold weight. You may not be able to articulate or process what is going on for you at such an

early age, but all your senses work. Smell, touch, sight and sound are available to you as a baby and this is what lingers many times. The smells of a dirty, unhygienic environment can last, the sound of doors slamming and people being hit can last, and the overriding sense of danger in a situation can last.

As an adult now, if I mentioned certain songs they would trigger memories for you – not all cognitive memories but feelings, sensations, emotions. We all have triggers so why is it so hard to believe that babies who have experienced a disturbed attachment cycle would react to triggers that take them back to a more uncertain and scary time for them?

One example of this is of a boy who cries whenever he smells a certain perfume on a teacher. That smell could be the perfume his birth mother, caregiver, or the person he's not living with anymore used.

Or like the child who covers whenever he hears a male raised voice but no reaction to a female shouting. Maybe the child who shows an obsessive interest in a particular subject at school, like evacuation and rationing in World War II. Without knowing that child's history you could still imagine that not having enough food and being hungry was something they could relate to more than other children in the class.

As you can see triggers are a difficult area as they can be anything – a sight, sound, smell, touch or situation. It is also near impossible to know what will trigger a child and how they might react. You could know that a child has not had much food for example and expect them to react to the rationing as mentioned above – but they may not! Or to be more accurate their reaction could be very well hidden.

Another area to consider is that there may be triggers in the tasks you ask children to do. They may bring up feelings of inadequacy and low self-esteem. For example a child may react aggressively to being asked to draw something – their reaction, whilst extreme, may actually be a response to not being able to draw or write. Those feelings of 'not being as good as others' of course is present for lots of children, but for those who've experienced early trauma those feelings may be magnified. They get frustrated easily and will opt out of tasks that appear too difficult for them. They may have been met with harsh reactions in the past (or present) from parents who expected them to be able to do things much better than they can.

You have to remember when considering triggers for these children that uncertainty is always there for them. Living in an unpredictable environment leaves scars. The more they feel comfortable with people, situations and routines the easier it is for them. So knowing what happens each day, where they need to go, who will be there are great comforters for them. Many times these children will ask what is happening every minute of every day, and will very often ask when the next meal is or what it will be, while they are eating one meal.

Surprises are not so great for a lot of these children. They either can't cope with the not knowing, or the excitement becomes unbearable for them. For example trips and swimming may become obsessions for them – always asking when it's happening, fixating on the details and logistics of a trip.

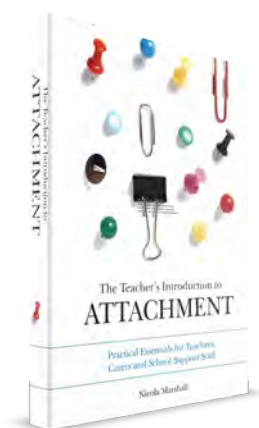
As with all the chapters of this book – many of these aspects you could relate to children with secure attachments too. But it's worth mentioning that what the anxiety is based on is very different, and how they process things is

very different. A securely attached child knows they will get food at a certain time, they may ask when lunch is coming but once they get the answer they are content. For a disturbed attachment child they may get the answer but it doesn't necessarily alleviate the anxiety and panic of not getting food. There are securely attached children who may react to loud noises such as balloons being burst, but they know it is a balloon and nothing to fear, whereas a child who has experienced early trauma may associate something very different to loud, unpredictable noises and the fear does not subside as quickly or easily.

So what kind of things do you need to look out for, what might be common triggers for these children? – as already said it could be anything and not what you would consider the most logical thing.

So what can you do to help?

