Getting it right for every child

Schools’ guide to working with adopted children and their families

adoptionuk

ar gyfer pob teulu sy’n mabwysiadu for every adoptive family

Llywodraeth Cymru Welsh Government
Introduction

Foreword

I am delighted to see the production of this guide. It contains much good advice, and practical suggestions, for teachers and other staff in schools so that they can better help those adopted children who need it. Not all adopted children need extra help in school, but our discussions with adopted children, young people and their parents show how much better it is when schools and other education services ‘get’ adoption. This can mean many things from being generally sensitive in home/family topic work, to agreeing to individual behaviour management plans for small numbers of children to provide them with consistency across school and home.

Over time the National Adoption Service aims to promote ‘adoption aware’ services across Wales; this guide will help schools to be on the front foot in helping to achieve this. Most importantly it will help more adopted children achieve good outcomes.

I hope you find it useful.

Suzanne Griffiths
Director of Operations – National Adoption Service for Wales

This booklet has been commissioned from Adoption UK by the Welsh Government. It is written by two adoptive parents with contributions from other adopters, adopted children, teachers and those responsible for looked after and adopted children in local authorities.

The content is also informed by recommendations from internationally renowned experts on trauma and attachment. This short introduction to the topic offers links to more detailed information throughout. There are currently around 3,000 adopted children of school age in Wales and approximately 5,000 looked after children. All will have experienced similar difficulties in their early years which led to them being taken into the care system. The impact of those early negative experiences lasts for many years, even after the child is settled in a permanent family. Such early trauma affects the way that children view and interact with the world. Adoptive parents and adopted children tell us that experiences at school are their single biggest concern.

The purpose of this guidance is to help schools and parents understand the educational needs of adopted children. Although the focus of this advice is around the challenges that adopted children may face, the strategies in the document describe good practice for ALL children who may experience attachment issues or exhibit behavioural problems.

We know that children in the looked after system are at risk of poor educational progress compared to other children. There is no data on educational attainment for adopted children in Wales at present, but the Looked After Education strategy makes a commitment to explore how that data can be identified.

Raising the ambitions and educational attainment of children who are looked after in Wales
Support for adopted children in Wales

The GwE consortia covers the six North Wales local authorities of Ynys Mon Gwynedd, Conwy, Flintshire, Denbighshire and Wrexham.
www.gwegogledd.cymru/

The EAS consortia covers the five local authorities of Blaenau Gwent, Caerphilly, Newport, Torfaen and Monmouthshire.
www.sewales.org.uk

ERW is the consortia which covers the six authorities of Carmarthenshire, Powys, Ceredigion, Pembrokeshire, Swansea and Neath Port Talbot.
www.erw.wales/about-us

Central South Consortia covers the five authorities of Cardiff, Rhondda Cynon Taff, Bridgend, Merthyr and the Vale of Glamorgan.
www.cscjes.org.uk/

Pupil Deprivation Grant (PDG)

In April 2015, the Welsh Government revised the management arrangements for the Pupil Deprivation Grant (PDG). This was in recognition of the fact that while the legal status of the child might have changed, which would result in greater home stability, the experiences of the child remain in place. It is reasonable to assume that support in education will continue to be required. To find out what support is available for adopted children in your area, contact your local education consortia.

Other adoption support organisations

The National Adoption Service (NAS) was established in 2014. It brings together existing local government services into a three tier system to coordinate and deliver adoption services in a different way. The NAS is a network of interdependent services including local government and the voluntary sector.
www.adoptcymru.com

Adoption UK Wales Helpline 029 2060 6200
www.adoptionuk.org

We are the leading charity providing a voice, awareness and understanding for those parenting or supporting children who cannot live with their birth parents. Over 11,000 members provide a strong, supportive community and the largest voice of adopters in the UK.
Neuroscience tells us that experiences in the womb and in early infancy affect how our brain develops. The brain is a highly complex organ, formed and developed through life in the womb and also the first years of life. The brain is fully formed at birth but the internal ‘wiring connections’ continue to develop through the baby’s early experiences of nurture, interactions and conversations. Some important brain functions that affect long term emotional interactions include – The Brain Stem, The Limbic System, The Neo-Cortex and sensory processing and integration functions.

(Let’s Learn Together - England published by Adoption UK 2015)
The Sensory Integration function of the brain takes in information from all the sensory organs of the eyes, skin, ears, nose and mouth, and use it to make sense of and interpret the world. Parts of this system may function less well if children have been exposed to alcohol or drugs in the womb or to experiences of early stress or abuse.

