Meeting the needs of adopted and permanently placed children A guide for school staff







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Forward

"72% of those adopted in 2013-14 entered care due to abuse or neglect. Their needs do not change overnight and they do not stop being vulnerable just because they are in a loving home. Their experiences in early life can have a lasting impact which can affect the child many years after adoption. We therefore believe that teachers and schools have a vital role to play in helping these children emotionally, socially and educationally by providing specific support, to raise their attainment and address their wider needs."

Department for Education (2014)

As an adoption support organisation we hear again and again how even one committed adult in school can make all the difference to a child and their family. An adoption-friendly school can be a family's most precious resource. Adopted children have been hurt and let down by the adults whose job it was to keep them safe. It's no wonder then, that attuned, responsive, empathetic adults at school are a vital part of their healing. Equally important is a safe, predictable, low-arousal environment.

Children spend as many as 15,000 hours at school. Every one of those hours is an opportunity to give them a new experience of themselves, others and the world. Adoptive parents' wishes for their children are the same as our wishes for all children: to feel safe and happy; to be able to settle to learn; to thrive and fulfil their potential. Teachers and schools can make all the difference in making these wishes come true. This guide, commissioned by the Department for Education, explains how we can all do our part.

Dr Emma Gore Langton Head of Education Service PAC-UK

Adopted and permanently placed

children as a vulnerable group

Modern day adoption and special guardianship

Adoption has changed tremendously in the last 30 years. In the past, most adopted children were relinquished by their birth parents as infants. Now, the very great majority of children who go on to be adopted are removed from their birth families because they have experienced trauma within their birth families; in 2014-15, 74% of adopted children had suffered abuse and neglect. For many children this begins in the womb, with exposure to alcohol, other substances and domestic abuse. Some adopted children may also be at increased genetic risk for developmental difficulties (such as ADHD or autism spectrum conditions) and mental health difficulties.

The average age at placement with an adoptive family is 3 years 3 months, while the average age of children placed with special guardians is five years. While the adoption process is being sped up to prevent children from having to wait in care, many children are still in care for many months or even years, and are very likely to be moved between different foster families. Each of these moves contributes to the child's experiences of loss, instability and trauma.

Seventy six percent of children are aged between 1-4 years at adoption, while one fifth are aged 5-9 years; these children have to enter school very soon after moving to their adoptive families.



Special guardianship is increasingly used as an alternative to adoption. Special guardians may be foster carers, but are usually people within the child's birth family or family network, such as grandparents, aunts and uncles, or family friends. Special guardians face specific challenges as they were not usually planning to become carers, but instead are responding to a need within the family. Children may also leave care under a child arrangements order (formerly residence order), which allows them to live with a family member who is given parental responsibility. Children who leave care into adoption and other forms of permanence are referred to in this guide as 'adopted and permanently placed children.'



"We believe that teachers and schools have a vital role to play in supporting adopted children, emotionally, socially and educationally, to raise their attainment and address their wider needs."

Department of Education

Adoptive parents and special guardians are encouraged and supported to be open with their children about their adoptive/special guardianship status and their early lives, sharing the child's 'life story' with them in a developmentally appropriate way. Many adopted and permanently placed children can recall their experiences with their foster families and birth families, and many have contact with members of their birth families (parents, siblings, grandparents); this might be cards and letters through the local authority's 'letterbox', or direct face-to-face contact. Although contact is overall evidenced to be helpful for adopted and permanently placed children's understanding of their identities and their lives, contact can raise difficult thoughts and feelings for children, who may also find anniversaries (birthdays; anniversaries of moving family) difficult.

One third of adoptive families experience some difficulties, with between twenty and twenty five percent having major challenges (Selwyn et al., 2014). Adoptive parents and special guardians are given training and support to help them become 'therapeutic' parents to their children, using parenting

and behaviour management strategies which take account of the trauma and loss their children have experienced. School can be a source of major stress for children, and adoptive and other permanently placed families sometimes find that schools do not understand the issues. This is often because school staff have not been given enough information, training and support to understand the specific needs of adopted and permanently placed children and young people. This is a priority area for the Department of Education: "We believe that teachers and schools have a vital role to play in supporting adopted children, emotionally, socially and educationally, to raise their attainment and address their wider needs."

To find out more

First4adoption is the dedicated adoption information service for people interested in adoption in England. The site has useful information about the adoption process.

www.first4adoption.org.uk/

Adoption UK is a national charity run by and for adopters. It provides information, training and guidance about all stages of the adoption process.

www.adoptionuk.org

Julie Selwyn and colleagues' major study Beyond the Adoption Order (2014) followed families after adoption, asking them about the challenges they faced and the support they received. www.gov.uk/government/publications/beyond-the-adoption-order-challenges-intervention-disruption

FIRST 4 ADOPTION

adoptionuk for every adoptive family

How adopted and permanently placed children get on at school

80% of adoptive parents say their children needed more help at school than their peers Key Stage 2 – age-related expectations in reading, writing and maths ŤŦŦŦŦ 49% adopted and permanently placed children 59% of adopted children are always trying to make up for early experiences 75% of children who had never been in care ************* 38% 50% 20% of adopted of children of adopted in adoptive children attend children need families special schools education experience psychology significant involvement social, emotional and mental health difficulties



Meeting the needs of adopted and permanently placed children



There is growing evidence that adopted and permanently placed children's early experiences continue to have an impact on their outcomes long after they move to their adoptive families:

- In 2014 the DfE published data showing that 49% of adopted and permanently placed achieved age related expectations in reading, writing and maths at Key Stage 2, compared with 45% of children in care and 75% of children living with their birth families.
- AdoptionUK's 2014 survey found that 80% of adoptive parents reported that their children needed more help in school than their peers, and 59% felt that their children were always trying to make up for their early experiences. Two percent had been permanently excluded, compared with 0.06% of the overall population.
- A study by Wendy Sturgess and Julie Selwyn in 2007 found that 25% of the adopted children they followed up had Statements of SEN (now EHC Plans), and 20% attended specialist schools.
- A study by Nina Biehal (2010) found that 38% of children in adoptive families experience significant social, emotional and mental health difficulties.
- Wendy Sturgess and Julie Selwyn's (2007) study found that 50% of children had needed educational psychology involvement after their adoption orders, and 55% had received CAMHS involvement.

To find out more

DfE (2014). Key Stage 2 attainment for children recorded as adopted from care.

https://www.gov.uk/government/publications/key-stage-2-attainment-for-childrenrecorded-as-adopted-from-care

Adoption UK (2014). Adopted children's experiences of school.

http://www.adoptionuk.org/schoolresearchfindings

Sturgess, W., & Selwyn, J. (2007). Supporting the placements of children adopted out of care. Clinical Child Psychology & Psychiatry, 12, 13-28.