1. Try to notice patterns of behaviour in these children – when does their behaviour change? What is happening at that moment or before? Who was there/not there? What was expected of the child?
2. Talk to the parents/caregivers about what might be possible triggers.
3. Reassure the child that they are safe at school – if there are changes in routines make sure the child knows beforehand.
4. As you are building trust with them and helping them to understand what trust is, make sure you carry out the things you say you will – they will notice inconsistencies.
5. Communicate with the parents/caregiver of any change in routines, i.e. tests or trips coming up.
6. Be aware of the curriculum hotspots – what may be triggers for these children. Where possible take the child's feelings into consideration, i.e. you may be able to change your projects slightly to accommodate these children, without adverse impact on the class learning – for example development and growth projects do not need to be around the child's history – bringing in baby photos etc., you could do it around famous people or animals. As they grow older in Secondary school and cover more intense subjects, try to have a key adult on hand to work through whatever may come up.



Would you like to understand more about Attachment at a deeper level?

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Chapter 7 - Prevention is better than cure



One of the objections I've heard many times to trying to bring in new strategies to help those who've experienced early trauma, is the one around the time and resources needed to do the things suggested. To provide the one to one attention these children need, to create the time needed to understand them, to be able to treat some children differently to others – they all bring their own changes.

So why bother?

Wouldn't it be easier to be able to treat the whole class the same? To be able to use the same rewards and sanctions for all? In an ideal world of course that would work. BUT we all know that families are complex these days. The

blended families we see for these children, as well as the ones we experience in our own lives sometimes, are very much becoming the norm. The statistics say that 40% of children will have experienced some kind of early trauma by the age of 18. The effects of that are to differing degrees of course. Trauma comes from the external experience or threat of danger, combined with the internal response. That's why you can have two children who experience the same event but one copes fine, whilst the other struggles to come to terms with it.

The impact of that trauma on the children is the reason why we do need to bother. As we've said in earlier chapters their behaviour communicates need, and when those needs

are not recognised and met in some way, the child's behaviours become much more difficult to manage. Therefore if we could look more at preventing the need for children to communicate in inappropriate ways, then it would be easier for the child, as well as the rest of the class, and you as the adult.

The saying 'prevention is better than cure' can be said in another way – 'It is better to try to keep a bad thing from happening than it is to fix the bad thing once it has happened'. How true. Of course for these children bad things have already happened and may still be happening. BUT the additional bad things that happen to them in school, the triggers that may bring back the early traumas, can be prevented sometimes.

This all sounds like common sense, but I know as an adoptive parent that at times understanding these things, and then being able to pre-empt situations is very different and difficult. As we've said before the triggers may not be easy to see and the things you may think would not effect a child – do.

So the main challenge in this chapter is to really spend the time to understand these children better. If you can do that, you can empathise more and be able to really 'see' these children's needs.

When you can work to understand what the learning environment is like for these children you can pre-empt the anxiety they may feel when things change, when there are tests, when it's break times, when relationships are involved, when there's expectations on them to fit in. To know that someone is thinking of you and has you in mind is a powerful thing for anyone, but especially for these children. Many times in their past no-one has had them in mind.

There are two books I'd like to recommend. The first is 'The Primal Wound' by Nancy Newton Verrier, which has already been mentioned in previous chapters. It is a controversial book in some ways and quite harrowing to read as it describes the depth of the wound some of these children have experienced. The impact of that primal wound continues throughout their lives BUT the more understanding from, and connection with adults, the easier it will be for them to start to heal.

Just to illustrate – here is a passage from early on in her book. She is talking about the importance of early experiences as a child.

"That a child does not consciously remember it will not diminish the impact of it. How many of us remember very much about the first three years of our lives? Does our lack of memory mean that those years have had no impact on us – our perceptions, attitudes, and behaviour? How many sexually abused children remember their experiences of abuse? Are we to believe that if a person can successfully keep those experiences from consciousness, they will not affect his or her future relationships? In the case of abuse, we have now at last begun to recognise that there is, indeed, a profound lifelong effect on the person, an effect which often requires years of therapy to overcome. Yet, what if the most abusive thing which can happen to a child is that he is taken from his mother?"