- Difficulties with sensory integration can make it hard for a child to understand conversations, cooperate with verbal instructions, sit still, concentrate on lessons, write, or cope with noisy places such as dinner halls, playgrounds or swimming pools, without a trusted adult close by.

Children can learn to overcome difficulties and establish new patterns of response and behaviour, if their difficulties are identified and managed by a supportive and empathic adult explaining and reassuring at all stages. This can be undertaken by any trusted adult and only occasionally needs specialist professional help.

- The brain continues to develop and with the right parenting and teaching it can begin to recondition over time, and the child become able to engage in more positive interactions with confidence and self esteem.

The Brain Stem is also called the ‘primitive brain or the reptilian brain’, and controls basic functions like breathing, heart rate and blood pressure. These physiological functions are also affected in states of fear and rage, and patterns of physiological response can develop that affect the child’s self-regulation. This may result in a baby who is easily agitated, distressed by a noisy environment, hard to soothe, and difficult to get off to sleep.

- For instance, a child who has lived in an environment where there is frequent aggression and shouting may develop a pattern of unconscious physiological response to stress that is sparked by loud noises.

The Limbic System is the emotional centre of the brain. It becomes conditioned by experiences in the first years of life. Children experiencing nurturing and ordered environments are more likely to be able to develop and learn effectively because their limbic system is conditioned for love and security. Conversely, repeated or prolonged experience of a hostile environment conditions the limbic system and amygdala to respond with a ‘fight or flight’ type response which is seen in the child as reactions of fear, aggression, anxiety and poor impulse control.

- This means that any child with adverse early experiences is liable to experience a panic type state at the slightest hint of threat.

The Neo-Cortex is the part of the brain responsible for thinking, remembering and processing information, and continues to develop throughout childhood and well into adulthood. It integrates information from all parts of the brain, including from the brain stem and the limbic system, and is capable of learning to override old patterns of interactions and responses, to establish new ones. The neo-cortex is can be trained to allow the child to choose a reasoned response, increase self regulation and overcome the more primitive responses engendered by early adverse experiences. The child can be helped to learn to modify their response to external stimuli, and better understand and differentiate true from perceived threats. Once they are able to self regulate, they can recognise ‘good’ experiences, such as laughter or fireworks, and respond securely to them.

They are then also able to recognise ‘bad’ experiences such as danger from traffic or strangers, and develop a sense of safety appropriate to the situation.

- A child who has experienced early trauma may find it more difficult to engage the thinking part of their brain when the more primitive parts of the brain are over active, and often needs more prolonged, focused support to ‘relearn’ patterns of behaviour.

How the brain is shaped
Adopted children may be suffering from developmental trauma and the impact of neglect but the detail of their early experiences may not be known in full at the time of placement. They may have an increased family risk of developing inheritable learning difficulties, or may be at greater risk of conditions caused by substance exposure in the womb.

Health, education and social services have a duty to work together to ensure that any specific conditions affecting the child are identified and offered suitable management. A range of developmental difficulties (see box below) is seen more frequently in adopted children, but these are still relatively unusual. If present, they need specific assessment and treatment, but they will not affect the majority of adopted children.

Supporting children with additional needs in formal education

A child who has experienced developmental trauma may show challenging behaviour in the formal school setting. Education settings need to be aware of and understand the potential impact of the child's experiences in their early years. Careful individual assessment within the education setting is important to ensure the management plan helps the child to feel safe and settled to learn.

A child may also have a specific condition, and the school support and special educational needs system should be used to evaluate and address any additional learning needs the child may have. Additional support is available as appropriate through Individual Educational or Behaviour Plans, or a Statement of Educational Needs, which should take an holistic approach to meeting the child's needs and helping them attain their full potential.

Schools, their Special Educational Needs Co-ordinators and other professionals such as Educational Psychologists, Paediatricians and Occupational Therapists play an important role in helping to support adoptive parents develop strategies and ways of working that meet the emotional, behavioural and learning needs of their child.

