

Supporting adopted and permanently placed children in school



Milestones, key facts and guidance



Introduction

This booklet aims to provide parents with a brief guide to the education of their child; the milestones, some key facts about the curriculum and the support that is available to help your child achieve their full potential.

Current research and increased government/ Department for Education (DfE) focus, highlights the poor attainment of adopted children compared to that of their peers. In 2013 the DfE introduced the pupil premium funding plus for adopted children to try to financially address some of the inequalities caused by early life trauma and the impact that has on a child's ability to manage and achieve at school. Whilst schools can use this funding to narrow the gap of attainment it is important that it is also used to narrow the wider gap around social and emotional issues.

Early childhood experiences shape a child's ability to learn and form relationships with peers and adults. All children who have been adopted have, on some level experienced loss; loss of their birth family, foster carers, previous school friends and extended family; some have experienced abuse, neglect and inconsistency that can make it difficult for them to view adults as people they can trust; they may experience the world as a dangerous place.

Children and young people who have experienced trauma and loss in their early years may display behaviours that are challenging and which can feel overwhelming for the adults who are trying to support them. This can be particularly true for staff in schools, who may struggle to respond empathetically without appropriate training.

The widely-held belief that once adopted, children will thrive and overcome their early life trauma can be unhelpful for both parents and children. Whilst loving and stable families can mitigate the effects of early childhood trauma; loss and grief can have a lasting legacy on a child's capacity to manage anxiety and effectively engage in learning.

It is important to emphasize that not all adopted children will experience problems at school and that many schools provide support that is well beyond what is expected.

I hope you find the booklet a useful source of information and that your child achieves their fullest potential within education.



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Working together to deliver Aspire Adoption Services



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The following is a brief synopsis of attachment theory and its significance; for suggested further reading please see Notes.

Attachment and the importance of relationships

To understand some of the behaviours displayed by children who have experienced loss and trauma, it is essential to develop a knowledge of Attachment theory (Bowlby, 1951).

Bowlby's evolutionary theory of attachment suggests that babies come into the world biologically pre-programmed to form attachment with others. He maintained that babies are predisposed to seek closeness to their parents in times of need, for shelter, warmth and protection and that this attachment had a survival value. Where children develop this attuned relationship with a parent, this then acts as a 'secure base' from which the child can explore the world, safe in the knowledge that their needs will be met and that they are loved and wanted. The attachment figure is attuned to the child and helps the growing infant to make sense of their emotions and of the world around them. In turn, this secure attachment allows children to respond positively to other children, have good social skills, a positive sense of self and resilience to cope with life's setbacks and disappointments.

Children who have not experienced the consistent care of an attuned parent in their early years may experience difficulties later in life. For these children, the everyday interaction with school and home can be difficult, and they may act out these difficulties in a variety of ways.

Everyday, the adopted child with attachment needs may be dealing with thoughts and feelings of:

- Loss
- Control
- Rage
- Rejection or abandonment
- Helplessness
- Identity
- Pleasing others

In the past decade, new technology has made it possible to explore the impact of relationship on the growing brain. Neuroscience has provided evidence on how the social and emotional brain is shaped during the first three years. We now have a greater understanding of how the in-utero experiences can impact on brain development and how alcohol, drugs, tobacco and domestic violence can be risk factors for the health of the developing child.

Bowlby, J. (1951). Maternal Care and Mental Health. Geneva: World Health Organisation.



How a child might feel and behave

Every behaviour is a communication.

A child who has experienced inconsistency, neglect or loss of their main caregiver may suffer acute physical and emotional distress that is sometimes termed 'traumatic injury'. This distress may cause a child to behave differently to other children.

Developmental trauma or attachment difficulties can impact on all aspects of development; Physical, Physiological, Emotional, Social and Cognitive.

Some children may be overly compliant or complicit, terrified of further rejection desperate to please, whoever this may be; others may demonstrate chaotic behaviours that are representative of their own similarly chaotic feelings.

Some children may be anxious in new situations or at times of change and can react badly to unplanned or unscheduled events. Some young people who have not been in control of their past may try to control their current world with behaviours that are manipulative or dishonest.

For children who have experienced severe neglect or abuse, behaviours may include defiance, aggression, lying, stealing and lack of empathy.

Please see table in Notes for some examples of how children's attachment difficulties may be displayed, what are triggers for this type of behaviour and what responses may be helpful.

Adopted children living in trauma survival mode

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Research suggests that around three quarters of all adopted children suffered neglect or abuse before living with their forever families. This means that adopted children will often have a brain that is wired for 'survival' and their survival strategies will be much more highly developed, in preference to normal development.

