



## **Enhancing the emotional security of pupils in the classroom: a case study of a therapeutic residential special school**

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### **Abstract**

Creating an emotionally secure learning environment is vital for care-experienced young children. This mixed methods case study followed 10 primary aged children to determine the possibility of improving emotional security in the classroom. Data were also collected from teaching staff. Findings suggest that the majority of participants maintained or improved classroom confidence, trust in staff, self-esteem, behavioural regulation and engagement with learning after adaptations had been made to the school curriculum and curriculum delivery. Key recommendations are that child progress is not linear, staff support and supervision is vital and curriculum underpins engagement.

**Keywords:** emotional security, Boxall profile, supervision, SEA Scale, adverse childhood experiences.

### **Introduction**

The Mulberry Bush School (MBS), a therapeutic special school and children's home, is in rural Oxfordshire, UK. Established 75 years ago by therapeutic care pioneer Barbara Dockar-Drysdale (1991), the not-for-profit charity provides education, care and treatment for children aged 5-13 who have experienced early years adversity and trauma. Children reside for 38 or 52 weeks per year and the average stay is three years. There is a multidisciplinary treatment team around every child including teacher, residential key worker, speech and language therapist,

family worker and therapist. This integrated psycho-social approach is well documented (Diamond 2009; Gutman et al 2018; Price et al 2018) and psychodynamic thinking, collaborative working and reflective practice underpins the charity.

Pupils move through three class levels depending on their readiness to learn rather than their chronological age. They are referred to as Entry, Confidence and Independence classes and comprise group sizes of between 6-8 children, with one class teacher and two teaching assistants per class.

### **The study**

The researchers were motivated by a retrospective analysis of Boxall Profile assessments of 50 former MBS pupils. The Boxall Profile (Bennathan and Boxall 1998) assesses socio-emotional functioning in the classroom and whilst the analysis suggested that most children made positive progress, there was one strand of the Boxall Profile on which fewer children made good progress. This strand, Strand F, focuses on whether children are 'emotionally secure' in the classroom. This finding demanded further investigation and the aim of this study was to explore the following research question:

*Can levels of 'emotional security' in children attending the MBS be increased through adaptations to the school curriculum and curriculum delivery?*

### **Emotional security in the classroom**

Emotional security, a construct closely associated with attachment theory, describes how secure attachment emerges from the physical and emotional safety between a child and primary carer (Bowlby 1969). Secure attachment depends on a warm, attentive and reciprocal relationship with a significant other, meeting the child's needs in a timely, reliable and consistent fashion. However, an insecure attachment often follows if a child's care-experience has been inconsistent, insufficient or frightening (Geddes 2017). Bion's concept of 'containment' is also important. It originated to describe how a parent receives an infant's unmanageable feelings and processes them on behalf of the infant before handing them back in a manageable way (Bion 1962). As the relationship develops the child will increasingly learn to manage their own feelings without needing the parent to do this for them.

In the context of the school classroom, emotional security can be demonstrated through a number of emotional and behavioural responses. Set out by Geddes (2017) they include trusting the teacher to help and contain, tolerating not knowing, asking for help when needed, tolerating making mistakes and persisting when a learning task gets difficult. The Boxall Profile suggests that emotional security in the classroom can be evaluated through observing a child's willingness to take care of something he or she has made, their confidence to turn to their teacher for help and whether the children have the trust required to 'heed the teacher' when addressed by name.

Informed by these sources and for the purpose of this project, 'emotional security in the classroom' is defined in terms of a child's observed confidence in the classroom, trust in adults, self-esteem, behavioural regulation and engagement with learning.

### **Curriculum and emotional security**

The school curriculum refers to both the subjects studied in the classroom and the content of each. Colley and Cooper (2017) argue that effective learning in the classroom is emotion-based and that high quality learning cannot take place if children are preoccupied with their own emotional needs. But this position can provoke tension in mainstream schools when academic progress is seen to be secondary to - or subservient to - social-emotional progress. It is argued that when social-emotional progress is the primary focus, children may run the risk of being academically disadvantaged or falling further behind in their learning (Ofsted 2011). The position need not be polarised, of course, and an ethos that accepts the need for a sense of safety, trust, warmth and belonging to provide the foundations upon which learning can develop (Geddes 2006) can be found in many mainstream settings. In the specialist setting of a therapeutic, residential special school such as the MBS, the symbiotic nature of curriculum and social-emotional development is embedded in a curriculum that is carefully tailored to meet the individual needs of each child.

