

## **Working with the Families and Networks of Severely Traumatized Children in a Therapeutic Residential School**

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### **Abstract**

The options for looked after children – foster and adoptive homes, kinship care and residential units - are often viewed as alternatives; but some children living in these placements also attend residential schools. One such establishment is the Mulberry Bush School in Oxfordshire. The Therapies and Networks Team based at the school has developed new ways of supporting carers in these various placements to help them with the task of parenting severely traumatized children during their breaks from the school and, for some, long after they have left. The article gives a history of the Mulberry Bush and describes its theoretical orientation and the background characteristics of the children who go there. It then explores ways of achieving concordance between the therapeutic work undertaken in the school and life in the child's family, discussing the support that carers need to ensure such congruence is achieved. Working in this way with foster carers has proved to be more difficult than it is with adoptive and birth parents and it is argued that this tension arises from their ambiguous status within professional networks. Finally, plans to assess the impact of this work on the lives of the children are discussed.

**Key words:** therapeutic communities, boarding schools, residential care, foster care, working with children and families

### **Introduction**

The home circumstances of the children attending a therapeutic residential school like the Mulberry Bush will inevitably vary over time. There have been periods when the residents comprised very few adopted children and more who lived with their birth parents, while at other times the balance has

swung the other way. Something that has remained broadly similar, however, is that a majority of the children attending the school live in foster families. These days, three quarters of looked after children in the UK live in foster families and, if old enough, attend local schools, but for some of them education is more effectively provided in a residential setting, hence their admission to the Mulberry Bush. The remaining group of pupils come from adoptive homes or birth families in which parents are experiencing difficulties in managing their child's behaviour. There are no private fee-paying admissions. This article will discuss the work undertaken with the children's main carers and show how attempts to combine the benefits of foster and residential care underpin the work of the Therapies and Networks Team.

It is useful initially to give some background information on the Mulberry Bush in order to appreciate its historical and intellectual context and understand how its work has developed to focus on the families of the children as well as on the children themselves. In addition to giving a history, the article will describe the types of children on the roll and the routes they have taken before joining.

### **History of the school and children's background characteristics**

The history of the Mulberry Bush stretches back to before the year (1948) when it was officially founded. It had been in existence in some form since the Second World War and has its roots in the evacuation of children from British towns and cities to the safety of the countryside. The school's founder, Barbara Dockar-Drysdale, took the children who presented the greatest behavioural challenges into her own home and developed skills in looking after them. As a result, after the War had ended, she was officially invited by the Home Office to set up a school. This continued to be based in the increasingly run down, rambling farm house in the Oxfordshire village of Standlake until a new school was built on an adjoining field in 1969. Later, in the 1990s, new boarding houses were erected and the old 1960s building was adapted and modernised.

It will not be surprising to learn that the Mulberry Bush School has also developed theoretically over the intervening 60+ years of its existence and the current therapeutic approach is informed by a combination of psychodynamic, attachment and systemic thinking. The general 'type' of child, though, remains broadly the same. They are often referred to as 'hard to place' or 'unfosterable' but that label underplays the difficulties they are likely to have experienced in their short lives. Because of each child's complex journey to the school, it is not easy to portray a 'typical Mulberry Bush child' as each comes with a personal history and via a variety of routes. But a general picture can be painted using broad-brush strokes.

In most cases, the child will have experienced some kind of significant trauma in their early life (Nicholson, et al, 2010). For many, this is likely to be the result of parents who either significantly lacked the ability to look after their children appropriately (perhaps because of their own childhood experiences) or, for a variety of reasons, have purposely hurt or neglected them. It is through consistently poor care and lack of parental attunement in the child's early years that children's unhelpful responses to the world around them become ingrained and habitual. A child who has not experienced appropriate responses from an attuned parent when learning to make sense of the world will be prone to episodes of panic and anxiety that result in violent and disruptive outbursts that cause them to be excluded from mainstream facilities. Consequently, many of the children's present complexities are reflected in the extensive range of networks and services supporting them and the enduring nature of the difficulties they present (Ward, et al, 2003).

As the Mulberry Bush is a 38-week non-maintained therapeutic residential school, most of the children come with some input from their local education authority as well as children's services. It shelters equal numbers of boys and girls who live in four gender-mixed houses. The average age of residents is 10 and the usual length of stay is around three years. The overriding aim is to help children cope with living in a family and not to provide long-term or permanent residential care.