This is why children who are adopted often have disrupted development, and/or areas of poor development. For example, adopted children may struggle with peer relations and social situations, as they have had to learn to fight to survive; good social skills are just not an adaptive priority in times of threat.

For these children, their survival instinct is so strong that this 'mode' will often override other emotions. Thus, staying calm or thinking clearly is not easily achieved by adopted children without adult support. Children in survival mode are unlikely to have a conscious understanding of their behaviour in these situations. However, adults can spot when they are in survival mode as they will not be functioning in line with their chronological age. For example, the adopted child may act as if they are much younger (e.g. throwing a tantrum or wanting an adult to do something for them they are able to do) or act as if they are more mature than their age (e.g. rejecting adult assistance). Being in survival mode can last for long periods of time or may be ever present for some adopted children.

Children who have suffered these early traumas will need adults around them to support and teach them how to manage their overwhelming feelings, grounding skills is a way to help the child return to the present moment, rather than being stuck in perpetual survival mode.

Helping children in survival mode cope at school

There are four main survival modes – each will have a particular function and there are specific grounding skills adults can use to support the young person. These skills take time to develop, so it is important for them to be practiced regularly by the child with the adult's guidance.

Grounding skills involve using all the senses to bring the child back in to the moment, rather than being caught up in memories of traumatic experiences. These skills are often used with trauma victims to help them to manage distress. They apply equally to children who have had difficult early experiences; although the children may not have words for their trauma they will have embodied memories that will cause them distress.

Child in FREEZE mode

What might be happening to the child?

The child's brain is slowing down due to anxiety. They may be shutting down and may be thinking of something safe for them (such as thinking about a repetitive game they like to play). They will feel they are under attack. The child is likely to feel disconnected or numb and will not move. The child will seek safety through 'freezing'. The child will expect catastrophic actions from adults around them.

How might the child look and what things might they be doing?

In this mode the child might look like they're not engaged with their work or bored. They may also be confused or not listen to instructions. They could look like they are being defiant by refusing to follow instructions. They might struggle to get work done and may seem to be just staring in to the distance.

What might trigger the freeze mode?

School demands, shouting at the child, anger or aggression aimed at the child and loud noises.

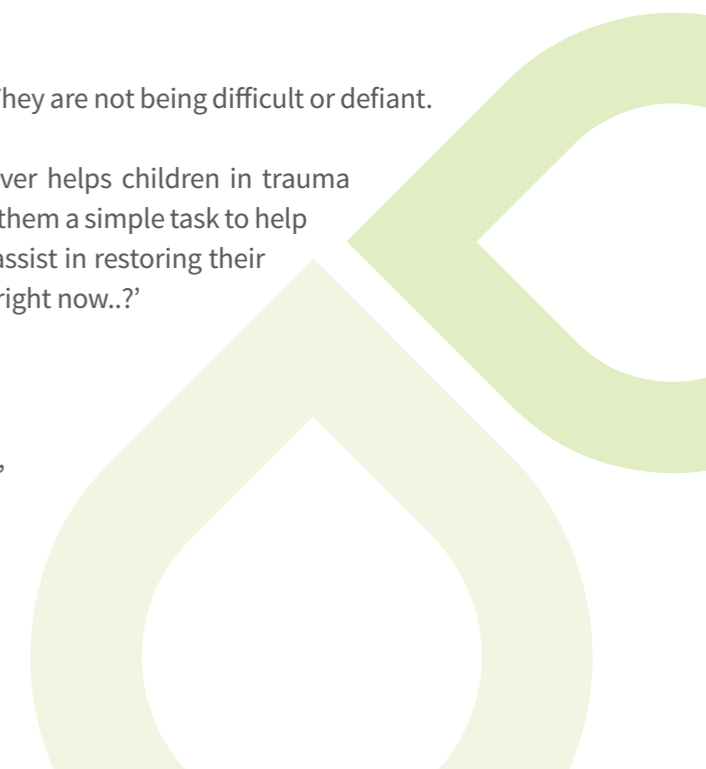
What can you do to help?

Remember the child is acting in this way because of their trauma. They are not being difficult or defiant.

Do not use time out or exclusion with adopted children, this never helps children in trauma survival mode. Use time-in by bringing the child closer to you. Give them a simple task to help you, this will not only bring them back into this moment but will assist in restoring their self-esteem. Gently ask 'I wonder where you've gone in your mind right now..?'

Remind the child they are safe and cared for.

Exercises that can help are: breathing deeply, spinning or climbing, cycling, gardening, jumping, carrying things, soft toys, warmth (e.g. a blanket, a warm drink, a hug).





Child in FLIGHT mode

What might be happening to the child?