In Nancy's book, *Necessary Lossers*, Judith Viorst (1986) tells this story:

A young boy lies in a hospital bed. He is frightened and in pain. Burns cover 40% of his small body. Someone has doused him with alcohol and then, unimaginably, has set him on fire.

He cries for his mother.

His mother has set him on fire.

It doesn't seem to matter what kind of mother a child has lost, or how perilous it may be to dwell in her presence. It doesn't matter whether she hurts or hugs. Separation from mother is worse than being in her arms when the bombs are exploding. Separation from mother is sometimes worse than being with her when she is the bomb'.

Nancy Verrier goes on to say – “I am not suggesting that we keep a child with a mother who will set him on fire, but I am suggesting that we have to understand what we are doing when we take him away from her”.

Very difficult stuff! But she makes many thought provoking points about the effect of such early trauma on a child. This is important to know when you have them in your educational

settings, and is difficult to understand why they do some of the things they do.

The second book I'd like to recommend to help you understand the possible behaviours of these children is an autobiography called 'The Kid' written by Kevin Lewis. This is an incredible true story of a child brought up in terrible poverty, neglect and abuse. The thing that's amazing about this though is the interaction he has with the schools he attends and the teachers and other adults who try to help him. It is inspiring to see what a difference you can make in a child's life, where they are very confused about adults and how they take care of them. It is difficult to read, as it is harrowing but very inspirational.

I would encourage you to read both of these books if you can and especially 'The Kid' as it is such an inspiring story of resilience and connects us once more to why we want to make a difference in children's lives.





Chapter 8 - Communication is key



In the remaining chapters of this book we will concentrate more on the keys to helping these children. Now that you understand a little bit more about the struggles they have and their view of the world, let's look at the keys to helping children in educational settings.

These are in no particular order, but the first key is about communicating with the essential people in the children's lives. For those who are 'looked after' that will be their foster carers, social worker, maybe siblings they have contact with. For adopted children – their adoptive parents, grandparents, siblings. For those still in their birth families then again the families – mother, father, siblings, grandparents. Of course as we know there may also be step-parents,

partners, and any number of combinations of adults involved in their lives.

There may also be other professionals involved – Child and Adolescent Mental Health Teams, Psychologists, Psychiatrists, Doctors etc. Many adults involved and invested in their lives, which in itself must be very scary for children!

One of the areas around this you need to consider is the confidentiality issue for these children. Of course you will know your own codes of practice and data protection, but there are other aspects to consider. Many times people ask me what is the background of my children. They know they are adopted and want to know what happened to their 'real' parents? Were

they abused? Do they see their birth families, etc., etc. Whilst I understand the desire to want to know these details, we have to remember we are talking about children's lives, their very intimate details that have already been aired in all kinds of public forums.

You only need to know a child is in care, or has been adopted, to know that the child will have experienced some kind of early trauma. You don't need to know any more details to know that all the things you've read so far in this book can help you to support them as they make sense of their lives.

There is a feeling as an adoptive parent at least, that your children 'belong' to lots of other people. As so many professionals are involved in making decisions for them, when they come to live with you it can take some time to feel that you know your children the best and in fact are their parents now and responsible for them.

This chapter is about communication though. So what does that mean exactly? We talk a lot about communicating with parents and working together in their education, but sometimes this can be more difficult than it sounds. There are times as parents we may feel like a neurotic parent – these children may not show the same behaviour at school and at home, and so the concerns we have may seem unreal to those working with them. Our children will work very hard all day to hold themselves together, and then once home the pressure releases and an angry, frustrated and sometimes uncontrollable child emerges.

Similarly from the other point of view. There are many demands and expectations we have as parents towards those working with our children, that you can spend all the time in the world helping our particular children to adapt.

We forget sometimes the great pressures on teachers these days, with a class of 30 children to manage and teach, all with very different and complex needs.

So what's the answer? Again no rocket science here – but we need to communicate. Honest, open communication where both sides are considered and where plans to work together for the good of our children are in place.