Biehal et al. (2010). Belonging and permanence: Outcomes in long-term foster care and adoption. London: BAAF.

http://www.adoptionresearchinitiative.org.uk/summaries/ARi_summary_1.pdf

Issues facing adopted and permanently placed children in school

Adopted and permanently placed children may have difficulties in some or all of the following areas:

- Forming trusting relationships with adults
- Social skills and relationships with peers
- Executive functioning skills, such as planning, organising, remembering, inhibiting their impulses, focusing their attention, and initiating tasks
- Speech and language difficulties
- Learning delays or difficulties
- Managing their strong feelings, such as shame, sadness, anxiety and anger
- Coping with transitions and change
- Sensory processing



Adoption is a lifelong journey. At times children may display acute difficulties at school, whereas at other times they may be more settled. Some adopted and permanently placed children do not display their difficulties at school, using a mask of 'compliance' to get through the school day, with their stress spilling over at home. Many families describe their children as fizzy bottles of pop, which are shaken repeatedly over the course of the school day, only to explode when the lid comes off at home. Transitions and unstructured times like playtimes can be particularly tricky aspects of the school day for some adopted and permanently placed children. Homework can also be very stressful for some adoptive families.





Meeting the needs of adopted and permanently placed children

What adopted and permanently placed children and young people think about school

"We believe all schools with adopted people as well as other children who are fostered or in care should have...

Training for teachers, by specialists to help them understand the issues for us and why we sometimes get anxious, sad, feel mixed up, empty, confused, angry and lonely. Lessons about adoption - we learn about LGBT, different cultures and religionswhy not adoption/ fostering and children in care?

right person at the right time. Sometimes this might mean in-school counsellors. A thoughtful curriculum so that we are not upset by or

left out of sensitive

topics.

If it's out in the open we feel we can talk about it rather than feeling ashamed or bottling it up because we're scared we will get bullied for it or people won't understand." Presentations and assemblies from adopted people, so other students understand it.

To have someone in school

who actually understands

what adoption might mean

to us. We want to talk to the

"We believe that if schools and their teachers understand adoption and know who ALL the adopted people in their school are, then this might...

Help us meet with other adopted teenagers. Often there are other adopted teens in our school, but we don't know who they are. Stop teachers making snap judgements about our behaviour, instead asking us what would help, and speaking to us first if they intend to contact our parents.

Provide us with support rather than punishment. Often we need someone to talk to and listen. Someone who understands our situation and can help us deal with our emotions.

Stop the bullying by being more open and honest about adoption and improving how bullying is tackled.

These are the views of young people participating in:

- The AT-iD (Adopted Teen Identity) project, facilitated by PAC-UK on behalf of the Yorkshire & Humber Adoption Consortium.
- The Big Consult, facilitated by After Adoption for the Department for Education.

To find out more

Family Futures Young People's Forum has produced an animation with adopted children explaining their experiences of school, including bulling: http://www.familyfutures.co.uk/launch-of-our-anti-bullying-animation/

How can we help?

Making sense of children's difficulties

1. Attachment

What we need to know

Attachment is a framework for thinking about the importance of our earliest relationships. As infants we are completely dependent on adults to meet our needs. From how they treat us, we learn about who we are, how we can expect others to behave, and what the world is like. All children need caregivers who are:

- Available both physically and emotionally
- Attuned able to tune into the child and work out what they need



• **Responsive** - able to give the child what they need

When our caregivers are good enough (not perfect!), we learn that we are loved and ok; we learn that we can expect adults to be reliable and to meet our needs; and we learn to expect that the world will be safe, fun and exciting. We feel secure because our caregivers can be a 'safe base' from which we can go out to explore the world, returning to them for reassurance when we get anxious.

Some children's early experiences have taught them that adults are not available or responsive. These children have learned to manage their anxiety by avoiding interactions with adults. They have learnt to try to look after themselves, sometimes appearing to be independent and self-sufficient, when really they feel very frightened and alone (anxious avoidant attachment pattern).

Some children have caregivers who are very unpredictable; they may be attentive and fun at times, but withdrawn and unresponsive at other times. Sometimes these children learn to keep themselves safe and cared for by trying to stay close to the caregiver and trying to make sure that they have the caregiver's attention at all times (anxious ambivalent attachment pattern).

To find out more Image: Strain of the strain of t

For up to half of the children coming into care, their experience of adults has been so chaotic and harmful that no single way of responding would have been sufficient to keep them safe. Instead, these children have to carefully tune into each adult in each moment, and act in a way which is the most likely to keep them safe and help them get their needs met (disorganised attachment). These children are sometimes experienced by adults as 'chameleons' or 'manipulative' when really they are working very hard to stay safe and get what they need.

How we can help

Children need access to safe, responsive and nurturing adults in school, so that they can feel safe and settle to learn. For adopted and permanently placed children it is helpful for one key person to take on the role of acting as a safe base for the child. This key adult can gradually build a relationship with the child, continuing to be available to the child when the child feels anxious or needs help. It is important that the key adult is supported by the wider circle of adults around the child, who will also need to build positive relationships with the child. Staff should offer the child empathy and validation, using phrases such as:

'I know it can feel hard to wait for your turn'; 'I wonder if you're feeling a bit sad this morning.'

The key adult can let the child know that they hold the child in mind, even when they are not with the child. It is also important to help the child know that their family still exists and holds them in mind whilst the child is at school. Transitional objects such as a family photograph, or the parent's scent on a handkerchief, or a small soft toy, can be useful for this. When things go wrong, and the child is told off, it is crucial that the adult involved seeks the child out to explicitly offer repair and reconnection; this means acknowledging that it has been a tricky day, and explicitly telling the child that the adult still likes them and wants them in class:

'We got in a muddle today, didn't we? I'm really looking forward to seeing you for maths in the morning.'

To find out more

The National Institute for Clinical Excellence (NICE) guidelines for children's attachment: attachment in children and young people who are adopted from care, in care or at high risk of going into care. These highlight the importance of training for school staff.

https://www.nice.org.uk/guidance/NG26



Louise Bombèr has written three books about the role of the key adult, and providing safe nurturing in school.

Inside I'm Hurting: Practical strategies for supporting children with attachment difficulties;

What about me? Practical strategies to support children with attachment difficulties;

Settling troubled pupils to learn: Why relationships matter in school.

http://www.theyellowkite.co.uk/?page_id=718

2. Trauma and its impact on brain development

What we need to know

Neglect used to be thought of as somehow less serious than abuse, but there is growing evidence that abuse, neglect and loss all involve relational trauma, whereby children are hurt by adults whose role was to care for them. Early relational trauma is particularly harmful, because it occurs at a time when the brain is laying down its fundamental pathways and connections. We now understand that abuse and neglect alter children's brain structures and functioning, and the biochemical systems which regulate children's lifelong responses to stress.