Most children will have a Statement of Special Educational Needs which in future will be incorporated into the Education, Health and Care plans recently introduced by the UK Government (Department for Education, 2014). Nearly all of them will have social work involvement in some form but the range is wide. For example, there is a group who, because of their diagnoses, are the responsibility of a children with disabilities team. Others will be classified as 'children in need', implying considerable social care involvement, although this often diminishes after arrival as they are deemed to be in an appropriate and safe setting.

There is anecdotal evidence that points to recent changes in how some of the children find their way to the school. About 10 years ago, many would have had a diagnosis of Attention Deficit Hyperactivity Disorder (ADHD) which opened access to resources for the child and family. Nowadays, this diagnosis is less common among Mulberry Bush Children and alongside its decline has been an increase in admission with a diagnosis of Autistic Spectrum Disorder. These shifts may or may not be connected and, in practice, do not significantly affect the approach to working with them.

There are also changes in social work practice that have seen an increase in the number of children who live with their birth parents during the school holidays. These days, children at risk of harm are highly likely to remain with their families as long as it is safe to do so, and even for the Mulberry Bush children, who present very challenging behaviour, living at home in their local communities is seen as their primary placement. However, it is acknowledged that many come from families with long inter-generational histories of social and psychiatric difficulties. The process of engaging birth families in the work of the school is therefore perceived by many outsiders as likely to be problematic (Chesson, Harding, Hart, & O'Loughlin, 1997). While this can certainly be the case, our experience is the opposite and it is often surprising how accommodating these families can be.

There is, for some parents, a definite sense of relief that their children are getting the support they need, although this is often tempered with a sense of guilt and loss at their having to spend weeks at a time away at school. While these difficulties have to be dealt with, they also provide opportunities for positive work.

Over recent years, we have also seen a fairly consistent number of adopted children on the school roll. Prior to this, the number of such children was relatively low and it is difficult to see if the increase marks a definite trend. This has had an impact on the work we undertake with families as they are a clearly defined group, albeit with broadly similar issues to contend with. As a result, it has been necessary to develop specific knowledge and skills in order to create positive interventions with them, both individually and collectively. I have undertaken some research into eliciting adoptive parents' biographical narrative and how this can inform what we do (Harragan, 2014).

Currently, the largest group of children in the school (just over half) live in foster care. They are most likely not only to have social services involvement but also special education and, possibly, CAMHS (child and adolescent mental health services) support. There will be varying degrees of contact with relatives and their foster placements are usually described as long-term, although their current placement is almost certainly not their first as nearly all of them will have had a significant number of changes in their short lives. We have paid special attention to these particular children and their carers as we have become increasingly aware of higher levels of tension between home and school than is the case with those living in birth or adoptive families.

As explained earlier, the average stay for a child at Mulberry Bush is relatively short (around three years) and so children will come from and leave for other schools. Like most special schools, we admit children throughout the school year. Similarly, children leave when it is felt to be the right time for them rather than at the end of their primary education. However, most children move on

to their next school at the end of the summer term as this provides a convenient opportunity for a tidy end of placement and enables them to have a collective experience, which itself can provide some added containment. Three years is generally enough time to work with the children so that they are able to successfully move on to their next school which, although likely to offer special facilities, will usually have different expectations of behaviour and be unlikely to see itself as therapeutic. This also means that we also have three years in which to engage, work with and appropriately end our intervention with children's families. This time includes a period of assessment and developing a relationship of trust and we have developed opportunities to help this process one of which, Family Weekends, will be discussed later.

### **The Treatment Context**

In a therapeutic community (TC), the term *Milieu Therapy* has traditionally been used to describe the main feature of the placement. This focuses on there being reliable structures and routines and consistent expectations of the group and individuals. The group itself becomes arbiter of the rules to some extent, although when working with children the model has to be modified to take into account their ability to do this satisfactorily. Kennard (1998) explains how the formal use of members of a TC commenting on and influencing the behaviour of other members is a common feature. For children's TCs, particularly where the population is so young, there are likely to be fewer meetings but opportunities are provided for this to occur in a safe setting for all. This is not always an easy concept for placing authorities, parents and carers to grasp and leads to the frequently asked question as discussed by Ward, *et al* (2003) 'where's the therapy?' in the absence of individual therapy sessions and other visible treatment activities.