All children referred to the school will have the kind of emotional needs that undermine the foundations of effective learning. Trauma, neglect and sustained abuse are common experiences for children and addressing these needs is the immediate priority for staff in both the school and residential settings.

The MBS curriculum acknowledges that learning is emotion-based and that many of the socio-emotional skills expected of competently functioning children aged 5-13 years will be missing. These skills need to be explicitly taught through the MBS curriculum and this process begins as soon as children join the school.

On arrival, all children join the Entry level class irrespective of their official school year. The majority are working at around Year 1 level. Here, learning is based on play and small nurturing environments, enabling the classroom to feel like a safe place where new arrivals can settle. The driver for all aspects of the curriculum is to develop each learner's emotional readiness to be in the classroom. These goals will include the ability to work alongside other children, to accept the process of learning and to allow themselves to be helped. Resisting help from staff or peers is a common feature of children joining the MBS as they have often been unable to develop a sense of trust in others.

The MBS core academic curriculum includes that expected of any mainstream school (English, Maths, Science) and during the period covered by this study a new synthetic phonics programme was introduced to the curriculum alongside a new maths scheme and a writing development scheme.

MBS recognises the power of the curriculum to improve the emotional security of each child and to raise the self-esteem of learners who may be exploring successful academic engagement for the first time. Over the course of this project, staff training was undertaken in the three new curriculum developments (phonics, maths, writing) and the impact of these changes on the observed emotional security of the children was assessed over time using a range of quantitative measures and qualitative insights.

### **Impact of Covid -19 Pandemic**

The Covid-19 pandemic of 2020 led to a global crisis of unprecedented reach and proportion. The impact on MBS was significant and for almost 18 months the children were educated and cared for in three small, separate teams or ‘bubbles’. For some, the lack of contact with parents/carers caused high levels of sadness and homesickness while for others the consistent routine of small group care and education without home contact had a positive and stabilising effect. This study took place in the months after the ‘bubbles’ had been disbanded with classrooms and living arrangements returning to pre-Covid ways of working.

### **Research Approach**

The study aimed to investigate whether levels of emotional security in children attending MBS could increase through adaptations to the school curriculum and curriculum delivery that harnessed the renewed focus of staff coming back together, post-Covid. Using a mixed methods design, this small-scale longitudinal study included three data collection points over a thirteen-month period. The research was undertaken by a team of three, two were MB researchers and one was external.

### **Method**

#### *Ethical Considerations*

Ethical approval was obtained through the University Research Ethics Committee at Oxford Brookes University (UREC Registration No: 201480). Informed consent was sought and granted by the parents/carers of the participating children, while informed consent from children over 11 years was obtained directly from the children. Five participating staff members gave consent to join the project and were reminded that they could withdraw at any point and without giving a reason. Throughout the project, researchers treated participants with sensitivity, dignity and without judgement. The project was monitored by two MB trustees and a former pupil. Updates were provided to the Monitoring Group on three occasions.

#### *Participants*

The parents/carers of 22 children were approached to join the project and consent was received for 15 pupils. Over the course of the study, five child participants moved on to their next schools. Ultimately, the project involved the complete data sets of 10 children and five staff members contributed to the Focus Group interviews.

#### *Data Collection*

Quantitative data were collected for all child participants at three time points over a period of thirteen months. Staff Focus Groups generated qualitative data at three similar time points. To protect the anonymity of all participants, the exact dates of data collection times are not included, and the project timeline is described in Table 1.

**Table 1: Data Collection Points**

Data Collection Point	Time Period
Time 1 (T1)	Baseline data collection
Time 2 (T2)	7 months after T1
Time 3 (T3)	6 months after T2

The project used a range of quantitative instruments to assess the development of emotional security as set out below:

- **Boxall Profile (BP)**

The Boxall Profile (Bennathan and Boxall 1998) is an observational assessment of classroom functioning as recorded by a staff member who knows the child well. The BP has 2 Sections. Section 1 (Developmental Strands) focuses on positive classroom skills with 34 descriptive statements (or items) graded between 0-4, where 4 means ‘usually’ observed and 1 means ‘virtually never’. Item scores are then totalled in relation to 10 specific developmental strands (labelled A-J) and displayed on the BP graph or histogram. The histogram also indicates the score above which a child might be considered ‘competently functioning’ on each strand. (see Appendix 1).

In Section 2, Diagnostic Profile, 34 items have a focus on negative or challenging behaviours likely to hinder success in the classroom. Data from Section 2 were not included in the final analysis here to ensure positive social and emotional functioning remained the primary focus of the investigation.