It is also very important to note that when these children see adults working together it instills some trust and faith for them too. They are used to trying to split adults and may say things like "my mum doesn't give me any food" to their school teacher, so that they can get sympathy and some more food – when of course they have been given food but thrown it away, eaten it already or given it to someone else. The only way to know is to talk to the parents and find out.

There are also seemingly small things that happen at school that parents need to know. It may appear irrelevant to you as the person working with them, but it may have a much deeper meaning for the child. For example, if you notice a child drinking excessive amounts of water – this can be connected to anxiety and fear communicated through distracting behaviours.

Also when a child's behaviour is very different at home, knowing that there is a substitute teacher for a while or that the classroom has changed in some way, can be very helpful for the parent to know.

As we discussed in the previous chapter on prevention, the parent knowing these things can make all the difference as they may be working therapeutically with their child to help

them make sense of things. If there are tests coming up or a particularly difficult subject, such as identity and growing up, these things need to be discussed thoroughly with the parents to help contain the child's emotions during that time.

Working with birth parents is of course a different story. However if you know there is trauma such as bereavement or loss through divorce – you can work to communicate with the parents involved. Many times if a child has a relatively safe environment but experiences this kind of trauma they will have the foundations to be able to cope reasonably well.

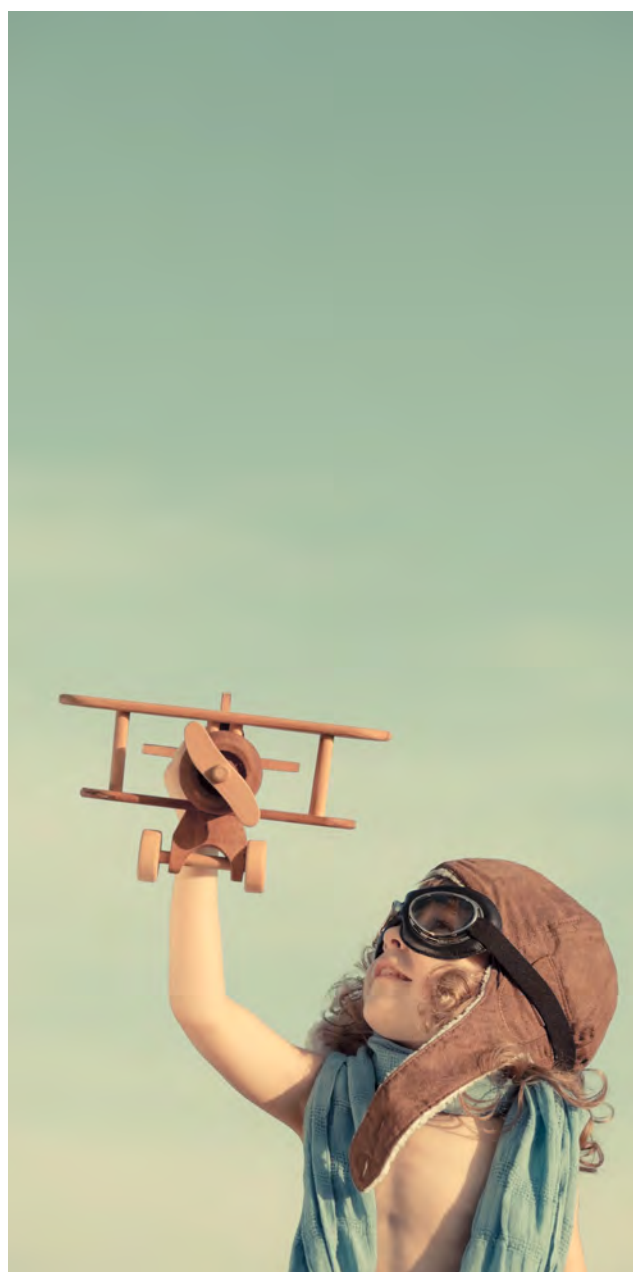
Understanding and noticing the symptoms you are learning about, in relation to early trauma is a great step. When you recognise symptoms you can try to work with the parents or carers, and also look to get others involved if necessary. We will discuss this in further chapters.