Anxiety is stopping the child from being able to think or rationalise. They are following their instinct to escape or run from danger that they experience internally. They may be showing signs of panic, fast breathing, heart pounding. They may express worries about what is going to happen next.

How might the child look what things might they be doing?

They may be running away or be constantly on the go. They may not be able to function well during unstructured times. They may need to be first and may push others out of the way. They may engage in using strange sounds, voices, baby talk or use silly talk. They may come across as being hyperactive, impulsive or may not pay attention to tasks. They may hide under tables or in cupboards. The child might look hyper vigilant or jumpy, tense. The child may be physically sick (vomiting or complain of stomach aches, head aches etc).

What might trigger the flight mode?

School demands that the child feels unable to fulfil. Feeling overwhelmed by tasks or expectations. Social demands being made of the child (such as parties and group games/activities).

What can you do to help?

Find the child if they're hiding and then help them to focus on a simple or familiar task – break down tasks in to smaller sections and encourage them gently to complete this. Praise them in a simple way (e.g. thumbs up) for what they achieve even if they don't complete the whole task.

Make things very predictable by using schedules or calendars.

Remember the child is acting in this way because of their trauma. They do not want to get away from you, just the scary emotions they are feeling.

Do not use time out or exclusion with adopted children, this never helps children in trauma survival mode. Use time in, bring the child closer to you. Give them a simple task to help you, this will not only bring them back in to this moment but will assist in restoring their self esteem.

Gently ask 'I wonder why..?' Remind the child they are safe and cared for.

Tell the child they are safe and provide them with a safe space to go to when they feel overwhelmed

Exercises that can help are: deep breathing, gardening, carrying things, soft toys, warmth (a blanket, a drink, a hug), and a tug of war.

Child in FIGHT mode

What might be happening to the child?

The child is terrified and unable to express this in any other way. The child's brain is in full survival mode fighting perceived danger. They will be unable to think clearly during this time and any conversation should be kept to the minimum. The child's functioning will reduce significantly during this time so they will not be able to hear or see well and will not remember any instructions or requests.

Keep the child safe from themselves and other but resist any exclusion as this is likely to make matters worse. The child is feeling very lonely at this time. Endings or transitions can be triggers.

How might the child look or what things might they be doing?

Angry, aggressive, hot, controlling, lying, shouting, pushing people away, demanding, inflexible.

What might trigger or make fight worse?

Being shouted at or displaying anger and aggression at the child. Raised voices. Physical restraint. Loud noises.

What can you do to help?

Recognise the anger is not aimed at you. The child is not able to be angry with the people they want to be angry with (who made them angry in the first place – birth parents etc?).

The child is often 'saying' 'I'm going to push you away before you reject me; I hate myself and know I am unlovable so I just want to get you to show me you hate me too; I wasn't good enough for my parents to love me so I am sure you will also hate me, eventually.

Understand that the function of this anger is sometimes to enable me to control my environment, make things predictable.

Keep the child close to you while engaged in tasks that make them feel special. This 'time in' is a way to monitor and support the child rather than 'time out' or exclusion which reinforces the child's belief that they are rejected and not lovable.

Make things predictable for the child.

Connect before you correct (try to understand the child's point of view and remember this behaviour is as a result of their trauma) then correct in a kind and forgiving way.

Make sure any consequences are 'logical' or 'natural'. This means there is a direct link to the misdemeanour of the child. For example, a child throwing a games console which then breaks, results in the natural/logical consequence of not being able to play his game as his console is broken.

Exercises that can help are: Hanging, swinging, climbing, chewing, warmth (drink, hugs, soft toys), breathing.

Child in FLOP mode

What might be happening to the child?

Children in FLOP (submit) mode are not able to think clearly and will not be able to follow instructions well. They will seem tired or sad and lonely.

How might the child look or what things might they be doing?

The child in this mode will seem socially isolated or withdrawn. They may be very compliant or passive in their responses to adults and children. They may have a neutral expression and seem resigned to everything in their lives. They may be slow, quiet, tearful or sleepy or may appear to be low in mood.

What might trigger or make flop worse?

Loud or busy environments and demands being made on the child may make flop worse. The child is likely to be feeling they are useless or unloveable.

What can you do to help?

- Allow the child to spend time with a trusted adult whenever needed.
- Reassure the child they are here and they are safe.
- Engage them in repetitive but enjoyable tasks and give praise (not too much as this can be overwhelming for the child).
- Give the child your time, share some tasks and ask them to help you. Offer warmth (drinks, a blanket).
- Exercises that can help are: deep breathing, wrapping up, swinging, cuddling.