- **Boxall Profile Strand F**

Strand F was of particular interest to the project with its focus on whether a pupil is ‘emotionally secure’ in the classroom. It was the analysis of historical data from 50 former MBS children that suggested this area required further investigation.

- **The Behavioural Indicators of Self Esteem assessment (BIOS)**

The BIOS (Burnett 1998) is a 13-item observation checklist of pupil behaviour in the classroom (see Appendix 2). The checklist items are rated on a five-point Likert scale where 1 means ‘Never’ and 5 means ‘Always’. Staff identify the frequency of each

checklist item as observed in school over the previous two weeks. Staff answered the 13 items via an online survey platform and items 2, 4, 6, 8 and 10 were reverse scored. The final sum provides the self-esteem score for each child out of a maximum of 65.

- **The Social and Emotional Adjustment Scale (SEA Scale)**

The SEA scale (see Appendix 3) is a measure devised by MB for children aged 5-13 years. It has some solid validation data but is not yet standardised. The 25 items are scaled 0-10 by a staff member who knows the child well and the assessment seeks to monitor and track social and emotional adjustment based on observations of presenting behaviour and interactions. Of the 25 items, 19 items focus on behaviours describing developmental social and emotional functioning (Subscale 1) while six items focus on behaviours indicating emotional dysregulation (Subscale 2). Data from Subscale 2 were not included in the final analysis so that positive social and emotional functioning could remain the focus of the investigation.

- **Adverse Childhood Experiences (ACE) score**

ACEs are stressful or traumatic events occurring before the age of 18 years that include abuse (physical, emotional, sexual); neglect; living in a household with domestic violence, substance misuse, or criminal behaviour; and living with a caregiver with mental illness (Felitti et al 2019). The ACE assessment consists of 10 questions about childhood experiences and the ACE score is a measure of ‘toxic stress’ experienced in childhood. A score of four or more ACEs is said to negatively impact later life with an increased likelihood of substance misuse, depression and suicide attempts in adulthood by a multiple of 4–12 times (Gilgoff et al 2020). Staff completed the ACE-Q questionnaire for each child (Burke-Harris 2018) drawing upon reports from legal, education and medical settings (see Appendix 4).

Qualitative data from staff Focus Group interviews were also collected. In the semi-structured interviews, staff reflected on working practices at MBS, their curriculum training and the impact of curriculum delivery on child progress and emotional security in the classroom. Focus Group interviews took place on three occasions and 5 staff members participated. To promote candid reflections, Focus Group membership was known only to the participants and to the one researcher who was external to MBS. Each Focus Group interview lasted between 35-45 minutes.

### *Data Analysis*

Increased scores on the Boxall Profile Section 1 indicate improved social and emotional functioning in the classroom. Progress for each child was analysed in relation to individual strand scores (see Appendix 1). A total score on Section 1 summarised the degree of socio-emotional progress for each child at three time points. Progress against Strand F, ‘is emotionally secure’, was analysed as a discrete and specific indicator of emotional security levels for each child.

BIOS data were gathered on four occasions but only T2 and T3 were within the project time frame. An increased BIOS score between T2 and T3 would suggest increased self-esteem in the classroom, as observed by staff.

SEA Scale scores from Subscale 1 were averaged to give each child an overall score out of 10 at three time points. An increased average score over time would suggest improved social and emotional functioning in the classroom for individual children.

Reflexive thematic analysis (RTA) was conducted on the Focus Group interview data to generate patterns of shared meaning across the data set. Informed by the influential work of Braun and Clarke (2006; 2012; 2020), this interpretative approach to qualitative data analysis sought to respect the accounts offered by participants regarding their own subjective experiences while also acknowledging the analyst-driven interpretation of the data set.

Following a six-phase process (Braun and Clarke 2020), the analyst first became familiar with the data through a review of the interview video recordings, the re-reading of interview transcripts and a review of contemporaneous interview notes. At phase two, initial codes were generated as succinct labels relating to distinct pieces of information. These were recorded on the transcripts using the Microsoft Word 2021 comment function which also highlighted extracts pertaining to each initial code. Further analysis then generated Level 2 codes that either retained, discarded or collapsed the initial codes, based on each code's relevance to the research question. Key extracts from the transcripts were collated as evidence for the subjective interpretation of the data set at Level 2. At phase 3, candidate themes were generated through the aggregation of meaning across the data set as a whole (Byrne 2021). During this process, Level 2 codes were combined according to shared meanings and candidate themes were developed as multi-faceted observations linked to the research question (Braun and Clarke 2021). Given the recursive and iterative process involved with RTA, a review of the candidate themes took place at phase 4 and Final Themes with sub-themes were established as part of the defining and naming process. At phase 6, the order of the Final Themes and sub-themes were reorganised and thematically mapped.