As well as these underlying changes to the brain, our brains also adapt to our environments to give us the best chance of survival. In order to keep themselves safe in what they have learnt is a dangerous world, children may become hyper-vigilant, continually scanning the environment for threat. This makes it very difficult for them to focus on learning. When we are so finely tuned to potential threat, we tend to err on the safe side, mistaking neutral cues for threatening ones; this can happen in busy secondary schools, for example, where someone brushes against a child's arm in the corridor. If the child is on high alert for danger, their brain may tell them that they are being attacked. Traumatised children may therefore 'over-react' to non-threatening situations, or indeed may react to cues which as adults we are not even aware of.

When children's brains perceive threat, they must urgently act to keep themselves safe. The usual functions of their 'thinking' brains- our neocortex, which make us uniquely human- will not be helpful in acute danger; there is no time to 'think things through and make a plan'; 'use our words'; or 'reflect on our feelings.' Instead we must take urgent action. Our survival brains take over, and we may fight, flee or freeze. These survival behaviours are often evident in school; children who instantly hit out at others; children who flee under the table, into the toilets, out onto the playground or into the road when they feel threatened; and children who 'play dead' throughout the school day. These behaviours can get children into a lot of trouble at school, especially if we believe that children are 'choosing' their behaviours.



To find out more



Traumatic experience and the brain by Dave Ziegler (2002) http://www.jaspermountain.org/trauma_andthe_brain.html

Teicher, M.H. & Samson, J.A. (2016). Annual research review: Enduring neurobiological effects of childhood abuse and neglect. *Journal of Child Psychology & Psychiatry*, 57(3), 341-266.

http://onlinelibrary.wiley.com/doi/10.1111/jcpp.12507/abstract

McCrory, De Brito & Viding (2011). The impact of childhood maltreatment: A review of neurobiological & genetic factors. *Frontiers in Psychiatry*, 2, 48. http://journal.frontiersin.org/article/10.3389/fpsyt.2011.00048/abstract

How we can help

Traumatised children need help to feel safe and stay calm. Structure and routine are an important source of safety, as they make the world predictable. Staff should let children know what will happen in the day and week, using visual timetables and now-andnext boards. It is helpful to let parents and guardians know too, so that they can talk children through the day beforehand. When there are changes to the usual routine, it is important to let the child and parent know in advance, so they can prepare for the changes.



It is useful to create a safe space for the child in school, which they can use when they feel anxious or unsafe; this may be a designated room, or a pop-up tent in the corner of the classroom. The space should be used with the child's key worker, and should not be experienced as 'sending them away' or 'time out.'

Children may not be able to manage their strong feelings on their own. These children need adults to help soothe and regulate them. It is helpful to speak to parents about what their child finds soothing and calming; options include using the five child's senses (e.g. lavender on a tissue; stroking a soft fabric; listening to a calming CD), doing calming repetitive activities (sorting coins or coloured pencils), or more physical activities such as 'stretching like a cat.' If children are intensely distressed, it may help to encourage them to do intensive exercise (e.g. running on the spot for a minute) or use temperature (e.g. squeezing an ice pack) to alter their body chemistry. The key worker and child can then develop a 'calm box' together with activities and ideas.

Mindfulness is a very helpful way of grounding children in the present moment, as well as being effective at settling the whole class after moments of transition. These can be very simple activities, like asking a child to tune into all the sounds they can hear, or note all the green objects in the room. Children may also find it helpful to be physically grounded in the present, such as by carrying some heavy books to the school office, or having a weighted lap beanbag which gently weighs them down into their chair.

To find out more



Improving sensory processing in traumatised children by Sarah Lloyd (2015). http://www.jkp.com/usa/improving-sensory-processing-in-traumatizedchildren-33916.html

Complex Trauma: Facts for educators produced by the National Child Traumatic Stress Network.

http://www.nctsn.org/products/complex-trauma-facts-for-educators

There are several organisations supporting the development of mindfulness in schools, including the Mindfulness in Schools Project. http://mindfulnessinschools.org

3. Foetal alcohol spectrum conditions

What we need to know

We are increasingly understanding the profound effects of being exposed to alcohol in the womb. Foetal alcohol spectrum is the umbrella term used to describe the range of difficulties, with foetal alcohol syndrome at its most extreme end. Exposure to alcohol can have an impact on children's physical development, including their height, weight and appearance. However, not all children will have physical signs of alcohol exposure. Foetal alcohol spectrum conditions can be difficult to diagnose, as they lack the distinctive facial features of foetal alcohol syndrome. For adopted and permanently placed children, the process is complicated by the need to prove that the birth mother drank during pregnancy; this information is not always known. Children may have difficulties with learning (especially with mathematics), memory, motor skills, attention, language, visuo-spatial skills, planning and problem solving. They may find it particularly difficult to link cause and effect; that is, to learn from consequences, and adapt their behaviour accordingly. In the longer term, children may experience mental health issues and difficulties with sexual behaviours, and may be more vulnerable to drug and alcohol related problems.



To find out more

Coriale et al. (2013). Fetal Alcohol Spectrum Disorder (FASD): neurobehavioural profile, indications for diagnosis and treatment. *Rivista di Psichiatria*, 48(5), 359-369. http://www.rivistadipsichiatria.it/articoli.php?archivio=yes&vol_id=1356&id=15062

The FASD Trust http://www.fasdtrust.co.uk



How we can help

Children affected by foetal alcohol exposure need help to learn from the world around them. It is helpful to provide structure to the day and to learning tasks, making the world as predictable as possible. Children will benefit from frequent repetition of information, and opportunities to overlearn core concepts; this is best done using a 'little and often' approach, interleaving familiar and new information. Children will also need explicit teaching to generalise their learning from one context to another. Since abstract concepts can be tricky for this group of children, it is helpful to use concrete language, and to ground learning concepts in concrete examples. Children may work at a slower pace, and may need more 'take up time' between instructions and carrying out a task. Like other children with executive functioning difficulties, at times they need an adult to act as their 'external brain,' modelling thinking and problem solving, and providing high levels of supervision.