Preparation for school

How a child manages school will depend very much on the experiences they have had and the support they receive from you at home. If your child has experienced secure attachments, has learnt to play, share and communicate then starting at preschool should be both enjoyable and constructive. Where children have not had positive early experiences, preschool or nursery may be difficult and frightening and may need careful planning and support to ensure success.

Choosing a preschool can be difficult but consideration must be given to sourcing the highest quality provision; trying not to let distance or logistics be the deciding factors. A list of preschools with their current Ofsted rating can be sourced on line or through the Family Information Service.

Pre-school

Children usually start preschool at the age of 2.5 years however that does not mean that every child will be ready for preschool at this age. Readiness for preschool is more important than chronological age and may be particularly important for children who are adopted, who may be developmentally behind their peers. Preschools follow the Early Years Foundation Stage and the child's attainment is measured in age related expectation.

Children who have been recently adopted may be highly anxious about being left at preschool and may take a longer time to settle as they may fear being abandoned or rejected. Parents need to be honest and transparent around their child's needs, and confidentially provide relevant background information to preschool staff.

Key Person

Each child must have assigned a key person. Their role is to help ensure that every child's care is tailored to meet their individual needs (in accordance with paragraph 1.10, EYFS), to help the child become familiar with the setting and to build a positive relationship with their parents.

Paragraph 1.10 states

Each child must be assigned a key person. Providers must inform parents and /or carers of the name of the key person, and explain their role, when a child starts attending a setting. The key person must help ensure that every child's learning and care is tailored to meet their individual needs. The key person must seek to engage and support parents and/or carers in guiding their child's development at home. They should also help families engage the more specialist support if appropriate.

https://www.foundationyears.org.uk/files/2017/03/EYFS_STATUTORY_FRAMEWORK_2017.pdf

<https://www.foundationyears.org.uk/files/2012/03/Development-Matters-FINAL-PRINT-AMENDED.pdf>

Points to consider

- Consider developmental readiness over chronological age/delay starting if your child is not ready
- Visit the early years setting often with your child prior to starting
- Be prepared to stay with your child as part of a settling in policy
- Make sure your child understands that you will be coming back
- Use a small object/ toy as a transitional object to help them with separation
- Make sure the child care workers understand your child’s needs
- Discuss with staff how they manage challenging behaviour
- Sometimes the outward signs of early life trauma such as emotional outbursts, kicking, biting, spitting can be misinterpreted and preschools may need some help in understanding that these are not due to poor behaviour but symptomatic of a greater underlying need
- Ensure that the keyworker for your child understands the need for empathy and attunement

The Move to Primary School

The move to primary school can feel like a huge leap for children who have not acquired the skills necessary to cope with this transition. For any child, changing school can be difficult, for children who have attachment difficulties, change can be very unsettling with the potential for children to become anxious, disruptive, regress in terms of language and conduct, tearful and worried. To ensure that the transition is as smooth as possible there needs to be considerable planning, and although the preschool will probably arrange visits to the primary school, adopted children may need to visit many times.

If your child has a specific diagnosis, ie ADHD, autism, foetal alcohol syndrome, please discuss this with the school and in particular with the SENCo, (the special education needs coordinator), to ensure the school have all the information they need to support your child.

Points to consider

- Visit the school with your child so that you are familiar with the new setting and staff
- Have a photo of the key staff, new school and playground so you can talk about them at home
- Make the school aware if your child has any specific needs
- Ensure as a parent that you have a good line of communication to your child’s key person/teacher
- Tell the school your child is adopted so they can claim the pupil premium funding (this is not mandatory but at parent’s discretion)

- Ensure your child knows where he/she needs to go/where the toilets are etc.
- Ensure your child can manage his new uniform/coat/buttons/shoes etc.
- Remember your child may get very tired starting in Reception
- Make sure your child understands that you will be coming back
- Use a small object/toy as a transitional object to help them with separation

Moving on

‘Successful transition relies on a high degree of continuity and consistency in approach’
Key Elements of Effective Transition, (NFER,2005)

For some children, the transition from Reception to Year 1 can be challenging. The curriculum changes from the Early Years foundation stage (nursery to reception) to Key Stage 1, where learning becomes more formalised and structured. In Year 2 children sit national tests and for many children this can cause pressure and anxiety.

Year	Age	
Reception	4-5	
Year 1	5-6	Key Stage 1
Year 2	6-7	Key stage 2
Year 3	7-8	* Please note in some areas of England first and middle schools replace primary schools. First school are for children 5-9, with middle schools from 9 to 13.
Year 4	8-9	
Year 5	9-10	
Year 6	10-11	

Generally, children who are adopted do well in primary schools. Unlike their secondary counterparts, primary schools are smaller, feel safer and more contained; staff usually know the children and parents well and there are less demands placed on children to be organised and independent.