Changes to the legal framework for supporting children in Wales who have special educational needs are currently being considered with new proposed legislation and code of practice. http://gov.wales/consultations/education/draft-aln-and-education-tribunal-wales-bill/?lang=en

SNAP Cymru can provide up to date information and guidance about the existing and new provision. http://www.snapcymru.org/help-for-families/ aln-reform

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**Autistic Spectrum Disorder**
www.autism.org.uk

**Attention Deficit Hyperactivity Disorder**
www.youngminds.org.uk

**Fetal Alcohol Syndrome**
www.nofas-uk.org

**Sensory Processing Disorder**
www.sensory-processing-disorder.com

**Oppositional Defiance Disorder**
www.lanc.org.uk/related-conditions/oppositional-defiant-disorder

**Pathological Demand Avoidance**
www.pdasociety.org.uk
Understanding children and stress

The child who has experienced early trauma can show a very rapid response to any stress, accompanied by the characteristic ‘fight or flight’ response.

Stress can be triggered by apparently insignificant events for example, a smell which reminds them of an early traumatic experience, a noise, a raised voice, an accidental touch or someone who looks or sounds like someone they have been frightened by in the past. Stressed children appear anxious and volatile, and have great difficulty controlling their impulses. They may suddenly become distressed, angry, aggressive, panicky or frozen in response to a situation which has triggered them. These children will very rarely be able to identify or name the association which has led to the response and it might appear to those witnessing it that there was no lead up or incident beforehand which could explain their reaction. However, careful observation of the child, especially if there are repeated episodes of distress, may identify a trigger which can then be avoided or managed. Parents may be able to suggest likely triggers which is why good school/home communication is essential. The more that the adults who are around the child ‘get’ that child then the safer the child will feel.

What happens in education?
Starting school is stressful for all children, but this stress is likely to be more intense or prolonged for any child without a secure attachment to a parent. The new experience of starting school and the absence of a parent to soothe and help the child self-regulate their responses can mean they appear anxious, fearful and in a state of high alert in school. This can make it very hard for the child to settle, deal with new experiences, absorb new information, develop friendships with their peers and begin to learn.

What are the signs of stress?
The child’s anxiety may manifest itself through fidgeting, constant talking or asking questions, calling out, singing or making noises, aggression, hiding or running away, destroying toys and books. This distress behaviour requires a calm, reassuring and soothing response from the adult. The child may develop other ways to self soothe which could include rocking, biting, chewing, head banging or scratching or masturbating. The behaviours vary widely, but it is important to recognise the simple fact that the child is displaying distress and needs to be comforted and distracted from their distress in a way that is effective for them.
How can parents help?

Parents can help by sharing strategies or transitional objects (such as a blanket or doll) with the classroom adult that can be used when needed. Never underestimate how stressed or anxious a child might be feeling. The behaviour of the adults determines how safe a classroom feels to a child: a teacher might think they only raise their voice occasionally but it can feel to a child that they are always shouting. Teachers who are mindful of the child’s additional sensitivities can help create a climate of safety to build the child’s resilience. Working alongside parents and sharing information about key triggers of stress, and effective soothing mechanisms, is key.

Resources

There are many books, organisations and training courses focusing on strategies for children who have had early trauma and neglect. The links will take you to some of them:

Video

ReMoved
A short video on the impact of trauma http://www.adoptionuk.org/resources/education

Books

Inside I’m Hurting: Practical Strategies for Supporting Children with Attachment Difficulties in School Louise Bombèr
Settling Troubled Pupils to Learn: Why Relationships Matter in School Louise Bombèr and Dan Hughes
What About Me?: Inclusive Strategies to Support Pupils with Attachment Difficulties Make it Through the School Day Louise Bombèr
Attachment in the Classroom: The links between children’s early experience, emotional well-being and performance in school: A Practical Guide for Schools Dr Heather Geddes

Courses

Life in the Classroom – Adoption UK www.adoptionuk.org
Safebase for Schools – After Adoption www.afteradoption.org.uk/information-professionals/safebase-schools

Useful links
http://attachmentawareschools.com
http://theyellowkite.co.uk

How can this impact on teaching practitioners?

It is important to remember that teaching practitioners working closely with a child who has experienced high levels of stress and anxiety can themselves feel the impact of these through secondary trauma. They may start experiencing the same stress responses and feel as if they are absorbing the child’s anxiety. Education settings should ensure teaching practitioners are provided with adequate support and training. If this does not happen practitioners may find it more difficult to meet the child’s needs.