Within the group there are individual children who have specific needs and each one has a Treatment Team that meets regularly to consider their Individual Treatment Plans, what modifications and adaptations to make and to discuss issues, thoughts and feelings around the case.

The members of the Treatment Team will include the manager of the house in which the child lives, his or her keyworker and teacher, a Family and Networks practitioner and a therapist. There may be others involved, such as the school nurse, teaching assistants, speech and language therapist and other house staff, depending on what is in place for that child and on his or her individual needs.

There is a continuing debate among professionals about the suitability of individual psychotherapy within a residential setting, but our experience is that it can prove beneficial (Onions & Browner, 2013). We currently have the ability to provide individual psychotherapy, drama therapy and music therapy to children for whom it is felt appropriate. It is important to note, however, that not all children will have access to individual therapies during their time at Mulberry Bush, despite this often being the expectation of placing authorities. Assessment of individual need is key in utilising resources in the best way (Onions, 2013).

In fashioning the treatment approach, the staff at the school are conscious of the strengths and weaknesses of residential care and the dangers of placing young children in such settings. In a review of the literature, Clough and colleagues (2006) identified some possible benefits, such as stimulation, widening cultural horizons and providing a consistent and safe setting for therapy, but they also noted that the literature warns unequivocally about the inability to provide unconditional love, damage to children's emotional development, poor staff continuity and the marginalisation of children's families and other welfare services. The Mulberry Bush accepts that a good residential school must seek to maximise the strengths and reduce the well-documented weaknesses.

### **A short History of the Family Team**

There has been a considerable amount written and discussed about the work with children in therapeutic communities and something our team has been developing over the past three years is adding an external focus to the task through developing our work with families and networks. It has

been recognised that engaging the child's carers in the work of the school benefits everyone but it is not always an easy task for a keyworker to comfortably fulfil the demands of this while looking after a traumatised child (Tomlinson, 2004).

Before the Family Team was set up over a decade ago, the roles we now undertake had previously been carried out by keyworkers or house managers. It was recognised that the demands of this task detracted from their direct work with the children and managing the group, responsibilities that could sometimes conflict. For example, it can be better for someone slightly removed from the day-to-day care of the child to pass on difficult news to carers and social workers because any negative feelings can then be located in the messenger, so protecting the staff who look actually look after the child.

There was a staffing reorganisation in early 2011 that saw the Family Team and the Therapies Team join forces to become the Therapies & Networks Team. The old Family Team had always worked with parents, carers and networks and its role had been slowly developing before the amalgamation. The changes in the name and organisation gave us the opportunity to alter the task and change the way that the work is perceived. Previously, the view within the school was that they simply liaised with families and the children's professional networks, passed on difficult information and organised transport when children went home. Some of this was correct but it was never the complete picture. Working alongside the therapists made the direct work we undertook with families and carers more visible to the rest of the school and the outside world. It also enabled the connection between family work and clinical work to become more explicit and better understood within the establishment.

## **Networks**



In the language of the Mulberry Bush and of much social care, 'network' refers to the child's world beyond school. Each child arrives with a very different network and part of our task is to determine where its strengths and stresses lie and what we can put in place to make progress.

I have already described some of the different agencies that might be involved with the child and there is nearly always a family of some kind, regardless of how much contact it might have, that has to be considered and engaged with in some way. As each child comes with a unique network that needs to be understood and managed, the list of questions that might be posed is virtually endless and we assess and seek answers to these from the very start of the referral process.

Our overriding aim is to support and encourage a therapeutic alliance between the school and network (within which I include the family and carers) as tension can easily lead to problems. These can include: misunderstandings, poor communication, the undermining of decisions made by one part of the network by another part and acting out the tensions rather than looking at how to reduce them. If there are unresolved difficulties, the work with the children becomes significantly more difficult as the focus shifts away from their needs to their acting out. Structures in place at the school help to ensure that there is reflective practice through group supervision and reflective spaces where staff are able to think about how the work affects them as individuals. The hope is that this opportunity will help them decide where to focus their work with both the children and the network.