If your child is not doing well at school and you are concerned it is critically important that you speak to the school about this. If you feel that the school are not taking your concerns seriously it may be helpful to seek help or discuss this with other professionals. Referrals can be made to the Post Adoption Support teams or to the Virtual School for Children in Care, who will have a member of their team who can help.



Special Education Needs and Disabilities (SEND) and Education, Health & Care Plans (EHCP)

An Education, Health & Care Plan is for children and young people up to 25 years of age who need more support than is available through special educational needs support within mainstream schools and colleges. EHC plans identify educational, health and social care needs and set out the additional support required to meet those needs.

Below is a snapshot of the process for children where an Education, Health Care Plan (EHCP) is being considered:

- Child is identified as having SEN / social emotional mental health (SEMH), Cognition and Learning, Sensory & Physical/ Communication and Interaction. Initially this will be identified by schools (and parents), or there may have been involvement by another professional (e.g. Education Psychologist (EP), Community Paediatrician, Speech and Language Therapist (SALT))
- Child accesses mainstream School and receives additional adult time or resources according to level of need.
- School will evaluate the child's progress as part of the plan-do-review process, this may be longer than a year or less than a term depending on the severity and/ complexity of the child's needs. If despite targeted interventions the child is not making expected progress the school SENCo will consider first whether the advice of other professionals is required (e.g. EP, Behaviour Support - BSS, Specialist Education Needs Support Service - SENSS)



- The advice of the professional will then be acted on so that school puts in place the strategies and support suggested. The impact of this will then be reviewed by school / parents. If the child is making progress only with a high level of additional school support, the SENCO will consider whether their needs meet the criteria for an EHCP.
- The SENCO then collates the information from professionals, school, parents/carers and the child and record this on the EHCP request paperwork which is then be submitted to the SEN Team at Dorset County Council.
- The EHCP request is then discussed at SEN panel (within 6 weeks of receipt) and if the consensus by the panel of professionals (SENCOs, EPs, SEN Team) is that the needs assessment is required then all relevant professionals involved are contacted and asked to contribute advice within 6 weeks. The draft Education Health Care Plan will be granted within 14 weeks and then a final panel meeting determines whether the plan is made statutory (legal).
- From submission of the initial request to an EHCP being completed takes 20 weeks.

Social and Emotional Needs

For many children adopted from care the ability to make and maintain friendships is difficult. Their own poor sense of worth, their misunderstanding of social cues and the nuances of interactions can make the challenges of relationships almost impossible often resulting in children feeling they have few friends and socially isolated.

Schools can help children with this by providing peer mentoring schemes, buddy schemes, social skills programmes and ELSA support. Having an identified adult, a key worker or tutor that the child can talk to or somewhere they can go when they feel lost or lonely can also help.



Which School?

When choosing a secondary school for your child it is very important to gain some understanding of how that school will best support your child.

Secondary education is very different to primary; there is an expectation that children will be more focused, self-reliant and organised and the very nature of how the curriculum is taught, with subject specific teachers and children moving around the school and corridors can be challenging for some children. The pressure in Year 10/11 of the curriculum can also be difficult for those children who may be behind their peers academically and struggle to manage homework, exams and complex peer relationships.

Points to consider

- Does the school have a good record of supporting looked after children?
- Do they have a strong pastoral support team?
- Has the school had whole school attachment training?
- Is the school very academic- will this suit you child?
- What is the school's behaviour policy?
- Do they have a trained ELSA (emotional literary support) teaching assistant that your child could access if required?
- Ask to meet the designated teacher for children in care/ adopted children

To help gain an understanding of which school may be suitable talk to other parents and staff from the Virtual school for children in care. Look at the current Ofsted rating and read the report on line. Arrange to have a tour of the school and ask to meet the SENCo or designated teacher to discuss the specific needs of your child; ask them how they will manage this and what support they will be able to put in place from the start.

** It is important to remember that however excited your child may be about moving school, transitions, for children who have experienced a disrupted attachment can be very difficult. Transitions may trigger a sense of loss or bewilderment that will need careful management.*

Different types of secondary schools

Schools in the UK are roughly divided into those that are funded by the government and those that charge fees, i.e. independent schools.

Comprehensive school are those where all local children can attend, they follow the national curriculum and are non-selective.

Academies and free schools are paid for by the government but have a greater freedom over the timetable, the curriculum and the students they take in.

Grammar schools are paid for by the government and take children from the age of 11. They are selective in that only children who pass the 11 plus exam can attend.