So some ways to foster better communication with parents and carers:

1. At the beginning of each year make sure you sit down with the parents/carers and discuss the child's needs. Not just their academic progress, but also more importantly their emotional development. Review this throughout the year in regular meetings – they may just be 15 minutes at the end of a week, or longer meetings at the end of each term.
2. Notice changes in behaviour for the child and patterns, i.e. change in anxiety levels – what is it relating to? Food/drink, friends, schoolwork. Make a note and discuss with the parents/carers.
3. Remember that what you see of this child may be very different to how they are elsewhere. It doesn't mean either is not true – both are a reflection of the child and how

safe they feel. They may actually be feeling very anxious at school, but hiding it incredibly well. Talk to the parents/carers and believe them!

4. Remember also that you are modeling trust as a safe adult in their lives. It is very important that they see you and their parents/carers working together to help them make sense of their world. It will be essential to their development as they learn to trust the adults around them.





Chapter 9 - How you relate



The next key is about how you relate to children who have experienced or may still be experiencing trauma. There are many renowned experts in the field of attachment; I want to bring two to your attention now.

The first is Dr. Dan Hughes, a Psychologist from the USA. He talks about the importance of relationships between the child and parent/ caregiver. This is also true in relation to teachers and people who provide stability for these children. In an ever-changing world for them, having constant, reliable adults in their lives is incredibly important to their recovery. So some of the approaches Dr. Hughes uses are very beneficial in how you can relate to those children in your care.

One of those approaches he calls PLACE or PACE.

Playfulness – firstly you need to realise these children have lived in such chaotic environments where little or no fun and laughter would be heard. If it was, it may have been cruel, unpredictable and inappropriate. Many children from these environments then find it very difficult to act as you would expect children to. They need help on understanding play and laughter and the rules involved.

When you can approach a child with a playful attitude it takes away some anxiety and fear of stern, harsh responses. As we've mentioned previously these children feel terrible about

themselves and expect to be told off or in trouble. So when their defiance is met with play it can defuse an explosive situation.

Nancy Thomas another American expert in attachment uses this approach all the time with her children. She will hide sweets in her socks for example so that the children can find them. It is a different way of doing things as you can feel that you are rewarding their difficult behaviour, but as we've said so much they do need a different approach. They have been punished enough in their lives. They need a radical approach, a way to get out of their reptilian brains and into a space of play and freedom.

Loving – it's very easy to become irritated and impatient with these children, especially the ambivalent attachment styles as they are in your face, constantly seeking attention. However, we need to stay open and loving towards them. This I know is something all those working with children aim to do – to be loving. It is even more important for these children. They will need help in understanding how to love and how to accept love.

Accepting – following being loving, acceptance is crucial. These children have been rejected and abandoned in lots of ways throughout their lives. If they have been adopted they will have lost at least two sets of very influential people in their lives – their birth parents and foster carers. Feeling acceptance for any child can be difficult, but for children who've experienced trauma they feel a great sense of shame – that they are wrong, bad, unworthy. Helping them to feel accepted will really help their healing.

The problem is that most of our education environments are not geared for acceptance of these children. Many times they will have learning difficulties, attention and concentration

difficulties, fine motor skill problems and struggle with relationships. In fact all the things that might make children feel they 'fit in' are areas of challenge for them.

So it's essential to find ways to help them feel accepted and included, whatever their behaviour may be! Being able to handle them and their behaviour is important for them to know – if you can't handle them, that in turns tells them that they are so awful no-one can be around them.

Curiosity – I love this one. Approach these children with an attitude of curiosity. What is it that drives them? What's important in their life? How can you get to the core of who they are and bring out the best in them?

Curiosity means you don't judge them so quickly. You can ask more questions of them, as you are curious to know more about them. Asking questions is the best way to stay curious and let them know they are interesting to you.