To find out more

Understanding Fetal Alcohol Spectrum Disorder: A guide to FASD for parents, carers and professionals by Maria Catterick & Liam Curran (2014):

http://www.jkp.com/uk/understanding-fetal-alcohol-spectrum-disorder.html

Making a difference: Working with student who have fetal alcohol spectrum disorders.

www.education.gov.yk.ca/pdf/publications/fasd_manual_2007.pdf

The FASD Trust provides 'FASD in Education', with resources and information for teachers, schools and parents

http://www.fasdineducation.co.uk/

4. Developmental gaps

What we need to know

Good enough parents begin to fill in their child's developmental wall from birth, by meeting their sensory, physical, emotional and social needs. Most adopted and permanently placed children have not had good enough early care, and their needs have been neglected. This means that there are significant gaps in the building blocks we all need to succeed. It is difficult, for example, to cope with complex social interactions on the playground at seven, if we have not had adequate opportunities to develop our language skills, social skills, play skills, self-management skills, emotion regulation skills, coping skills, or self-esteem. For children in good enough early environments, these building blocks begin when the parent gazes into the infant's eyes, responds to her babbling, comments on her play, supervises her appropriately with other children, and helps to put things right when there is a problem. As the child gets older, the parent scaffolds the child towards independence, teaches and models problem solving skills, and continues to provide linguistic and social opportunities.

At school we usually expect children to behave in an age-appropriate way, even when there are large gaps in their developmental walls. This can result in us assuming that children *won't* do things, rather than understanding that they can't do things. This assumption leads us to assume that the problem is one of motivation, and we try to use rewards and consequences to motivate the child into doing better. However, where children do not have particular skills, we cannot reward or punish them into displaying these skills. Neither can we neglect to teach them these skills, hoping that they will spontaneously develop them. Instead we must go back and fill in the gaps in their developmental walls, giving them the input and explicitly teaching them the skills they are missing, and coaching them as they put these new skills into practice.



To find out more



The Adoption UK website has a great animation of the developmental wall:

http://www.adoptionuk.org/different-kind-parenting/wall

Mary Sheridan's book *From Birth to Five Years* gives an excellent framework for thinking about children's early development. It is a very helpful approach to thinking, even for much older children and young people:

https://www.routledge.com/Mary-Sheridans-From-Birth-to-Five-Years-Childrens-Developmental-Progress/Sharma-Cockerill/p/ book/9780415833547

How we can help

Children who have experienced developmental gaps need us to meet them where they are developmentally; a common expression in the adoption world is "Think toddler!" It can be helpful to use developmental tools to map out a child's development in each area.

School nurture groups offer a developmental approach to children's learning. They provide children with enriched family-like environments, with plenty of opportunities to explore the world and develop early skills. Activities such as eating together, reading together and exploratory play are understood to be important for developing children's language, social skills, emotion regulation skills and play skills. All of these are important building blocks for learning.

Children who have difficulties with peer relationships may need additional support, structure and supervision at break and lunchtimes. They need opportunities to learn to play, and social skill groups to explicitly teach them skills such as turn taking and waiting. Lego therapy is an excellent approach which helps children to practice taking a specific role in an activity, rather than always needing to be in charge.

Children may also need scaffolding to develop their executive functioning skills. When we scaffold a child's development, we provide frameworks and support so the child can use their skills; for example, we might scaffold a writing task by providing sentence starters, suggested vocabulary, or boxes showing how much to write. Adults in school may need to act as the child's 'external brain', modelling questioning, thinking and problem solving, and providing a narrative to daily life e.g. 'Oh look, it's raining outside. Let's check we've got the right clothes so we don't get wet. What do we need?'



To find out more

Beech Lodge School in Berkshire has produced FAGUS, a comprehensive framework for schools to monitor, review and support children's emotional and social development.

https://www.fagus.org.uk/

The Nurture Group Network promotes the development of nurture groups in schools and provides accredited training programmes, research on effective practice, publications and information exchange.

https://nurturegroups.org/

Smart but Scattered is an excellent practical book which explains how to target and scaffold different aspects of children's executive functioning skills.

http://www.smartbutscatteredkids.com/

5. Loss and identity

What we need to know

Adopted and permanently placed children have experienced profound losses at the earliest stages of their lives. Not being able to live with their birth families, and the reasons for this, are sources of grief for most adopted and permanently placed children at various points in their lives. One psychotherapist and adoptive mother, Nancy Verrier, has called the pain of being separated from one's birth motherwhatever the circumstances- 'the primal wound.' In order to move to their adoptive families, adopted and permanently placed children have also lost the foster family which was caring for them. Most adopted children have lived with more than one foster family, and so have lost multiple families. Some adopted children also have a complex network of birth siblings from whom they are living apart; some siblings may have their own adoptive families, some may be in foster care, and others may be living with birth parents or other members of the birth family. Losses do not end once children come home to their adoptive families; pets die, grandparents pass away: best friends suddenly leave the area: favourite teachers go on maternity leave. For adopted and permanently placed children, these 'normal' losses can feel particularly difficult.



Adopted and permanently placed children also face a lifelong process of working out their identity. They will need to work out who they are in relation to their adoptive family and their birth family, and may wrestle again and again with the question: do I belong? In trying to make sense of the loss of their birth families, some adopted and permanently placed children may conclude that there was something wrong with them, and may carry a negative message such as 'I am rubbish' as their core identity. For many adopted and permanently placed children, these questions about their identities are particularly important during adolescence, and may feel like a crisis to children and their families.

To find out more



The Primal Wound: Understanding the adopted child by Nancy Verrier. http://nancyverrier.com/the-primal-wound/

Making not breaking: Building relationships for our most vulnerable children, a report by the Care Inquiry, identifies relationships as the 'golden thread' throughout children's journeys of transition and loss: http://www.adoptionuk.org/resources/article/care-inquiry-reportmaking-not-breaking-building-relationships-our-most-vulnerable

How we can help

When children need help to process past losses, it is best to ask for specialist support from adoption services (see later). It is important that we as adults can allow children to feel sad, and can validate children's very understandable feelings of sadness. By giving children permission to grieve, we reduce the risk that they will get stuck in 'unmourned grief.' It is very helpful to ask parents about particular triggers or times of year when children might feel more overwhelmed by the losses they have experienced; at these times, we can make extra efforts to provide nurture and structure.

School staff can support children in learning to cope with the normal sadness of saying goodbye, and can be instrumental in giving children a new experience of a 'good goodbye.' As losses approach, it is helpful to actively involve the child in thinking about how they wish to say goodbye to the person; we can also use rituals and stories to help children process the loss. It is very helpful if there is a lasting record of the person's relationship with the child (e.g. a photograph together, or a memory book), and if the person leaving is able to send a card to or visit the child, to demonstrate that even when people leave, they still exist in the world, and the child continues to matter and exist to them. This can give the child a very different template of endings from the abrupt and severing endings they may have experienced in their early lives.