Faith schools are those that focus on a religion, they generally follow the national curriculum but have a greater flexibility on what is taught.

Studio schools are small schools that have a longer working day 9-5, and offer a range of academic studies and vocational skills for children aged 14-19. They are part of the academies programme, are non-selective and free to attend. Studio schools are distinct in that they are usually sponsored by another school or college.

Learning Centres or alternative provisions, are small settings for children who cannot manage mainstream education. It may be that they have been excluded from their school or have a medical reason to attend. Children can only attend learning centres as part of a referral process which is undertaken by the local authority and school.

Independent or private schools and those that require parents to pay for their child's education. They usually have smaller class sizes, a higher teacher to pupil ratio and may have an extended day to include sport or homework.

Special schools are for children who have an education and health care plan (EHC). They offer bespoke packages of education for children with an identified need/s. The fees for these schools are paid for by the local authority via the EHC plan, which is coordinated by the SEN department.

It is a legal requirement that all children attend education unless there is a valid reason for them not to. If children do not attend school and are absent for any length of time, the local authority can start proceedings to prosecute parents.

Parents can choose to home educate their children but they must let the local authority know; they will need to provide evidence of educational provision to support this plan of action.

Admissions

At each stage of schooling parents need to apply to the next school for a place. The current school or nursery will help with this; this information is also available on the internet.

Where adopted or permanently placed children are moving to a new area or there is a managed move to a new or different school, they are eligible, as post looked after children, to a higher priority of admission should the school be full. The Virtual School for Children in Care will be able to help you with this if needed.

Pupil premium funding

In 2013, the Government introduced pupil premium for adopted children in recognition of the damage and pervasive nature that early loss and trauma can have on children's school lives. The funding does not need to specifically focus on attainment but can be used to address the wider context of social and emotional needs.

To claim the funding, parents of children who are adopted need to self-ascribe, i.e. they will need to show school a copy of the adoption order and for those with special guardianship children, a copy of the court order, so this information can be identified on the school census. This triggers funding from the Department for Education and comes directly into the school's budget. Parents do not have to disclose their child is adopted if they do not wish but the funding cannot then be claimed. All pupils from reception through to Year 11 are eligible for the funding apart from children attending private or independent schools.

It is important to understand that the funding is not a ring-fenced sum like pupil premium for children in care and can therefore be spent discretionally by the school. However, it is hoped that parents and school will meet to discuss how some of the funding is spent, with the child's needs placed at the centre of the decision making.

Schools may put some of the pupil premium in a pot to fund joint activities where adopted children may be beneficiaries or it may be able to help children who join school at a time of the year when they are unable to claim.

Examples of good uses of pupil premium funding could include:

- *Nurture groups *breakfast clubs * gardening clubs * ELSA sessions * social skills groups.
- *One to one tuition for subjects where the child is struggling or has identified gaps.
- *Building capacity within schools by training staff.

Notes

The following pages provide useful guidance and advice for you to discuss when meeting school staff.

Helpful hints for creating strong school/home partnerships and promoting good attachment relationships.

The brain has the capacity to re-organise itself based on nurturing experiences that are repetitive, during a time of protected stability. Every relationship has the power to confirm or challenge everything that has gone on before.

Good communication links between school and home are essential. This ensures that there is consistency of practice and allows for the sharing of information. Positive home/school links are also useful for the child and can prevent confusion and the opportunity to play one off against the other.

- Arrange for an identified adult to meet the child when they first arrive at school in the morning and ideally before leaving at home time. This person can act as an advocate for the child and someone they can go to if they need reassurance. The adult could give the child a small token for them to look after during the day, thereby reassuring the child they will see them later to return it.
- Arrange regular progress meeting where targets are set for progress, behaviour etc. Targets should be small, achievable, measurable and commensurate with the child's needs. Communicate achievements between school and home, however small they may be.
- Where praise is given, try to make sure this is discreet and sensitive to the child's needs. Sometimes a smile or thumbs up may be all they can cope with; public praise may risk the young person feeling overwhelmed or unworthy and can trigger negative responses such as destroying work or eliciting unwanted behaviours.
- Remember that children who have attachment issues may appear immature compared to their peers; their emotional age may not match their chronological age. Providing opportunities to engage in childhood activities, such as playing with sand, dressing up, finger and feet painting can be therapeutic and help children to fill in the gaps in their learning. Children could be encouraged to 'help out' with younger children thereby providing an important opportunity for them to engage in activities that they may have missed out on.