Cerys’ Story

My daughter had only been placed with us for 8 months before she started full time school. She would cling to me and be prized off me by the teachers. In school they would say she was fine, quiet but no trouble. At home she was waking three times a night, wetting and soiling herself and sucking and chewing her hair and her clothes. Her teacher was very empathetic and when things didn’t improve she suggested that she only do a couple of hours a day and that she came in later than the other children. She started taking one of her cuddly toys in with her and was allocated an LSA to have 1:1 time with every day. The school allowed us to keep her off school that first year for events that might be traumatic such as Mother’s Day and birthdays and slowly we increased the time she was in school as her attachment to us grew. She still needs 1:1 and is in the Nurture Group at school which really helps but the school’s ongoing flexibility and openness to working with us and to doing things differently has really helped.
Using P.L.A.C.E to help children relax

When the stress has passed and the child is calm, the incident can be discussed with the child. First mention all the times they have reacted well, and then discover any reason for the difficult behaviour. This will help the child to recognise and start to self-regulate the feelings behind their behaviour. For the child and adults to understand where the feelings and behaviour come from is the most effective remedy for unwanted behaviour.

Daniel Hughes – a leading figure in attachment therapy - talks about the therapeutic attitude needed when working with a traumatised child. He uses the acronym PLACE, meaning:

**Playful** – a relaxed and playful style is more effective in influencing behaviour than rewards, sanctions or anger-based discipline. Playfulness (not sarcasm) engages children. Non-verbal communication such as soft eye contact and facial expressions, and maintaining a happy classroom environment will help.

**Liking** – showing the child that you like them by staying calm even when they misbehave. Do not reject the child even if they reject you. Find something valuable about the child to comment on and reconnect quickly after absences or disciplining.

**Accepting** – understanding that traumatised children often ‘can’t do’ rather than ‘won’t do’ some things that their peers find easy is helpful. Their behaviour will be telling you something about how they are feeling – probably that they are feeling very stressed or scared.

**Curious** – being curious rather than angry about why children act in certain ways can help them to change. They may not know the answer themselves and direct questioning is unlikely to get very far but try an educated guess such as ‘I wonder if you are worrying about the school trip on Friday?’ or ‘I wonder if you find the noise level in the dining room hard to manage and that is why you sometimes find it hard to behave there?’ It gives the message that you understand that they find some things very stressful and you are keen to help them through the difficulty.

**Empathy** – is the most important quality to have when working with children who have had early trauma. Empathy allows the child to feel their feelings and encourages the release of the grief, fear and rage behind the emotional and behavioural problems. ‘I know these spellings are hard for you to remember’, ‘Your knee is really red, I bet that hurts’, ‘I know you feel sad when you have to leave your mum in the mornings’ etc. are all examples of empathetic statements. It is very important that they are genuine.

The Vital Home-School Link
Teachers and parents using PLACE together can be enormously supportive for children whose early trauma exhibits itself in challenging behaviour. Parent - teacher communication through regular meetings, email contact, and/or a home school comment book can keep everyone on the 'same page'.
Support strategies

Children in the looked after system are more likely to have a statement of special educational needs than other children and this may also be true for adopted children.

**Keeping stress low**

It is a valuable strategy to avoid stress for the child by maintaining an atmosphere of order and calm, with clear signals and boundaries for individual activity such as free play. Even with strategies that keep low stress levels in the classroom a child will sometimes feel overwhelmed and will need to have specific actions to help them calm down. For example: a quiet space – pop up tent with cushions, a ‘calm box’ with a few favourite objects from home or music to listen to or a specific person to go to.

**Think Toddler**

The social and emotional stage of the child who has experienced developmental trauma is often much lower than their chronological age and so they may respond better to teaching techniques appropriate to a younger child. More play based learning, shorter activities where they are clear about how much they will need to do in one go, not overwhelmed with too many steps at once.

**When free-time is scary**

Unstructured times such as play times and lunch times may be stressful for these children because they may find social situations more difficult to cope with and may not have close friends that they can be with during those times. Buddying with classroom peers can help.

Similarly, the things which other children may view as exciting and a treat, like trips out, free time to play or watch a film or TV programme may create anxiety. The child may need additional reassurance and explanation about what is happening and what to expect to help them maintain their self-regulation.

**Transitions can be tricky**

The child may need access to an adult for support at the transition points in the day. Someone who can understand what they find difficult and help them to get regulated and prepared for the next phase of the day.