The relationship between the quantitative data collected on individual children does not map directly onto the qualitative data collected on staff attitudes to working at Drysdale. Ethical considerations around anonymity meant that the children and the staff members were not explicitly linked in the research data. Where the two data sets do interlink, however, is around the staff perception of the impact of a new curriculum and training at the school and the social-emotional progress made by pupils over the same period.

### **Descriptive data**

Table 2 shows the child descriptive data. Each child had an identification code known only to the MB internal researchers. Child participants included five girls and five boys, who were not all in the same class. At Time 1 their ages ranged from 7 years 1 month to 10 years 6 months with a mean of 9 years 9 months. Seven children were on a care order, four were adopted, and four had a diagnosis of social communication disorder. Although their individual experiences

were unique, what they did share was profound early years disruption, witnessing domestic violence, inconsistent and/or critical parenting and multiple moves. Table 2 also includes each child’s ACE score which remained constant across the project. The average ACE score was above 7/10, demonstrating the degree of complex and cumulative trauma experienced by the children.

**Table 2: Child identification codes, gender, age and ACE score**

<b>Child Identification Codes</b>	<b>Gender</b>	<b>Age at data collection Time 1</b>	<b>Adverse Childhood Experience (ACE) Score</b>
C	Female	10y 3m	8
E	Male	9y 7m	9
G	Male	9y 1m	3
H	Male	10y 6m	7
I	Male	8y 3m	7
J	Female	9y 1m	7
K	Female	10y 5m	8
L	Male	9y 5m	7
M	Female	7y 11m	8
N	Female	9y 9m	8

## **Findings**

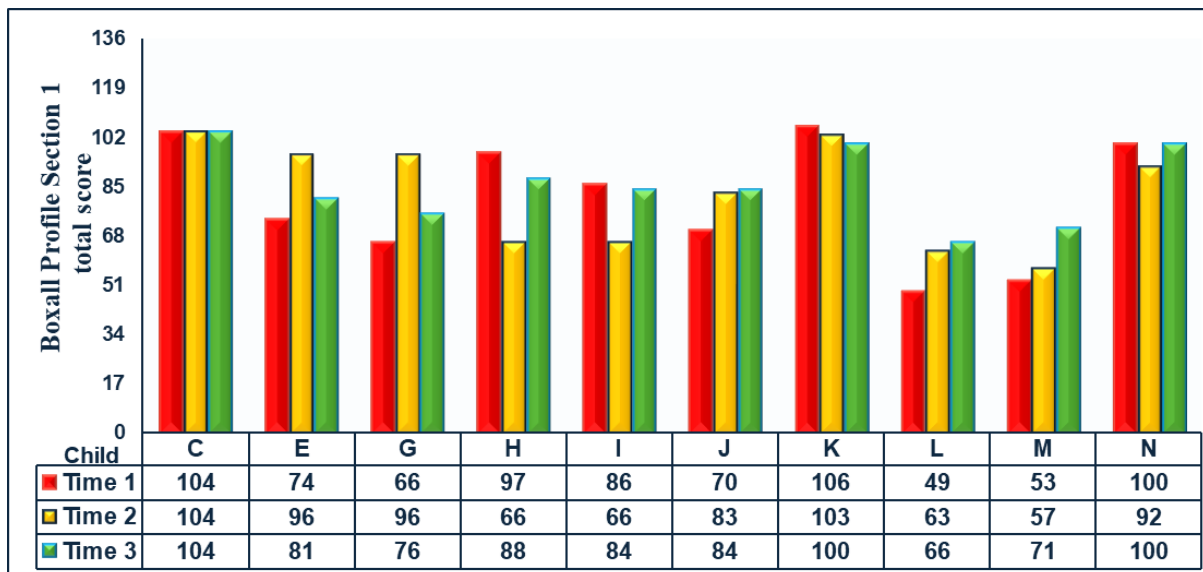
The findings are presented in two sections. The first section presents the progress of all ten child participants across all measures at three time points; the second section sets out the findings from the staff Focus Group interviews.