- Keep separate the management of behaviours at school and home; it may further contribute to a child's feelings of poor self-worth and low self-esteem if they receive sanctions at school for inappropriate behaviours and then again at home
- Adults around the child may need to help children learn how to recognise their feelings, e.g.; 'I wonder if you are feeling cross because there is wet play today'. This can help children understand how they feel and start to recognise the triggers for their behaviour.
- Where there are outbursts of emotion or behaviour take time to listen to the child and validate their feelings. What might seem of little significance to us as adults may not to them.
- Practise the behaviour that is expected by using role play. This can offer an opportunity for children to learn the correct responses and how to manage themselves in certain situations.
- Ensure that any changes in class teacher, support cover, timetable, move to a new or different class room or school etc. are planned well ahead of time. Explain clearly to the child what is going to happen and who will be there that they know; sometimes writing this down for the child can help by giving them something to refer to, and remind them. Children who have attachment issues often find processing information difficult so may readily forget things that you have told them; providing visual or written cues can provide an important framework for successful transitions.
- Use the school link/homework diary as a regular means of communication. Try to include positive comments and where there have been difficulties around homework make sure the child is aware that you will be writing this down; discuss with them how any problems could be turned to a positive next time and how this would happen. Try to avoid turning the completion of homework into a war zone; control struggles, where children refuse to comply, can often lead to parenting battles that are difficult to resolve; homework should be clearly set and achievable.
- Use positive behavioural management approaches; avoid threats of exclusion or removal as they have the potential to trigger the child sense of worthlessness and shame. Alternatively use 'time in' as opposed to 'time out'; where the child must be removed, aim for this to be done as sensitively as possible. Have a pre-established routine of what will happen and where that child will go, i.e. Let's go to see Mrs Smith in Year 2.

The Curriculum

The curriculum has the potential to act as a trigger for many children adopted from care. It may be important for teachers to consider the following and discuss any concerns with the child’s parents or guardian.

Personal biographies/family histories

Children may be unsure of their family history or do not have the full picture, they may also have been encouraged not to talk about their past; asking them to write about their earliest memory may cause confusion and distress.

Similarly, children may also not have access to baby or childhood photos, so asking them to bring these into school may be difficult and embarrassing.

Sex/PSHE Education

If a child has suffered early sexual abuse, then he/ she may have an inappropriate awareness or knowledge; subjects discussed within the curriculum may trigger unwanted memories which may cause the child to become distressed. Topics discussed in PSHE such as drug or alcohol abuse may act as painful reminders for some children as to the reasons why they were brought into care.

PE/Games/Sport

A child who has been abused may be uncomfortable when required to remove clothing.

Celebration dates

Significant times of the year may be particularly difficult for children who have been adopted. Christmas, Mother’s Day, Father’s Day or their own birthday, may all carry a greater significance than for other children.

Religious education

Issues of race, culture, ethnicity and religion may be difficult for some adopted children; sensitivity and discretion should be adhered to when these topics are discussed or studied in the curriculum.

Literature text

Text that covers issues of loss, abandonment, loneliness or death may all carry a greater poignancy for adopted children. Discussing forthcoming books, videos or visiting guest speakers between school and home may help prevent unwanted triggers.

Whilst this is not an exhaustive list, it highlights the need for teachers to be aware that for many adopted children the curriculum can present challenges.

Attachment Behaviours

Attachment type	Behaviour	What this means for the child
INDICATORS OF ATTACHMENT DIFFICULTIES GENERALLY	Unable to accept praise or to have fun	I am not worthy of praise and you are stupid if you don’t realise how bad I am. I am unlovable.
	Physically or verbally abusive	I respond to frightening or threatening situations by fighting, fleeing or freezing.
	Ignores instructions	I have too much anxiety to be able to listen. I can only retain one instruction at a time as too much going round in my head. I am easily distracted.
	Sulkiness, avoids eye contact	I don’t dare see what others think. I have no words to describe my feelings – looking sulky is a cover up.
	In trouble at break times	I fear rejection by my peers. I panic in crowds. I cannot self-regulate when stressed.
	Lying or living in fantasy	I prefer to make things up how I would like them to be. I am not sure who I am or what the truth is. I don’t know the difference between fantasy and reality.
	Stealing	I have no expectations of getting something so I’ll just take it. I have no idea you may feel hurt or anger and when I see the effect I have I feel powerful.
	Behaviour suddenly deteriorates	There is a painful anniversary coming up. A new sibling has arrived. I have got contact with birth family coming up/have just come from contact with birth family.

and what might you do?