Empathy – this one again is essential. To be able to see things from their point of view really makes the difference in how they feel. Many times people pity adopted children or those in care, they may feel sorry for how their lives have turned out but the children need more than that. They need your empathy – the power of understanding and imaginatively entering into another person's feelings (says the dictionary).

When someone really understands you it creates a strong connection. For these children being able to trust an adult who seems to really 'get' them will be amazing for them.

So PLACE – a powerful attitude and approach to use with children who are troubled.

The second person is a child Psychiatrist from America – Dr. Bruce Perry. In his book 'The boy who was raised as a dog', he talks about his journey in understanding child trauma and specifically how it impacts the brain. He sites many cases of terrible abuse and neglect, along with seemingly 'normal' family situations where a child somehow struggles with life. Through his attempts to connect with each child he demonstrates a point for you as the reader that you can relate to the children you come across.

This chapter is about how we relate to children and Perry's book gives a whole new approach on how to connect with children who do not understand the expectations of acceptable social interaction. Children learn how to relate through their parents and those around them early in their lives. When that is not there or is inadequate the child develops ways to communicate that appear strange, awkward, creepy and maybe even frightening.

Here's a quote from Dr. Bruce Perry's website about this particular book:

"These stories of hope amidst tragedy are not only compelling in and of themselves, but offer important lessons about the importance of social connection, love and

community. By showing how empathy develops through connected and caring early parenting and by illustrating how the brain becomes what it does most, Perry offers a new way of seeing the world, which provides a surprising– and sometimes frightening– perspective on current child-rearing and educational practices that has implications not just for these extreme cases, but for us all".

So my plea through this chapter is that you consider how you relate to those children who have experienced trauma around you. How can you encourage that connection and engage with them? What do you need to learn in order to do that?

I would challenge you to read some of the works of these two men who have studied for many years the impact of early trauma on children. Both Dr. Dan Hughes and Dr. Bruce Perry are well respected in this field. The two books I would recommend are:

The boy who was raised as a dog
– Dr. Bruce Perry
Building the bonds of attachment
– Dr. Dan Hughes





Chapter 10 - What's the most important thing to learn?



I know this is an e-book for those in education, so this next chapter may be controversial for you, or not! My first question is – what is education? Why is it that all children are required to have an education? You might say for some it might have been better to stay at home. You may even admit for yourself, as I do, that the school years were NOT the best years of your life. What can you actually remember of the things you learnt at school? I'll bet much of what you remember was not out of textbooks, but out of experience and relationships.

“You can't say education is not important” I hear you cry; well I can....but that's not actually what I want to say. Whilst I believe and understand that learning is important, for those children who have so much chaos in their lives already, learning, in the ways we teach at school, can be very difficult.

We must ask a second question though, not just what is education, but what's the most important thing we learn?

For these children there are many, many obstacles and barriers to learning anything at school. We know that the way our lives work can be like a cycle. Our parents have good, strong parenting from their parents – they pass that onto us and then we parent our children in a good enough way, for them to be able to grow, function in life and parent their children adequately. When you see children who have not had a good experience of parenting 9 times out of 10 their parents also experienced poor parenting – they are these little children grown up.

So if you can break the cycle for children there is then great potential for them to grow up in a different way. To be able to function in life, make good decisions, hold down jobs and relationships, contribute to the world and in time create their own families that grow up to do the same.

So what is the most important thing to learn? If you broke down the curriculum taught in schools today, and picked those things that help children to be emotionally resilient, resourceful and secure – how much would there be? Could you honestly say much of what we learn helps us to do that – to be resilient, resourceful and secure?

I came across a school recently that I want to bring to your attention. Rockingham Primary School in Corby. They run their school in quite a different way. Their focus is on the whole well being of the child. They are in a deprived area with 45% of the 250 children with some kind of special educational need. 23% of these fall into the behavioural, emotional and social needs categories.