### **Working with Foster Carers**

Something that the Therapies & Networks Team noticed was that the school's relationships with foster carers were often more fraught than those with birth parents and adopters. There are a number of factors that can affect the foster carer and how they view the wider network, particularly the school. Unlike birth and adoptive parents, foster carers are professionals and have to be treated

as such, while keeping in mind that they are also significantly emotionally involved. But, they are key part of the therapeutic process and must be actively engaged as such. Foster carers want to be seen as partners and to be well trained and supported (Wilson et al, 2004).

It is clear that while fostering is a 'job', it would be a gross simplification to solely view it in these terms. Our experience tells us that for a majority there is significant professional *and* personal integrity and looking after a child is not something they do simply for the money. Two scenarios illustrate this.

1. A child has been placed with an experienced single female foster carer who is available to support the child while he is at school for two hours a day should it break down. She can also provide fulfilling activities for the rest of his waking hours and offers a thoughtful and nurturing home environment. After looking after him for eight months, it is decided that he should move to the Mulberry Bush School and spend his holidays at the foster placement.
2. After having been at the school for 18 months, a girl's foster placement ends due to her carer becoming pregnant. A new placement is found and the child settles in well. The new carers do not see the behaviour that was present before she was placed at the school and argue for her to be placed with them full time.

In the first example, tensions arose between the carer and the school. Despite concerted efforts, we were not able to develop the desired therapeutic alliance with her. Things continued to be difficult and she was eventually able to say that she felt de-skilled and undervalued as she had taken this boy on because she wanted to look after him at home. She had invested a lot of time and energy in supporting his education and was central to contact visits with his mother and family. While the child's needs are, of course, at the heart of decisions made, there was in this case, a lack of support

and understanding of the carer. In moving the child to a 38-week residential school, she felt that the job she was doing had been assessed as not good enough and that she was part of the reason for him leaving. This, she felt, undermined her skills and eventually led her to her withdrawing from the boy's life completely. It seems that while there was an implicit recognition of her importance to the success of this boy's treatment in as much as she would remain his carer, it was not clear to her how valued she was. Coupled with no immediate improvement in his behaviour at school, she was unable to understand the reasoning behind the child's move to the Mulberry Bush.

The second scenario is quite different but one that we have come across regularly. This lack of understanding or acceptance of the difficulties faced by a child can often stem from the limited information given to prospective carers. These people, and many like them, take on children who they know attends a special school because of their complex behaviour. However, the child they look after in their home does not show significantly problematic behaviour and is a joy to be with. The carer understandably assumes that the child would be better placed with them full time while attending a school much closer to home as the problem seems to be the school they go to.

Unfortunately, what they do not realise is that the home placement survives because of what the residential school provides. The Mulberry Bush offers an environment where children can explore nurturing relationships that in their early lives have been unreliable or unpredictable, leaving them with a distrust and fear of being looked after. They are able to act out safely their difficulties in a place where these behaviours are understood as being important communication that needs to be heard and responded to appropriately. While the foster placement offers suitably brief opportunities for the child to regulate their behaviour and manage themselves within a family, this still poses a significant challenge, particularly in the earlier stages of a child's time at the school. Through the provision of reliable emotional and physical care, he or she begins to develop a sense of hope and along with this, there is a greater sense of the possibility of losing something good. Due to

their lack of any previously internalised secure, nurturing experience, children's internal world feels under threat and so attacking the order of the external world is an attempt to reach equilibrium (Kegerreis, in Trowell & Bower, 1995).

Part of the rationale behind the work of the Mulberry Bush is that it is important for the children to have regular breaks from the intense work that they are undertaking with us. While the school does not 'allow' violent and aggressive behaviour, it is understood that this is often something the children will present and the school is a safe place for this to happen. There is a sense of the children 'relaxing' at school and allowing themselves to seek the care they have missed out on. During the course of their stay, they develop an increasing understanding that aggressive and self-damaging behaviour is neither accepted elsewhere nor necessary, assuming of course that their deeper needs have been successfully met.