To find out more



Margot Sunderland writes therapeutic stories which deal with loss, and life not being as we would wish it to be. The day the sea wort out and never same back and The free who longed for

The day the sea went out and never came back and The frog who longed for the moon to smile

http://www.margotsunderland.org/margots-books

The Goodbye Book by Todd Parr about saying goodbye after death.



http://www.toddparr.com/books/

Winstons Wish has resources for supporting children through bereavement, which may also be relevant to other forms of loss.

http://www.winstonswish.org.uk/supporting-you/publications-and-resources/

Children who have experienced loss may also need enhanced support to cope with change and transition. It is very important that adopted and permanently placed children know what is going to happen at school, and are alerted ahead of any changes to staff, rooms, lessons or trips. Adopted and permanently placed children benefit from additional opportunities to visit new classes, schools or staff, and to create a photographic or written record to which they can return to remind them about what is going to happen. It is helpful to talk through situations which the child may be worried about, and to rehearse solutions to these worries e.g. 'If I get lost, I can ask the first teacher I see...' Some adopted and permanently placed children struggle with the transition between home and school, and find it very helpful to have a meet and greet and a quiet transitional space to settle into the day.



To find out more



My new school: A workbook to help students transition to a new school by Melissa Trautman.

http://tinyurl.com/ycw9uzce

Supporting Transition from Primary to Secondary School for pupils on the autism spectrum has helpful advice and ideas which are also applicable to children who have experienced trauma:

www.leics.gov.uk/autism_transitions_parents_pack.pdf

Whole school approaches

1. Home-school partnership

It is vital to work closely with children's adoptive parents; most will have had training in attachment, trauma, and loss, and the importance of therapeutic parenting. They have also come to know their children extremely well. It is crucial to build a good working relationship with adoptive parents from the start, rather than waiting until a problem arises. While Personal Education Plan (PEP) meetings are not statutory once the adoption order is granted, they can be a very helpful format and forum for monitoring adopted and permanently placed children's needs, and ensuring the child's support plan is up-to-date. Meeting parents even when things are going well is very valuable, as it becomes an opportunity to identify what support is most effective for the child.



When children have significant difficulties, communication between school and home can become fraught. Parents can feel blamed and worn down by continual bad news from school, and it can feel shaming to be asked to come for a discussion in front of other parents. When there needs to be daily or weekly communication between parents and the school, it is helpful to agree in advance how this will work; using a home-school book for example, or using emails. It is also important to regularly include good news, and acknowledgements of the child's strengths.

Identifying Special Educational Needs (SEN)

All children and young people are entitled to an education that is appropriate to their needs and promotes high standards and the fulfilment of potential. For adopted and permanently placed children, schools need to be particularly aware of any emerging special educational needs that may act as a barrier to this aspiration, and must put in place appropriate special educational provision that helps the child in their learning or participation. The benefits of early identification are widely recognised – identifying need at the earliest point and then making effective provision improves long-term outcomes for the child or young person.

Class and subject teachers should make regular assessments of the progress of all adopted and permanently placed children. These should seek to identify pupils making less than expected progress given their age and individual circumstances. However, it should not be assumed that attainment in line with chronological age means that there is no learning difficulty or disability. Some learning difficulties and disabilities occur across the range of cognitive ability and, left unaddressed, may lead to frustration, which may manifest itself as disaffection, social, emotional and mental health difficulties. This is particularly so for adopted and permanently placed children, for whom the impact of attachment, loss and identity, or trauma issues can result in particular challenges in their learning or social progress at school. The majority of adopted and permanently placed children with SEN or disabilities will have their needs met within local mainstream early years settings, schools or colleges. Some, however, may require an Education Health and Care (EHC) needs assessment in order for the local authority to decide whether it is necessary for it to make provision in accordance with an EHC plan. Adoptive parents or the educational setting can ask the local authority to make such an assessment. Further details are available at:

https://www.gov.uk/government/publications/send-guide-for-parents-and-carers

2. Information sharing

Different adoptive families have different views about disclosing their child's adoptive status. There are considerable confidentiality and security issues relating to information about adopted and permanently placed children. Some children and their families would be in danger if the child's birth family were to learn their adoptive surname, or their school or home address. Most children have had very difficult experiences which are a deeply personal part



of their story, and their adoptive parents are working hard to safeguard their privacy. As children grow older, they develop their own views about who should know, and parents must also take these views into account. At the same time, most adoptive parents proactively tell school staff about their child's adoptive status; their frustration is that the information isn't always understood or passed on as they had wished. Approaches such as 'confidentiality' and 'need to know basis' can be ill-defined and can sometimes be a barrier to telling staff who would be able to change their approach to the child if only they knew the information. It is therefore important to make an explicit information sharing plan when speaking to parents. Which members of staff need to know what about the child, and what do we want them to do as a result of having the information?

Parents will need to disclose their child's adoptive, special guardianship or child arrangements status to the school if they wish the school to claim the pupil premium plus grant on behalf of their child. If schools are explicit about how to disclose this, and who will hold the information, this can help parents feel more confident in coming forward.

3. Inclusive curricula

Adoptive and permanently placed families are not yet well represented in the curriculum, and certain topics can be particular hotspots for children not living with their birth families. Bringing in a baby photo, drawing a family tree, or identifying genetic patterns of inheritance for eye and hair colour can be difficult and upsetting for adopted and permanently placed children. Topics addressing children's welfare, such as Children in Need or NSPCC assemblies, can touch very personally on children's experiences. Topics in English and history, such as World War Two evacuee children, can trigger difficult feelings. Sex education and drug and alcohol awareness can be hard for children who have been exposed to these issues in their birth



families. It is very helpful to approach adoptive parents in advance of these topics arising, so that together you can work out an alternative more inclusive lesson plan. This also gives parents time to prepare their children for tricky topics, and enables them to help their children afterwards with any difficult feelings arising.

Stigma and bullying is another important issue for adopted and permanently placed children and their families. Other children and parents sometimes make hurtful or ignorant comments about adoption and adopted and permanently placed children, such as taunting a child "I can see why your real mother didn't want you." It is important for school staff to set the tone in talking positively about adoption, and modeling the correct language to use. This can be done without drawing attention to the particular child, as part of the range of diverse families represented in schools. Children need school staff to confidently back them up if another child challenges them about their family makeup or asks intrusive questions. For example, if a child talks about their birth siblings, and is challenged by a child who only knows the adoptive family's makeup, school staff can quickly back up the adopted child, explaining "Sometimes we have brothers and sisters who don't live with us." It is helpful to talk potential situations through with the child's parents, so that together you can develop a script for how to respond. Older children also benefit from coaching and opportunities to rehearse responses, so that they themselves can choose how they respond to difficult situations.