At the time of writing this, the head Juliet Hart says, “there’s a common language that is shared across the whole staff team and we recruit people that share that philosophy. The basic

Theraplay principles of nurture, engagement, structure and challenge underpins every class and in our Ofsted inspection report our duty of care was recognised as outstanding” (taken from Adoption UK Publication).

One of the class teachers, Donna Johnson, tells how the days look, that they are well structured and revolve around activities on taking turns, getting on with each other, adapting according to the children’s needs, relieving anxieties and teaching the children it is alright to make mistakes.

As we’ve covered in previous chapters if a child feels much anxiety it is near impossible for them to learn and to be able to be creative and independent in their play. Having a holistic approach to a child’s well being means that the state they are in when approaching a task is even more important than the result of that task. In other words teaching them calming techniques, how to manage their emotions, being self-aware is just as important as the mechanics of reading and writing. As you grow up into an adult the skills needed to remain positive against adversity, to build a strong character and to make good decisions is paramount.

Not to say of course that you are not already bringing these great practices into your educational environments. But it is important to recognise just how essential it is for children who’ve experienced early trauma to know that academic achievement is not the most important achievement. Having a strong sense of security, knowing that you can make a difference in whatever you do with your life, is an amazing thing to realise.

There are constraints of course within our educational system. We’ve talked over the chapters about these children and how they need a different kind of care and support.

Some things, if we could do them would be very beneficial. For example being able to keep children in lower classes until they are ready to move up. Children who've experienced trauma are usually acting at a different age emotionally to their chronological age. Being able to go back and build those blocks of development again would be a great part of their healing process.

There are also tendencies to not want to single children out as different by keeping them back a year, or treating them differently due to their trauma. However we have to realise they are different, they will already feel different to their peers. It's like the EARLY FOUNDATIONS exercise where you see part of the lower levels of a child's wall have been missing or damaged, i.e., they may not have had consistent food, sleep may have been disturbed, love may not have been shown, stimulation and play may not have been present – once you then start to pile bricks on top to help them as they have missed so much, the foundation is not solid and they find it incredibly hard to accept.

We need to go back and help them relive and experience those essential elements of development. Some things we cannot replace of course, but finding the things you can and helping them to do that would be another key to engaging with these children.

So what can you take from this chapter? Emotional development and being able to 'cope' with life is essential for a child's development. Without these things children who do not have this at home, or didn't in the early formative years, will struggle to break the cycle and function in later life.

In order to do this you may want to look at strategies within your school that could help:

1. Research other schools such as Rockingham Primary School – there are many around, another such school is Colebourne Primary School in Birmingham, where they try and look at the whole child's needs and aim to bring in specific services where needed. You can speak to the Head Stuart Guest or the SENCO to discuss this further.
2. There are many therapies and techniques that can help children learn in schools. For some you will know about these but for others you may not. Theraplay is one as mentioned in this chapter. Peer massage is another tool that helps children in self-regulation and being able to connect with others. Music and movement therapies are also good for children who've experienced trauma as it helps them to be aware of their body, feelings and emotions. Drumming is proving to be a great experience for children and there are people providing that service.
3. Consider the overall school approach to emotional and social wellbeing. Many times the academic aspirations along with the constraints of targets make it difficult to focus on the other aspects of learning, but again consider that you may be one of the few contacts a child has with a positive adult....what can they learn from you and your approach to them? How would their future lives be different if they could learn resilience, resourcefulness and a strong sense of self and wellbeing?



Chapter 11 - Inner and outer resources



When thinking about the keys to helping children who've experienced early trauma I can't help but put in something about the resources you will need to call on. There are many times when the progress will be slow, when you feel that what you are trying to do with them is hopeless and that they may never change.

There are two types of resources you will need – those within yourself and those outside of yourself.

