

Trauma and ACE (TrACE) Informed Education, training and Employment

Children who have experienced trauma will have been exposed to harsh and repeated forms of verbal abuse from the very people who should have been their biggest supporters. Unfortunately, where the traumatic experiences in early childhood manifest as challenging behavior in school and/or in the community, negative messages can be further perpetuated (unintentionally), e.g. "everyone else managed to understand" or "why are you the only one who hasn't completed this task," "you will never get a job with an attitude like that". Within educational settings teaching staff may be unaware of the child's experience of trauma as there is no automatic assessment process associated with commencing school. This can lead to the child being sanctioned for behaviours that may be associated with the impact of early years trauma has had upon the child's neurodevelopment. Thus, what appears to be misbehaviour may actually be stress-related behaviour.

A trauma informed assessment will explore the underlying reasons for the challenging behaviour, the response it is getting from the adults supporting the child and the messages the child may internalise. An important role for the YOT practitioner maybe to raise awareness of the child's experience of trauma. A multi-agency timelining meeting¹ can be a very powerful exercise in developing empathy and creating a shared understanding of how early years trauma contributes to a child's behaviour. Developmental mapping is a useful tool for practitioners to comprehend why a child may struggle in a particular environment, as it assesses their cognitive, emotional and social age in relation to their chronological age. The YOT case manager should ensure key staff from education are invited to the multi-agency timelining meeting, as where practitioners can offer a shared trauma informed approach the outcomes for children will be improved.

Practice Example

At the point Ashton was made subject to a Referral Order he had been excluded from mainstream school. There was a catalogue of risky and challenging behaviour that had led to his exclusion with the final incident being him being found standing on the school roof during a lesson. He was subsequently referred to a Pupil Referral Unit. Ashton's behaviour appeared to escalate further in this environment, with him throwing a chair at a teacher, being accused of being rude and defiant and going off-site to smoke cannabis. The perspective of the school was that Ashton was a bright child who choose to misbehave. In the space of two months he had received a number of temporary

¹ Agencies who have worked with and know the child and their family share their collective knowledge of the child's history and background to develop a shared understanding of their needs.

exclusions and there were grave concerns that his repeated exclusions were resulting in his missing substantial amounts of education.

It was noted by the YOT that the same behaviours did not present when Ashton was in 1:1 session with his YOT case manager or when completing reparative work with his reparative worker.

A timelining exercise ascertained that Ashton's mother suffered with post-natal depression and was unable to provide him with emotionally consistent care he required in his early years. At the age of 9 months he was placed in the care of a relative where he experienced physical abuse and neglect. The developmental mapping exercise completed in the multi-agency timelining meeting helped practitioners make sense of the variations in his behaviour that presented in different environments. Whilst Ashton's cognitive functioning was assessed to be slightly below his chronological age, his social and emotional functioning was comparable to a two-year-old.

Child development theory tells us that group play doesn't usually evolve until the age of three until then, most infants and younger toddlers simply play by themselves next to each other in parallel play. This analysis helped professionals understand why Ashton struggled in a group educational setting. He couldn't navigate the complex peer dynamics, and this led to him being anxious which manifested in challenging behaviour. This led to negative reports from teachers which caused further conflict at home. Ashton was regularly reported as a missing person and committed offences within the community. It was subsequently agreed that he would receive home tuition. This increased his access to 1:1 time with tutors, more reflective of the type of support a much younger child would have, where the majority of time is spent within close adult proximity. All agencies (including tutors) offered a trauma informed approach. Ashton thrived with this type of provision, his attendance improved, there were no further problems with his behaviour, the relationship at home improved and he stopped going missing. He also went on to obtain a B Tech qualification and two GCSEs.

Wherever possible it would be preferable to keep a child within a fulltime mainstream educational environment, due to the statutory requirement for them to receive and attend an education provision and also because school can provide a safe haven for children who have experienced trauma or have chaotic homelives. Many schools now offer a trauma informed approach. Some of the basic interventions that could be considered and advocated for via the multi-agency planning process would be:

- Reducing school expectations to match the child's developmental profile
- Removing children from situations/classes they are not managing
- Allocating a key worker for the child who the child has easy access to
- Helping the child name and label feelings in conversation
- The child being able to access sensory zones/nurture groups
- Educational staff using Playfulness, Acceptance, Curiosity and Empathy (PACE) (Dan Hughes, 2021), strategies when faced with challenging behaviour
- Arranging alternative lunch and break time provision (children with trauma may struggle to manage unstructured time).

- Responding to any distressed behaviour with support rather than sanctions
- Praising and celebrating positive behaviour
- Avoiding command-based language

Sometimes children are referred into the YOT have already been excluded from mainstream education as their harm related behaviours cannot be managed within mainstream provision. An exclusion from mainstream education may be perceived as a further rejection for the child which perpetuates negative narratives the child will have internalised. Sometimes these children will benefit from developmentally sequenced interventions that seeks to improve self-worth and their capacity to engage with education or training. Such interventions will sometimes run alongside alternative educational provisions or can precede referrals into their choice of education, training or employment.

Interventions could include:

Future Thinking

Children who have experienced trauma will have put all their energy into surviving day by day. Professionals can assist children wherever possible to think about their futures, e.g. reflecting with them on what their futures could look like/hopes/goals/wishes dreams. This will be new territory for children, and they will require encouragement and support. Goals/hope/targets identified by the child may be unrealistic, professionals should travel alongside rather than trying to replace or advise on the unrealistic nature of the goals. Goals and hopes will naturally become more realistic as the child reaches the next developmental stage.