To find out more



Todd Parr has some excellent children's books about families, adoption, difference and belonging, including We belong together: A book about adoption and families; It's ok to be different and The family book. http://www.toddparr.com/books/

Coram's young people's participation group The Adoptables has produced a toolkit with lesson plans for key stages 2 and 3 which explain what being adopted is like, and how adopted young people can be supported and included.

http://www.coram.org.uk/supporting-young-people/adoptables/ adoptables-schools-toolkit

Support for schools

Children who have left local authority care through an adoption, special guardianship or child arrangements order (formerly residence order) have priority school admissions. This enables them to attend the school which their parents or guardians believe will best meet their needs.

1. Pupil Premium Plus

The Government introduced the Pupil Premium Plus in 2014 to help schools meet the needs of looked after and previously looked after children. The PP+ is currently £1900 per child per annum for children aged 5-16. The PP+ should be distinguished from the pupil premium grant, which is linked to eligibility for free school meals, a measure of financial disadvantage. The funding is an acknowledgement from the DfE that:

"Adopted children will have experienced grief and loss and many of them will have had traumatic experiences in their early lives; 70% of those adopted in 2009-10 entered care due to abuse or neglect. Their needs do not change overnight and they do not stop being vulnerable just because they are in a loving home."

The funding is paid directly to schools, who decide how to spend it. The DfE has said that it expects the money to be spent on...

"Supporting adopted children emotionally, socially and educationally, to raise their attainment and address their wider needs."

The PP+ grant is accessed when the school indicates the child's adoptive, special guardianship or child arrangements order status on the School Census. The school therefore needs to alert all parents and guardians that they will need to declare their child's status to the school if they wish the school to claim the pupil premium plus. The school should give parents choice about how to demonstrate their child's eligibility; some parents may wish to share their court order and confirm their children was previously looked after by the local authority, whereas others might prefer to share a confirmation letter from the Local Authority. It is helpful if schools raise this with all parents (for example via a newsletter) each year, as there may be some adoptive and permanently placed families of which the school is not yet aware.

The DfE has said that it expects schools to work in partnership with parents about how the funding is used. The Personal Education Plan (PEP), while not statutory for adopted and permanently placed children, may provide a useful format and forum for reviewing the child's progress, identifying areas of need, and forming an intervention plan. Schools must be transparent in their use of pupil premium plus.

To find out more

BAAF published a DfE commissioned guide with case studies of good practice collected during the first year of the pupil premium plus grant.

http://www.first4adoption.org.uk/wp-content/uploads/2015/03/Pupil-Premium_Case-Studies.pdf

PAC-UK has published a guide to the effective use of the pupil premium plus:

http://www.pac-uk.org/education/

2. Training, consultation and advice for school staff

Local authority Educational Psychology Services can often provide training on attachment and trauma. Some local authorities have an identified educational psychologist for adopted and permanently placed children; their role is often to support the school's link educational psychologist in working with the child, family and school.

As the needs of previously looked after children will be similar to children in care, the school's existing designated teacher for looked after children will be a good source of knowledge and support, and will be able to access training provided by the local authority.

The voluntary sector offers a range of guidance and support for schools. Organisations include:

Organisation	Training	Other services for schools
PAC-UK England-wide <u>www.pac-uk.org</u>	 Supporting children who have experienced trauma & loss, including looked after & adopted children Delivered centrally and in schools Becoming an adoption friendly school 	 Specialist educational psychology service Adoption-friendly schools guide & toolkit Education advice line Consultation regarding individual children Group & individual therapeutic support in schools Intensive casework Good practice guide for schools
Adoption UK UK-wide www.adoptionuk.org	• Delivered in partnership with PAC-UK (see above)	 Membership for schools Ambassador training Support for families Online guides
Adoption Matters Yorkshire & Humber North West <u>http://www.centreforadoptionsupport.org/</u>	 Adoption training Nurtured heart training Delivered centrally and in schools 	 1: 1 education consultations Reducing Anxiety Management Plan Therapeutic support for families
After Adoption Nationwide <u>www.afteradoption.org.uk</u>	 SafeBase for schools Delivered in schools 	 Consultation regarding individual children Therapeutic support for families

Organisation	Training	Other services for schools
Annex Project	Teaching attachments	• Therapeutic support in
Berkshire, Buckinghamshire & Surrey www.theannexproject.com/inset-days/	 Key connectors Building attachments Working attachments Delivered centrally and in schools 	schools Support for families
Braveheart Education England, Wales & Scotland <u>www.bravehearteducation.co.uk</u>	 Introduction to attachment & trauma Advanced attachment & trauma Key adult training Delivered centrally, in schools & online 	 Observation & consultation regarding individual children Telephone support Resources
Chadsgrove Teaching School	Attachment & loss	
West Midlands	Delivered centrally	
www.chadsgrove.worcs.sch.uk		
Child Psychology Service Staffordshire and surrounding area www.thechildpsychologyservice.co.uk www.pafca.co.uk	 Empathic behaviour management Delivered in schools 	Therapeutic workAssessmentConsultation
Chroma Nationwide <u>wearechroma.com/education/</u>	 Therapeutic consultative supervision package help identify, assess and support students with early-trauma or attachment-based issues Delivered in schools 	 Individual and group therapeutic support for children
Chrysalis Consortium Yorkshire, Derbyshire & Nottinghamshire <u>www.chrysalisconsortium.co.uk</u>	 Trauma & attachment difficulties in education Attachment & trauma in a college setting 	• Therapeutic support for families
Helen Oakwater Worldwide <u>www.helenoakwater.com</u>	 Trauma triggered behaviour: What, why and how to manage Delivered centrally and in schools 	 Other services for schools column: Individual and group therapeutic support for children
Hope Attachment Training & Therapeutic Services UK-wide www.hopeattach.co.uk	 Beyond attachment theory: Understanding the whole child Delivered centrally & in schools 	 Therapeutic support for families Toolkit for staff Consultation regarding individual children

Organisation	Training	Other services for schools
Inspired Foundations UK-wide <u>www.inspiredfoundations.co.uk</u>	 Attachment & trauma: supporting looked after, adopted & vulnerable children Advanced skills courses Delivered centrally and in schools 	 Mentoring service for vulnerable children Consultation & observation regarding individual children
Integrate Families Yorkshire, North West, Teeside & East Anglia <u>www.integratefamilies.co.uk</u>	 Needs of adopted children Trauma & dissociation Delivered in schools 	 Guidance & support regarding individual children
Jennifer Nock UK & Ireland <u>www.jennifernocktandc.co.uk</u>	 Children & young people who have complex trauma histories, including those who are adopted, in care or at risk Meeting the needs of the four in ten Delivered centrally 	 Training for senior leadership focused on achieving the attachment-friendly school award Direct work with key workers Consultation & observation for individual pupils

3. Children & Social Work Act 2017

The Children & Social Work Act significantly enhances support for previously looked after children i.e. children who have left care via adoption, special guardianship or child arrangements orders. The Act places a new duty on local authorities and schools to promote their educational achievement by:

Requiring schools in England to appoint a designated officer for previously looked after children:

The Governing Body must designate a member of staff at the school as having responsibility for promoting the educational achievement of previously looked after children. They must ensure that the designated person undertakes appropriate training and has regard to guidance issued by the Secretary of State. The designated officer's enhanced knowledge and understanding of the needs of these vulnerable children and how these needs can most appropriately be met will help other school staff ensure that they deploy strategies and create an environment which effectively supports the child. The officer could also help the school to make effective use of the pupil premium plus, and be a point of contact for parents and guardians.