### **Engaging Foster Carers**

The men and women who foster the children attending the Mulberry Bush are very diverse. In this sense they are no different from the general population of carers. However, when talking to them it became apparent that within their fostering organisation, many felt isolated from and unappreciated by managers, social workers and peers. Some found the type and level of children's difficult behaviour worrying and a few felt blamed by colleagues, their families and support workers for allowing this to happen. They did not always feel understood or even able to approach professionals for help and support. In response to this, we have set up regular Foster Carers' Days at the school. The intention is to provide a space for carers to think and reflect about the task of looking after the children who attend the school and to use each other as a source of expertise. This is emphasised at the beginning of each meeting to remind everyone that we are not there to discuss day-to-day issues like lost socks or missed telephone calls which are, of course, important matters that need to be addressed in an appropriate way elsewhere.

The Foster Carer Day comprises a two-hour reflective meeting for the carers who then have lunch with the children and their keyworkers. We then provide an activity for carers and children. These have included a special Forest School session or a game of rounders but attendance at this part of the day has declined over time and is currently being re-thought. Attendance at the reflective meeting has always been high and the feedback from the sessions is positive. So far we have only had one couple who have decided that it isn't for them as they are concerned that it will become a forum for moaning and they want to stay positive. We will continue to encourage them to return to the group as it is now facilitated in a way that acknowledges unhappy feelings and tries to discover the issues that might lie underneath them. In recent group meetings the topics have included social network sites, communication between school and home and, indeed, missing clothes. While these topics might seem to be diverse at first sight, the underlying themes are about working in partnership and foster carers feeling valued by the school. We were able to explore these within the safety of the group and to think about how we can make improvements.

The children who attend the Mulberry Bush come from all parts of the country and, because of this, there are large distances to travel. Many carers have other children they are responsible for and also have busy lives. Given these constraints, we are only able to offer two group meetings a year but the desire for more regular sessions remains. Many carers have requested other ways for them to keep in touch with one other as it is clear that they would be prepared to get together more often if they were able. Thought was given to other methods of communication and an initial suggestion was that they share emails and communicate in that way. This did not feel satisfactory as it could result in sub-cultural groups developing and create splits among the group. As a result, we have recently launched an online forum for foster carers as an addition to our website. Our hope is that it will become an extension of the physical meeting and provide support and considered thought about issues pertaining to fostering a child away at boarding school. As there are many security

considerations that need to be kept in mind given the sensitive and confidential nature of likely discussions, the forum is private and only open to current foster carers and the carers of children who left the school within the last 12 months. It was recognised that the transition from Mulberry Bush to another school can be an unsettling time for carers as well as children and the hope is that over time the forum will provide an archive of experiences that can be consulted by when the need arises.

It is early days for the forum and, despite the group's request for and anticipation of its creation, discussion online is slow and some carers are reluctant to post. We have not yet been able to discuss this together and for many there is the fear of attack or ridicule as has been their experience on other online discussion groups.

An interesting additional outcome from the foster carers' events is that many of the children at the school did not realise who else also lived in a foster placement. At the first event, the activity for children while their carer's were engaged in their group session was to write on a large piece of paper what it was like to be in foster care and to add drawings. It was only then that a number of children understood that they were all fostered and had something in common.

### **New Approaches**

One of the most important recent developments is the introduction of Family Weekends. Currently, these take place three times a year during one of the school's exeat weekends where we invite three or four families of children to spend the weekend with us. During the course of the event, there are group activities as well as parent or carer sessions so that they can explore common issues and share experiences. These events are useful in a number of ways. We are able to see how the parents, carers and siblings interact and from this discuss positive ways of being with the children. It also helps group living and education staff to gain a better understanding of the child's wider experience

and helps dispel any myths and stereotypes that might have developed around families. The children are presented with a tangible illustration of how their carers and the school staff can work together, which is something we want them to be aware of from the very beginning of their stay as it aids their sense of emotional containment. In addition, the carers find the experience supportive, relaxing and thought provoking. The feedback we have received so far has been extremely positive and foster carers have found the meetings a particularly useful way of understanding what the school is trying to do, developing closer relationships with staff and accepting the idea of collaborating and receiving support from the Therapies and Networks Team in their own home. It is also an opportunity for them to meet other carers with similar experiences and to share ways of working.

As a result of a Family Weekend, a child's keyworker and I organised a visit to the foster carer's home in order to facilitate a joint play session with the carer, child and keyworker. The aims of this exercise were to continue the overt display of working together as the child was prone to split between home and school. We also wanted to develop a sense of playfulness within the carer's and child's relationship, which had been acknowledged as lacking and for which support had been requested. After the play session, the child's social worker took the child out for an hour to allow her carer, keyworker and me to think about how the play session had gone and how the foster carer could use that understanding to develop her relationships with the child and the Network.