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**Kelly’s Story**

Our daughter Kelly was placed for adoption at the age of two having been in foster care since she was removed from her birth family, following numerous incidents of neglect and physical abuse. When she moved to secondary school from her small primary school things started to go wrong: it was a very large school and she found it noisy, busy, crowded and confusing. She had so many teachers, so many different classrooms and so many new people to get used to she spent her time feeling stressed and on high alert. After a few weeks she started running out of school within a few minutes of arriving as she couldn’t cope. I contacted the school and Kelly’s form teacher quickly called a meeting which we all attended. I told them about Kelly’s start and that it had become clear that the environment was triggering Kelly’s trauma responses and she was feeling very unsafe. The school took advice from their SENCO and the local authority Pupil Inclusion team. They also contacted Kelly’s primary school to find out what strategies had worked there and developed a plan with us. Kelly would be paired up with an older child as a buddy and would meet them regularly at break times for support. The SENCO designed a map for each day’s lessons. Kelly now feels more in control of the environment around her and she is therefore more able to regulate her emotions and be in a calm enough state to learn. She still finds it a struggle and runs some times but she now knows people understand.

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**The Plan**

- She is allowed to leave all lessons 5 minutes before the end so that she can find her next classroom or get to the canteen before the corridors are busy.
- She has a fixed seat chosen by her for each of her lessons and has a 10 minute time out card to use if she is getting overwhelmed.
- She had a safe space created for her in the small room outside the SENCO’s office where she is able to listen to music on headphones and often eats her lunch there.
- She is able to sit at the back with a friend for assemblies and concerts.
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<thead>
<tr>
<th>Behaviour the child might present</th>
<th>What might be behind the behaviour</th>
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<tr>
<td>Fidgeting, turning around, poor concentration</td>
<td>I need to be hyper vigilant, to scan the room for danger, I dare not relax: I need to keep myself safe.</td>
<td>Seat the child in a position where they have their back to a wall and can see the room, especially the door.</td>
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<td>I need to move constantly to focus: I can’t concentrate unless I am moving.</td>
<td>Let them use a fiddle toy and/or a wobble cushion so that their sensory needs are met.</td>
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<td>Don’t expect them to sit still for lengthy periods – be flexible, allow them to stand at the back for assembly etc.</td>
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<td>Provide short activity breaks involving jumping or hanging from monkey bars or brain breaks (Brain Breaks) during the school day.</td>
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<td>Demanding teacher attention all the time</td>
<td>I need you to remember I am here and not to leave me on my own: even if you get annoyed with me you are still giving me the attention I need.</td>
<td>Seat them as close to the teacher as possible.</td>
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<td></td>
<td>I need you here to keep me safe.</td>
<td>Teacher to check in with them regularly and show them you are thinking of them and holding them in mind (thumbs up, smiles, verbal checks), give them jobs to do.</td>
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<td>I need to know you like me</td>
<td>If teacher is leaving the classroom tell them where you are going and reassure them that you’ll be back, give them something to look after for you.</td>
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<td>Show you like them by commenting positively on them, saying how pleased you are they are back if they have been out etc.</td>
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<tr>
<td>Talking all the time, shouting out, dominating discussions, asking trivial questions.</td>
<td>I feel safer doing all the talking: I need to feel in control.</td>
<td>Provide opportunities for them to talk preferably when helping the teacher with a job.</td>
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<td>If I keep talking you won’t forget I am here and I will know I am still here.</td>
<td>Acknowledge them and let them know when they will be able to speak.</td>
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<td></td>
<td>I don’t know how to communicate.</td>
<td>Keep checking in with them in non-verbal ways.</td>
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<td>Gets angry/disruptive/upset at playtimes</td>
<td>Structure and routine make me feel safer: all this running around, noise and chaos makes me very stressed and I go into fight/flight mode. I want to play but it’s too much and I don’t understand the rules.</td>
<td>Offer 1:1 support at unstructured times and supervise games.</td>
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<td>Provide a safe space or calm area where they can go with a trusted adult to regulate: this could be a pop up tent, cushions in the corner of a room or a blanket over a table to create a den.</td>
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<td>Offer the support of an older child as a buddy in the playground.</td>
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## Decoding and responding to behaviours