Requiring local authorities to provide advice and information for previously looked after children:

Requiring local authorities to make advice and information available for the purposes of promoting the educational achievement of previously looked after children who are educated in their authority. This advice and information should be available to parents and guardians, and to the designated officer at the child's school. The Act states that the local authority may appoint a person/people to discharge this responsibility; in some local authorities, the virtual head or virtual school may take this role.

1. Mental health and social care

Some adopted or permanently placed children and their families may at times need additional support from mental health services and from social care.

Some adoptive families may still receive support from their social worker, but many do not have contact with social care after their children are adopted and permanently placed. Every adoptive and special guardianship family has the right to request an assessment of their adoption support needs from the local authority's adoption service. In the first three years after the adoption order is granted, this responsibility lies with the local authority which placed the child; this may not be local to the family. After this, it becomes the responsibility of the local authority in which the adoptive family resides. Sometimes adoption services have access to educational psychologists and other LA education support services.

In some NHS trusts, the specialist CAMHS service for looked after children is also available to children who have left care into adoption. There are also some specialist services for looked after and adopted children, such as the South London and Maudsley's adoption and fostering service.



2. Adoption support fund



The Adoption Support Fund (ASF) is available to fund therapeutic services for adopted children and their families and is accessible from the moment a child is placed with their new family prior to the issuing of the adoption order. The Fund is for children adopted from care and children adopted from overseas. The Fund is also available to special guardianship families once the special guardianship order is issued. Applications to the ASF can only be made by the local authority adoption service, and will be informed by an assessment of the family's needs. Families can request an assessment at any time.

The ASF does not pay for education support or training for staff. It may fund therapeutic work

which results in: improved relationships with peers, teachers and school staff; improved engagement with learning; improved emotion regulation; improved behaviour management; improved confidence; and improved ability to enjoy a positive family life and social relationships.

Therapeutic help which addresses adoption issues can be provided by local authorities, independent providers, Adoption Support Agencies (ASAs) and NHS providers. Service providers must be OFSTED registered or delivered through the local authority making the application. The DfE has said that this does not prevent school-based counsellors and therapists from providing emotional support to adopted children and young people. More information about the ASF be found at http://www.first4adoption.org.uk/adoption-support-fund/. ASAs can be identified using the search function on the Ofsted website, or via the directory of the Consortium for Adoption Support Agencies: http://www.casa-uk.org/directory/

3. Voluntary Sector

The voluntary sector provides a range of advice, support, services and training for adoptive families. PAC-UK's daily advice line is free at the point of access for all callers. Adoption UK's helpline is available to members of Adoption UK.



PAC-UK Advice Line: http://www.pac-uk.org/our-service/



Adoption UK Helpline: http://www.adoptionuk.org/one-one-support/helpline



This guide has been an introduction to attachment, trauma, loss, and their enduring impact on adopted children and their families. Alongside this guide, we have provided a range of free resources:

- A one page summary to share with all staff
- A set of case studies to bring the ideas in this guide to life
- A set of strategy cards for easy access during the school day
- A poster with adopted young people's views, for display in staff rooms.

We hope you feel inspired to work with adoptive families to make sense of the challenges their children may be facing in your school. Your understanding, empathy and skilled support is vital to their happiness and success. Thank you for your efforts.

Jargon busting

Adoption order

This is the legal order which gives adoptive parents full, permanent parental rights for their children. Children must be living with their adoptive families for at least ten weeks before the family can apply for the adoption order. During this time, the child is still considered to be looked after by the local authority. This means that they usually have to use their birth surnames, and have regular looked after child reviews and personal education plan reviews.

Adoption service or team

These are teams of social workers in the local authority or voluntary agencies. They assess prospective adopters, and match children with adoptive families. Some LAs have a separate adoption support team, whereas in others the adoption service also provides adoption support.

Adoption support fund (ASF)

In May 2015 the DfE launched the ASF to fund much needed therapeutic services for children adopted from care. The ASF has now been extended to include children adopted from overseas and children who have left care through a special guardianship order. Applications to the fund can only be made by local authority following an assessment of the family's adoption support needs.

Attachment difficulties

Children whose early care has been harmful, unpredictable or neglectful will often experience difficulties forming close, trusting relationships with others. Their initial compromised attachment experience also has a profound impact on how children conceptualise themselves, and how they view the world. In the UK it is more usual to describe children as having 'attachment difficulties' (unless they have been formally diagnosed by a child psychiatrist as having 'reactive attachment disorder') rather than 'attachment disorder.'

Birth parent/family

The families into which children are born are referred to as their birth families; this is a more neutral term than problematic phrases such as 'real family' and 'natural family.'

Child Arrangements Order

Some children who were looked after by the local authority leave care through a Child Arrangements Order (formally known as a Residence Order). These children also attract all the education related entitlements such as the pupil premium plus.

Contact

Contact between adoptive families and members of the child's birth family may take place faceto-face or through written correspondence known as 'letterbox.' Sometimes this is supervised by social workers. Adopted and permanently placed children may also have contact with their former foster carers. The frequency and form of contact is usually formally agreed by all parties involved.

DDP/developmental dyadic psychotherapy

DDP is a family-based therapeutic approach which helps children learn to trust adults. It takes place with one child and the parent/s at any one time and aims to strengthen bonds and build trust between the child and parent/s. This is done by actively, curiously and empathically engaging with the child's current difficulties as well their early, adverse life experiences and making links between these; the parents are present throughout and helped to better understand and support their child.

Designated Officer for previously looked after children

The Children & Social Work Act 2017 requires schools to appoint a designated member of school staff with responsibility for promoting the educational achievement of previously looked after children (i.e. those who have left care via adoption, special guardianship or child arrangements orders). The Designated Officer must have appropriate training.