Possible triggers	What might you do?
	Do praise but don’t be too effusive and be specific about what you are praising. Privately may be more acceptable to the child.
	Avoid threat of removal or rejection. Time in not ‘time out’. If unavoidable, do so positively ‘I need to get on with the class – you come and sit here till you feel better’. Speculate aloud what it might have happened (don’t ask child to explain).
	Keep format same each day. Describe the plan of activities for session at outset. Do the child’s remembering for him/her! Let the child make lists on Post-Its.
Face to face contact. Being told ‘look at me when I’m talking to you’.	Find ways to reassure – smile, thumbs up. Encourage playing games to make children laugh. Sit side by side.
Unstructured time	Reduce time in playground, introduce tighter structure and supervision, create inside ‘retreat’, establish nurture group.
	Avoid accusing child of lying or fantasising. State the truth of the matter briefly and simply.
Rejection by peers	Do not insist on ‘sorry’. Suggest an action that might repair damaged relationships. Try not to leave desirable things lying around!
Special occasions like Christmas, birthdays or Mother’s Day. Before and after weekends.	Be sensitive in curriculum delivery. Allow child time and space to manage feelings away from the classroom.

What behaviours can result from attachment needs

Attachment type	Behaviour	What this means for the child
Avoidant (I'm okay, you're not okay)	Withdrawn. Unable to make friends. Bullies other vulnerable children	I have to rely on myself and nobody else. I respond to frightening situations by fleeing. I don't expect other people to like me. I pretend to be strong by making other children do what I want.
	Refusal of help with work	I was left helpless before. I'm not going to be left helpless again.
	Loses or destroys property	I have no sense of the value of anything. I have little interest in things if they are not mine. I am angry and take it out on things.
Ambivalent (I'm not okay, you're okay)	Talks all the time asking trivial questions	I feel safer if I do all the talking. I want to communicate but don't know how.
	Demanding teacher attention all the time	I fear that if I don't let you know I'm here you may leave me on my own. Even negative attention is good. I fear getting it wrong.
	Hostile when frustrated	I will feel shame and humiliation if my difficulties are discovered.
	Poor concentration, fidgeting, turning around	I must scan the room all the time for danger. I must stay hyper-aroused. I dare not relax.
Disorganised (I'm not okay, you're not okay)	Refuses to engage with work	Getting things wrong is frightening. Being wrong will lead to rejection AGAIN.
	Tries to create chaos and mayhem	It feels chaotic inside so it feels safer if it is chaos outside as well.
	Oppositional and defiant	I need to stay in control so things don't hurt me. I do not want to be exposed as stupid. You are horrible to adults.
	Sexually aggressive	I know from past experience that sex=power and I want to be in control.

And what might you do?

Possible triggers	What might you do?
	Introduce a buddy system.
Consider a 'circle of friends' approach.	I was left helpless before. I'm not going to be left helpless again.
Encourage the child to help around the school.	I have no sense of the value of anything. I have little interest in things if they are not mine. I am angry and take it out on things.
Singled out for 1:1 support	Encourage work in pairs or small groups.
Ask the child to help another who is less able.	I fear that if I don't let you know I'm here you may leave me on my own. Even negative attention is good. I fear getting it wrong.
	Validate the child's feelings, 'I can see that you are angry'... Help the child repair/restore where possible – together.
Task that is hard/new/unusual	Have set routine. Make sure all first tasks are simple and achievable. Seat child close to you. Allow child to wait quietly.
Task that is hard/new/unusual	Small step differentiation.
Use timer to divide tasks.	It feels chaotic inside so it feels safer if it is chaos outside as well.
Sights, smells and sounds can trigger panic as reminders of past trauma.	Arrange seating so there is no-one behind the child but where you can stay in contact. Laugh with the child, even at silly things.
Task that is hard/new/unusual	Offer choices. Make sure both are acceptable! Make lessons/tasks very structured (multiple choice/cloze/sentence completion. All materials to hand.
	Focus on modifying most serious behaviour. Validate the child's feelings. 'I can see that you are angry/upset...'
Task that is hard/new/unusual	Be assertive but keep emotional temperature down. Avoid showing anger, irritation and fear. Start each day with a clean slate.
Variety of stimuli including stress.	Record all incidents very clearly. Seek advice from other agencies.

Contacts

For more information about anything in this leaflet please contact, please call

0300 1239868

Suggested further reading

Building the Bonds of Attachment by Daniel A Hughes. Rowman & Littlefield, 2017

Attachment in the Classroom by Heather Geddes: Worth Publishing, 2006

Inside I'm Hurting by Louise Bomber: Worth Publishing, 2007

Attachment, trauma and resilience- therapeutic caring for children by Kate Cairns: BAAF, 2002.

Becoming an Adoption- Friendly School by Dr Emma Gore Langton and Katherine Boy; Jessica Kingsley Publishing, 2017

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