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<tr>
<td>Ignoring instructions</td>
<td>I've got too much going on just keeping myself safe to focus on what you are saying. I try to listen and understand but can only take in one thing at a time as there is too much going on in my head.</td>
<td>Ensure the child sits near the teacher or has an Learning Support Assistant (LSA) with them to calm anxiety. Deliver instructions one at a time in very simple language e.g. instead of “Can you all get your books out now please” say “Books out please/tidy up/complete first sum etc” and check understanding afterwards. Use visual prompt cards for routine instructions. Give either/or choices.</td>
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<td>Hostile when frustrated, having difficulty with work or if asked to do something in front of others.</td>
<td>I know I won’t be able to do this and then you’ll find out how useless I am. Everyone will know I am bad.</td>
<td>Don’t force the issue, acknowledge their anxiety: “I know this is hard”, “Let’s see if we can work this out together”: let them know you are alongside them. Make a ‘Success Book’ where all successes are recorded and give immediate rewards where possible. Notice out loud positive behaviours: “You were very kind to Alfie when he fell over just now; you helped him to cheer up when you made a funny face”</td>
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<td>Trying to create chaos and mayhem</td>
<td>It feels chaotic inside so it feels safer if it’s like that outside too.</td>
<td>Reduce anxiety about what is happening by using visual timetables and planners and minimising change. Focus on reducing anxiety (and their chaos inside) rather than controlling the behaviour. Create a calm box for the child to use when they start to escalate: it could contain a transitional object from home, something soft that they like to touch which smells of something they like, a game which they find calming etc.</td>
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<td>Hits out or causes a disturbance when queuing/in a large group</td>
<td>I feel really stressed out and trapped with all these people around me: I have to escape to safety.</td>
<td>Develop strategies to minimise the need to queue: let them in as soon as break finishes, send them to lunch first, allow them to sit at the back with a friend for school concerts, assembly etc.</td>
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<td>Withdrawn in class, unable to make friends</td>
<td>I have to rely on myself and no-one else. I respond to frightening situations by fleeing or freezing up.</td>
<td>Have a meet and greet with a trusted adult every day. Participation in a Nurture Group (Nurture Groups Guidance) Provide a mentor/buddy for the child to facilitate them getting used to talking and playing with others. Include them in small group work on social skills.</td>
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<td>Bullies other vulnerable children, is aggressive to friends</td>
<td>I have to be the strongest and to feel in control to keep safe. If people don’t do what I want I feel scared. I am so anxious my brain feels like it is going to explode and I hit out.</td>
<td>Wonder out loud about what might be behind the challenging behaviour and respond with empathy e.g. “I’m wondering if you are feeling upset because Jack didn’t choose you to sit next to him at lunchtime: that must be really hard”. If consequences are needed ensure they swiftly follow and that there is an opportunity for reparation (e.g. making a sorry card).</td>
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| Tells lies and lives in a fantasy world | - My life has been so confusing I don’t know what’s fantasy and what’s reality.  
- I don’t think much of myself so I make myself feel better by making up stories about my life. | - Respond with empathy when lies are uncovered and help them to understand why they might do it e.g. “I wonder if because you never met your birth dad you make up stories about what he might be like? That must be hard for you not to know much about him.” |
| Loses or destroys property | - I have lost so much in my life that I have no sense of value of anything.  
- I don’t deserve nice things.  
- I get so full of anger I take it out on things. | - Provide an outlet for the anger safely such as a punch bag and watch out for triggers: “I’m wondering if you’re starting to feel angry; let’s let it out in a safe way on the punch bag/cushion”  
- Ask them to look after an object for you.  
- Allow them to bring in something small from home and find a special place for it in the classroom to enable them to practise keeping things safe.  
- Build on self esteem: focussed praise, create opportunities for success. |
| Gets very disruptive at special times such as Birthdays, Mother’s Day | - Sometimes these occasions make me remember my past too much and I know I should be happy but it makes me so sad too: I think about my birth family and the things I have lost. | - Plan for these events and discuss potential triggers with parents.  
- Provide additional support and ensure a quiet, safe space is available.  
- Provide a narrative for the child if they are struggling: “I’m wondering if you’re finding today hard as you are thinking about your birth mum”. |
| Gets very unsettled at Christmas, school concerts, sports day, non-uniform day, school trips, toys to school day, Comic Relief day end of term etc | - This all feels too unpredictable: I don’t know what to expect and that makes me feel scared. | - Plan carefully for change: ensure the child is involved and supported in these changes and has plenty of time to process them.  
- Write a social story (Social Stories), talk them through what is going to happen and how they might feel.  
- Increase 1:1 if possible.  
- Add changes to their visual timetable. Work with parents to prepare the child and have a plan in case they are unable to cope. |
| Strong reactions to certain smells, textures, tastes, temperatures | - My senses feel like they are overloaded, I am really sensitive to certain things. | - Ask parents about triggers and try and minimise incidence.  
- Be flexible about uniform.  
- Watch out for temperature increases and provide opportunities to cool down. |
**Mikey's Story**