Developmental trauma

Developmental trauma is a way of understanding the complex impact of multiple and chronic forms of early life interpersonal trauma which take place in the child's primary caregiving environment. Such trauma is believed to affect multiple aspects of children's development, including their physiological, cognitive, emotional, behavioural and relational development. Developmental trauma is not yet a standardized diagnosis.

Disruption

This term is used to describe the breakdown of an adoption or of an adoptive family placement that was not yet legalised. When disruption follows a legalized adoption, the adoptive parent remains the legal parent, but the child returns to the care of the local authority. Recent research (Beyond the Adoption Order, Selwyn & Wijedasa & Meakings, 2014) found that only around 3% of adoptive families disrupt after obtaining the adoption order, but a quarter of families experience major challenges caring for children with multiple and overlapping difficulties. This research highlighted the 'commitment and tenacity' of adoptive parents in ensuring that so few adopted children return to care.

Emotion regulation difficulties

Emotion regulation is the set of skills involved in recognising, managing and recovering from strong or difficult feelings. When emotion regulation skills are not well developed, a child (or adult) can be very vulnerable to feelings, especially difficult and intense ones. They can become very dysregulated or cut-off from feelings, and find it difficult to recover. Dysregulation can manifest itself in angry outbursts or behavior outbursts such as destroying or throwing objects, verbal/physical aggression towards the self or others, and self harm or suicide ideation and attempts.

Executive functioning difficulties

Executive functioning refers to a set of higher order skills which allows the brain to organize and act on information in a coordinated way. This includes the skills of planning, organizing, initiating tasks, inhibiting our impulses, and holding information in mind.

Looked after children

Looked after children are those who are currently in the care of the local authority. For some children the local authority has a full care order under Section 31; for these children, parental

responsibility is shared between the parents and the LA. Some other looked after children are voluntarily 'accommodated' by the LA under Section 20; for these children, the parent retains full parental responsibility.

Life story work

This is the process of helping children to understand their past, present and future. Most adopted and permanently placed children have a life story book, with photographs and the stories of their lives. Adopted and permanently placed children should also receive a 'later life letter' from the adoption service, which provides details of the decision to place the child for adoption. For some children there is a paucity of information about their early lives (e.g. the identity of a birth parent is unknown; or the exact nature of their experiences with their birth family could not be established).

Family therapy

In the UK, most approaches to working with adopted and permanently placed children involve the family, whereby very often one child at a time together with the parent/s attend therapy sessions. This is not because the adoptive parents are thought to be causing the difficulties, but because the goal is to strengthen the relationship and security between each child and the parent/s.

Foetal alcohol spectrum disorders

This is an umbrella term referring to the group of conditions which can occur in children who have been exposed to alcohol in the womb. Foetal alcohol exposure can have a pervasive impact on children's lifelong development, and can result in significant difficulties in school.

PLACE

PLACE is a way of thinking, feeling and communicating with children to help them to feel important, loved and safe. It is based on how parents connect with young babies: Playfulness; Love; Acceptance; Curiosity; Empathy. The PLACE approach can be used by school staff.

Permanency

Some children in care need another permanent family because they cannot return home. This is most commonly reached through adoption, special guardianship, or child arrangements orders (formerly residence orders). These families are all 'permanent' in sense that the parent or guardian has legal responsibility for the child until adulthood.

Personal Education Plan

PEPs are school-based meetings to plan how to support the education of children in care. They are statutory for children in care, and so will take place for children living with adoptive families, up to the granting of the adoption order. After the adoption order the PEP is not statutory, but it can be a very useful forum for monitoring children's progress and planning support, if the adoptive parents wish it.

Post traumatic stress disorder

Children can develop PTSD following exposure to one or more traumatic events; these may include emotional, physical or sexual abuse, accidents and natural disasters, and the loss of loved ones. Children with PTSD may re-experience their trauma through flashbacks or nightmares. They also may have a range of physical and emotional difficulties, including hyperarousal and hypervigilance.

Priority school admission

All children who have left care through an adoption, special guardianship or child arrangements order (formally known as a residence order) have the same priority admission to school as children currently in care. The admissions team at each local authority can advise parents on how to access this entitlement.

Pupil premium plus

Looked after children and children who were previously looked after attract the pupil premium plus. Children who were previously looked after are children adopted from care or who have left care through a special guardianship or a child arrangements order (formally known as a residence order). The funding is an acknowledgement of the fact that this group of children is likely to need extra support at points in their school journeys because of the enduring impact of their early experiences. PAC-UK produces a free guide about effective spending of pupil premium plus.

Special guardianship

Special guardianship was introduced in 2005 as a way of providing children with a permanent family without severing their legal ties with their birth families. Special guardians may be family members, family friends, or foster carers. The child's special guardian has parental responsibility, which can be exercised to the exclusion of any other person with parental responsibility. Sometimes long-term foster carers become special guardians in order to provide children with more permanence and security.

Therapeutic parenting

Adoptive parents are asked to parent their children therapeutically. This involves providing an environment which is high in nurture and high in structure. Parents try continually to be attuned and empathically responsive to their children's challenging behaviour. Behaviour is thought about in terms of what it might be communicating of the child's thoughts, feelings and beliefs about themselves and the world around them, rather than as something that needs to be punished or 'reasoned out of'.

Theraplay

Theraplay is a form of focused interactive therapy involving movement, touch, eye contact. It is designed to enhance positive interaction and ultimately attachments between the adult and the child. Primarily used for parents and children, it can also be used for school staff and children, with support from an appropriately qualified therapist.

Tracing and reunion

From the age of 18, adopted children have the right to find out information about their birth families and their early lives. The local authority will provide support to help adopted people read their files. The government maintains an adoption contact register, where both adopted people and birth relatives can add their details, or register their wish not to be contacted. The development of social media has meant that some adopted young people trace or are traced by their birth relatives before they are adults.

Virtual School Head

Every local authority must have a Virtual School Head (VSH) whose role is to oversee the educational attainment and wellbeing of children who are currently looked after. The Children & Social Work Act 2017 requires every local authority to provide advice and information about previously looked after children to parents, guardians and schools. In some local authorities, this duty will be the responsibility of the virtual school head or virtual school.

This guide and suite of materials is funded by the Department for Education. It is written by PAC-UK, a specialist adoption support agency. The work of PAC-UK's Education Service has also been supported by the Big Lottery and the Rayne Foundation.

For full information and support with becoming an adoption friendly school, our guide and toolkit *Becoming an adoption friendly school: How to meet the needs of children who have experienced trauma and loss* (Gore Langton & Boy, 2017) is available from Jessica Kingsley Publishers.