We are also in the initial stages of thinking about how we can develop the work we do during the school holidays, particularly the longer breaks. While there is always someone at the school available on the phone and staff may visit some of the families during the school breaks, we are considering what services we can offer that would help families. It is still not certain whether this is something that we should be undertaking ourselves or whether we should restrict our activities to

supporting what local agencies have already put in place. This concern, again, indicates how well-intentioned reforms can easily create tensions by violating professional boundaries.

### **Therapeutic Alliance**

I've already discussed the importance of developing and maintaining a therapeutic alliance and in some cases this is the bulk of the work with the network, at least for considerable periods of the child's time with us. Without attending to these concerns, we can risk hampering the positive and more holistic work with people central to the child's life.

As explained earlier, all of the children placed at the school also have somewhere else to live during the holidays. We always view this as their home but recognise that its stability and security affect and influence the whole of the child's life. I've already described how a change of placement can impair impact a child's progress and even jeopardise the school placement. A change of social worker or social work team can have similar consequences.

Because of these potential difficulties, we have found that it is important to quickly make contact with new members of the network and develop that therapeutic alliance. Regular network meetings can be a very useful tool as bringing the various members of the network together helps to keep the child central in our thinking while maintaining a more systemic overview. The children have their own social workers and their foster carers have service managers but there is very rarely an agency advocating for the central child-carer relationship and so we find that it often falls to us to ensure this is supported and kept salient.

### **Trying to Make Sense**

How do we know that all of this works? Therapeutic communities have long been castigated for resisting objective evaluation and harbouring suspicions of positivistic scientific methodologies.



However, we are now taking steps to help us understand how and to what extent our interventions make a difference. The school is currently working with the Institute of Education in London to undertake a seven year analysis of its work. In addition, Caryn Onions, the Head of the Therapies and Networks Team, is undertaking a clinical doctorate at Exeter University using a qualitative approach to chart parents' and carers' perceptions of changes in their child during the first year of placement.

Within our team, we set targets for the work with each child and their family and network, and review these every six months to track how well they have been reached. This has led us to suspect that where there is parallel work with child and family, the outcomes for the children are more positive but this hypothesis needs rigorous testing before it can be confirmed. To set this process in motion, we have adopted the use of the CPLAAC questionnaire – *Clinical Psychologists working with Looked After and Adopted Children* – which should provide helpful information about whether our work improves the lives of carers and children.

### **A More Systematic and Methodical Approach**

As there are also no 'typical' families, whether birth, adoptive or foster, there is a further problem of achieving consistency. We have to think about how we can ensure that we work with each one in the same way and use the same theoretical foundation. Knowing what works and what does not is crucial for this. So every effort is made to keep abreast of the literature and to learn something from each network we encounter, using this knowledge to improve what we offer in the future.

### **Final Thoughts**

I hope I have managed to convey the intricacies of working with the families and networks of the children in a residential therapeutic school. I also hope that it has shown how our expanding experience has helped us to avoid the dangers of placing young children in residential settings and

pre-empt a number of potentially difficult situations, particularly possible tensions between professionals within the network and disagreements between families and carers.

Our opportunities to get the foster carers together as a group have been crucial in understanding their collective needs and providing an environment in which they can directly seek the advice of others. Unfortunately, with only two events each year it can be difficult to maintain momentum and, sometimes, interest. Organising Family Weekends for them has also been hard work and there is some reluctance to take part in these events. Our experience has been much more positive with birth and adoptive parents so the reasons why convening foster carer groups has proved so complicated are not yet clear.

This difficulty is worrying as a paper recently published by The Rees Centre at the University of Oxford (Luke & Sebba, 2013) highlights the importance of peer support for foster carers, although it has to be said that any beneficial effects of this for children's outcomes still need to be established. It also notes that caution has to be exercised to ensure that sessions are organised to prevent them being dominated by gossip and grumbles. This tension between the professional role of foster carers and their personal investment in the task has been evident in the meetings at the Mulberry Bush and is something that we are struggling to resolve. As a foster carer at a recent Family Weekend said when discussing the subject of love and foster children, "I have to be human first before I can be a foster carer."

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