Community Reparation

Community reparative work delivered via a trusted adult that deliberately identifies the child's strengths may be appropriate as it helps to offer structure, promote a positive internal working model and for the child to see their value in the community/the worth they have to others. Such activities provide opportunities to build on a child's self-worth, e.g. by identifying a reparative activity you know the child will be good at and creating opportunities for mastery

Opportunities for Mastery

Practitioners should give children tasks at the right developmental level; more difficult tasks can be given when they are being supported directly by the practitioner. Practitioners should also identify opportunities for the child to do tasks/activities they will be good at or highlight an area where they have made a mistake or where they are less skilled and allow the child to teach them something. Facilitate tasks/activities so that anxieties are reduced.

Sharing Positives

Practitioners should consider how to share the child's identified positive attributes with them. This can be achieved by finding ways to notice, celebrate and praise the child's positive skills, qualities, talents and attributes, e.g. telling the child, reward/thank you letters, certificates, session journals, panel reports, review meetings, conversations about them to others (within earshot), treats. It's useful to praise the effort used or the way the child accomplished the task rather than the outcome itself.

Role Modelling

Rehearsing responses to situations that may trigger their emotional dysregulation in a playful way. Rehearse repeatedly with a more positive outcome. Cartoon strip drawings can be appropriate. Ask the child tp pick a different way they could have responded to a situation or use third party stories (from the television, peers?). Make videos or create real opportunities for them to watch the task or peers successfully engaging in the task.

Creating a more positive narrative

The practitioner can ask the child to create a vision of themselves maybe five or ten years in the future and then explore what needs to happen to achieve that vision. One way to do that is to ask a child to imagine someone has taken a photograph of them at that point in time and ask them to describe it – where are they? Who are they with? What are they wearing? How are they feeling? They could draw or paint this vision as well.

Practice Example

Sehan was referred to the YOT at the age of 17 for a possession with intent to supply offence. His assessment indicated that he had moved from another country at the age of three with his family who were seeking asylum. Sehan could not recall this significant event but the trauma informed lens allowed the YOT to consider the likely have impact upon his parents capacity to provide consistent emotional support during a crucial time in his development; living in fear in fear and having to move to a new country with no finances, understanding of the systems or the language.

Sehan presented with low level disruptive behaviours at school. The school were unaware of his early years experiences and responded to the behaviour with commands, demands and punishments which escalated his behaviours further. His father had high educational expectations for Sehan and when negative reports came home, he was angry, disappointed and their relationship broke down. Sehan reported to the school his father had assaulted him. This was investigated but not substantiated. Following this point his father stopped speaking to him although they both continued to live at the family home. At the age of 14 Sehan was excluded from his secondary school as his behaviour was disruptive to other pupils and his mother enrolled him in another school. Sehan was extremely unhappy at his new school and resentful that his mother had not challenged his exclusion. In hindsight, Sehan's mother explained that she did not understand the systems, or the language being used and therefore went along with what she was told by professionals. It subsequently transpired that Sehan was illegally excluded from his former school resulting in him having to return to it. Sehan then began to truant as he felt the teachers did not want him there and sought belonging from gang members. This led to his referral to the YOT, three years later for possession of drugs with intent to supply, although it later transpired, he had been a victim of modern slavery/human trafficking and he was acquitted of the offence. Sehan had been vulnerable to exploitation due to his basic needs not having been met elsewhere; the need for connection and attachment. Gang culture then became attractive as it provided a sense of belonging, self-esteem, protection and financial gain.

Sehan was not in education and training and had been earning money through drug dealing for gang members who were exploiting him. It was clear this was not a path he felt he had chosen but he could not see any realistic alternative. During the assessment he stated, "if there was a way out I would have taken it a long time ago".

The intervention for Sehan focused 1:1 time with trusted adults. He required continued, consistent support from trusted attachment figures to begin to believe the world around him was safe enough, so that he could make sense of his own experience, and that he was valued and worthy. The trauma informed approach sought to change his beliefs by addition (e.g. providing 1:1 time with trusted adults) rather than subtraction (telling him not to associate with traffickers).

Once a relationship had been established, his case manager was able to introduce Sehan to the YOT's education, training and employment (ETE) worker. The aim was to allow him to become familiar with the worker, to show him that some (more than one) adult could be trusted, would listen to him, validate his feelings and recognise his value. The ETE worker would have informal chats with Sehan aimed at encouraging long term thinking but without any pressure to access a training provision, which would likely have set him up to fail. The aim was to replace the negative scripts he had internalised from his exclusion from mainstream education and experience of the criminal justice system

At the start of the intervention the narrative Sehan had learned through his legitimate attempts to fit in with the world were as follows:

- It's my fault
- I am naughty
- I am not worthy
- I need to be punished
- I do not belong
- Adults won't believe me
- My family is ashamed of me

So Sehan seeks belonging with an anti-social peer group (gang members), he witnesses violence acts between gang members and learns:

- These adults pose a risk to me
- They are dangerous
- The world is not safe but
- I have no legitimate alternative

Sehan is missing from school, subject to exploitation and frequently stopped and searched by the Police, which seeks to confirms what he believes, that he is bad/naughty and it is his fault:

- All adults (including those in authority) are now deemed untrustworthy or unsafe
- The world is a dangerous place

At the end of the intervention Sehan's narrative had potentially altered t:;

- Some adults can be trusted
- Some adults will help me
- It wasn't' all my fault
- If I was in crisis some adults might help me

Sehan had commenced in any training provision at the end of the intervention. The intervention may not seem significant, but until his perception of others and the word around him was altered any attempts to engage him in ETE would likely continue to fail. At the end of the YOT intervention Sehan agreed to work with a voluntary agency who were able to provide longer term support aimed at assisting him to prepare for employment.

References

Hughes, D(2021). DDP Network What I meant by PACE, retrieved on 14th February 2021 from <<u>What is meant by PACE? - DDP Network</u>>