There is a theory called The Slight Edge – a man called Jeff Olson developed it. The general premise is that we always look for the big leaps of change, the instant result and the thing that will turn something around radically. However

many times what is needed is the baby steps, the tiny hinges on the door that will unlock something for us or for the children we work with.

When you think about the children in your care you may have the desire for them to progress 100% within a year. When you say it like that it seems impossible – to change by such a quantum leap. However, can someone change .003 % each day? That's 3/10's of a percentage each day. If you did that every day then by the end of the year you would have improved by 100%!!

So the tiny steps of progress you see each day are massive in terms of the long-term impact for these children. Every day is a

chance to move closer to that improvement whether in their emotional, intellectual or social development. Of course the 100% above does not take into account the compound effect of improving each day. The more momentum you can have on helping these children, the more potential to develop.

One of the inner resources you will need is the tenacity to not give up on these children. However small the progress may seem at times, they will be inching their way forward, with your help.

Another inner resource needed is to trust your gut. We all have that feeling sometimes – call it your gut instincts, intuition, 6th sense or whatever else you may call it. It's that feeling you get about something – it may be a feeling that a child is at risk, or that they need a different approach to others, or that you need

to go against what's expected for the sake of the child.

There are many things that can stop you acting on your gut feeling. One thing may be your own personality and tendency towards action or inaction. Some of us love to procrastinate and know what we must do but are afraid to do it. There's an amazing quote by [Marianne Williamson](#) that says it's our light that frightens us more than our dark – what if we did step out and really go for something big – what could be possible?

For those of you who love to over think there's a book called *Blink* which looks at the instant reactions we have to situations but then tend to over think and talk ourselves out of what we felt was right in the first place. Here's an extract from the book to get you thinking more about not thinking so much!



'This story is about the Emergency Room doctors at Cook County Hospital in Chicago. That's the big public hospital in Chicago, and a few years ago they changed the way they diagnosed heart attacks. They instructed their doctors to gather less information on their patients: they encouraged them to zero in on just a few critical pieces of information about patients suffering from chest pain—like blood pressure and the ECG—while ignoring everything else, like the patient's age and weight and medical history. And what happened? Cook County is now one of the best places in the United States at diagnosing chest pain.' Malcolm Gladwell.

From what you know right now of these children, what would be the few critical things you would zero in on? What is important in their lives right now? Friendships, security, learning to read or being able to express themselves? How can you get laser sharp focus on that progress for them?

So what about the outer resources? One of the main areas is around a theory called Kaizen. When used in the business sense and applied to the workplace, kaizen refers to activities that continually improve all functions, and involves all employees from the top of the business to the bottom. In our educational settings Kaizen is about continuous improvement, looking at areas that needs changing and being open to new ideas and approaches to how you work and teach.

My challenge and request, is that as those involved in education you continuously strive for more knowledge and understanding of these children, their development and how the lacks in their life have affected their development in all areas. Kaizen is a daily process, not a once a

year affair. There is so much to notice and learn each day.

Throughout this book there have been many references to resources – books, websites, theories. I would encourage you to pursue knowledge in this area, whether you have contact with many children in the 40% category of those who have experienced trauma, or that you just want to make sure you are ready and well informed for the time you do.

Of course there are many other sources of information and knowledge to help in understanding these children and finding strategies to help. Find those resources in your area that can help.

“Learning is an approach, both to knowledge and to life, that emphasises human initiative. It encompasses the acquisition and practice of new methodologies, new skills, new attitudes, and new values necessary to live in a world of change. Learning is a process of preparing to deal with new situations.” Alvin Toffler, author of *Future Shock*.

So what are the main points around resources?

1. Inner resources – do not give up. The slight edge actions you take every day for these children will have a massive long-term impact.
2. Trust your gut instincts more. When you sense something is wrong act on it – you may need to check with others BUT inaction will not help the children.
3. Outer resources – continually look to improve your knowledge. Remember Kaizen. Look at ways to change your environments and approaches that will help the children to feel safe, trust and ultimately progress in their lives.

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