### **Findings Section 1: Child Quantitative data**

This section presents the progress of all ten children on four quantitative measures at three time points. Where progress scores have increased over time this is regarded as a positive indicator of progress. Where scores have remained unchanged, this is also regarded as a positive by the MBS team. This is because maintaining a score is an achievement in itself for children who are managing such high levels of complex trauma.

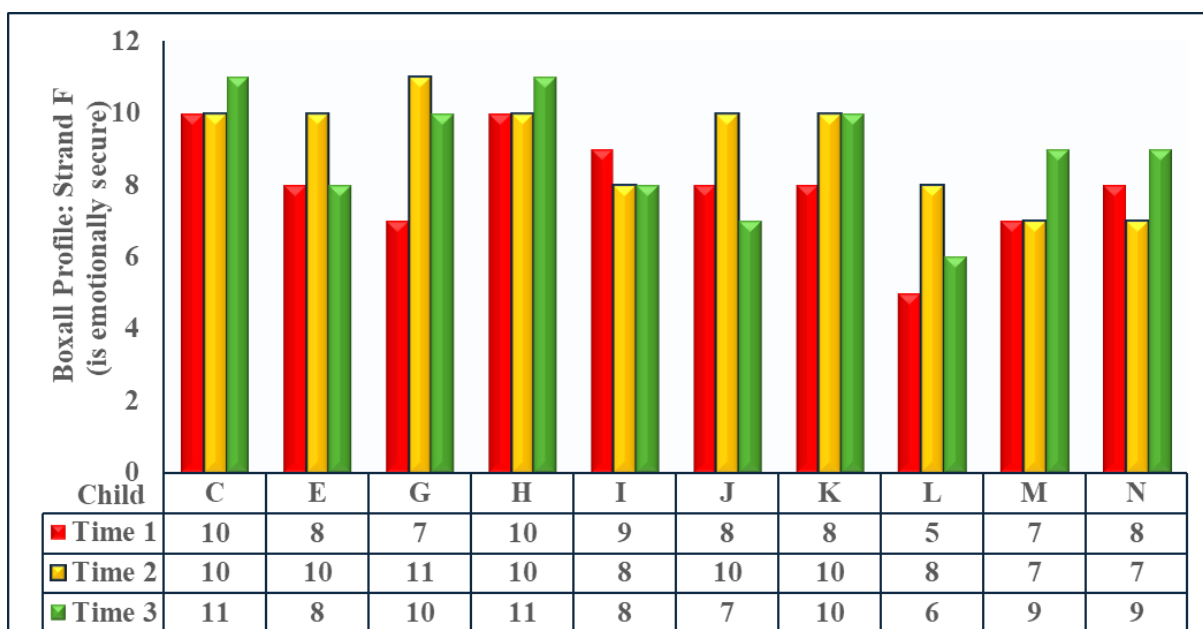


**Figure 1: Boxall Profile: Section 1 - totals. Max Score 136.**



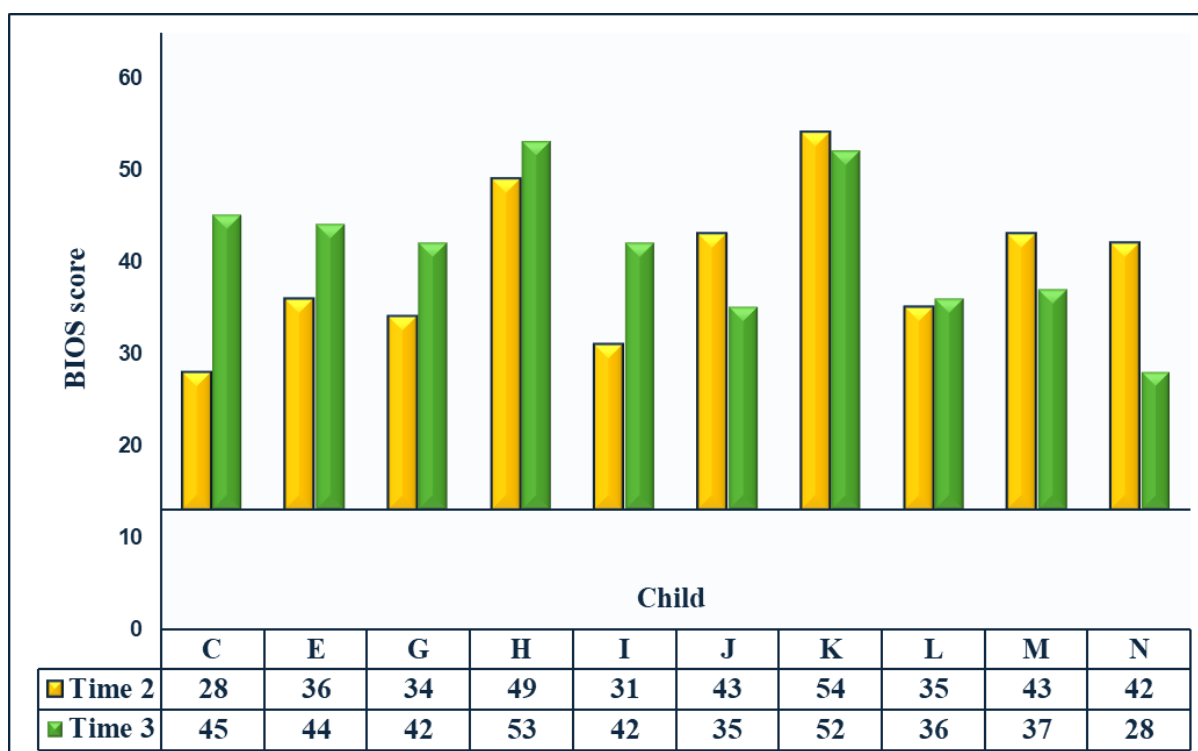
Progress for all ten children on the Boxall Profile Section 1 (Developmental Strands) is set out in Figure 1. For seven of the ten children, their scores across the developmental strands increased or remained unchanged at T3 when compared with their baseline scores at T1.