I adopted my son Mikey at the age of four. His adoptive family’s home was his fifth in his short life. He had been removed from his birth family at the age of two; his early life was chaotic, his birth mother was very young and was unable to care for him adequately. He was finally placed in foster care following a serious non-accidental injury. When he started primary school it quickly became apparent that he found it very hard to focus. He got excited and agitated very quickly and often got aggressive. He tried to control the children around him along with the teachers and often ran out of class or tried to climb the school wall. Playtimes were very difficult and often ended in another child being hurt. He would explode with rage and kick or throw whatever was nearest to him. His teacher was newly qualified and felt out of his depth.

I had been very open about his history and so the school invited myself and his play therapist to talk to all the Foundation Stage teachers, LSAs and dinner staff about him, share some of his story and explain why he might behave as he did. This seemed to change everyone’s attitudes and suddenly my son was being treated with empathy rather than discipline. An assessment by the Educational Psychologist quickly followed and an Individual Behaviour Plan was drawn up and shared which included giving Mikey limited choices, always using positive body language and lots of verbal and non-verbal encouragement and using the same language as I use with Mikey at home. He had 1:1 time every day with an LSA focussing on understanding emotions and building self esteem and this LSA was also his go to ‘safe’ person if he needed some support. He was allowed to earn ‘golden free choice time’ if he had a session without an incident and if something did occur the consequence was given immediately and he also made a ‘Sorry’ card as reparation. Mikey was asked to bring a transitional object from home into school to have in his pocket and we created a calm box filled with lots of things that he liked from home including photographs, soft material, smooth stones he had collected and some Lego. This was kept in a pop-up tent that the school provided in the classroom as his safe space. He used a wobble cushion to sit on in the classroom and a space hopper to bounce on in the playground outside of break times if he needed to calm down. Phased returns after school holidays were used to ease transitions back and these were carefully planned both in terms of which teacher would suit his needs best along with which children were the best mix. Mikey still struggles at times and has needed more 1:1 as he gets older but now enjoys school, is a popular child and is meeting many of his targets.

**Using the right words**

Adopted children tell us they would like others to understand more about adoption and they would like people to talk about it as just another way in which family life can be enjoyed alongside step families, single parent families, families with two mums or two dads. However it is important to use the correct words.

- Birth Parents
- Birth Mother
- Birth Father

- Real Mother
- Natural Parents

If in doubt, check with the adoptive parents so that you use the same terms that they do, some people use the term ‘Tummy Mummy’ but others don’t.
The Life in the Classroom workshop looks at the causes of trauma and the subsequent impact of developmental trauma on learning. It examines attachment styles and the Dan Hughes model of PLACE - which emphasises the benefits of a Playful, Loving, Accepting, Curious and Empathetic approach. The day also considers what behaviours we see in schools and how to develop strategies to support children as they learn.

Find out more email wales@adoptionuk.org.uk
Want to learn more?

Read Adoption Now 1, 2 and 3
Our Adoption Now series is an essential resource, full of advice and ideas for prospective adopters, adoptive families and all those who work with adopted children and their families. The magazines feature some of the best-known names within the adoption community and offer a comprehensive guide to everything adoption related.

Become a Adoption UK member
Our flagship bi-monthly magazine, Adoption Today, is available to members and associate members of Adoption UK and covers the latest knowledge, research and strategies alongside real-life articles exploring different aspects of adoption and adoptive parenting.

Essential resources
The Adoption UK shop sells essential books, CDs and DVDs, including many about education while our Lending Library, which is available to members and associate members, has over 900 adoption-related resources.

The Great Behavior Breakdown takes you through the causes and steps necessary to stop some of the most difficult behaviours children exhibit today. Meanwhile Teenagers and Attachment address attachment difficulties in adolescents and illustrate easy to use strategies to support children in school who have suffered trauma and loss.

Our Everything you always wanted to know about adoption series of three CDs highlights the challenges and rewards of parenting adopted children from the care system. From trauma and attachment, to therapeutic parenting and help at school to the adoptees own issues of exploring identity, the series is a comprehensive look at adoption today.

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