**Figure 2: Boxall Profile: Strand F. Max Score 12.**



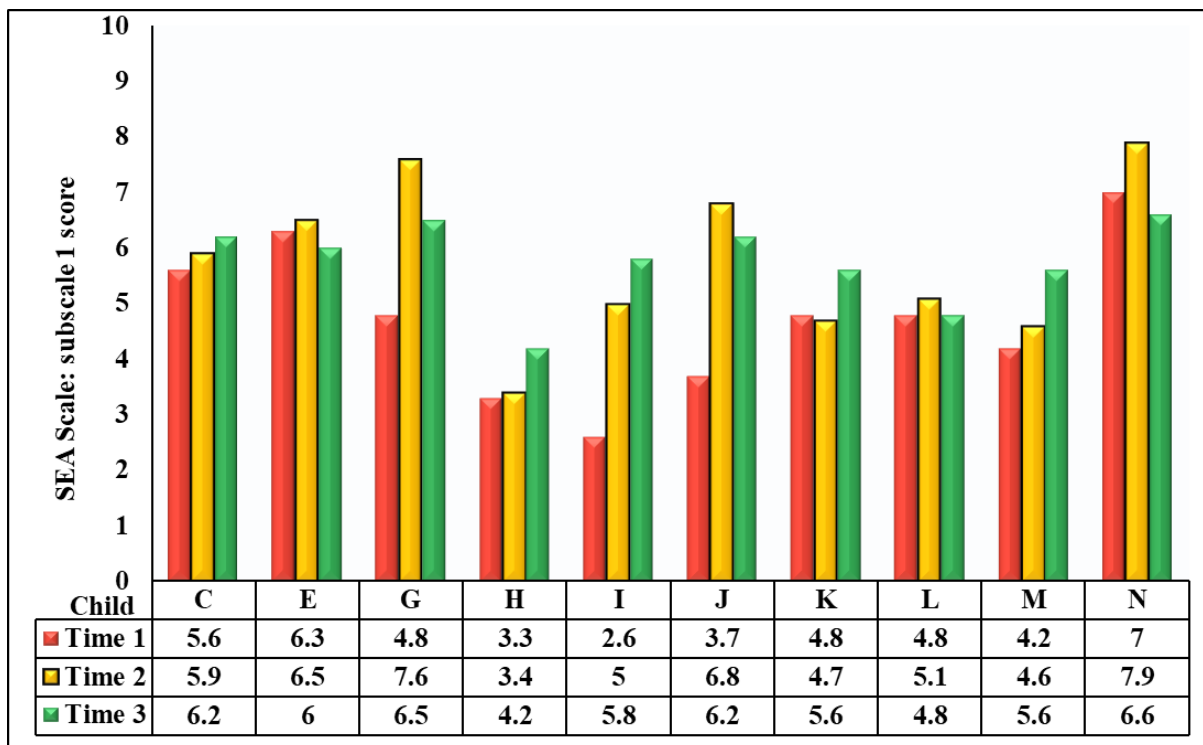
Progress for all ten children on the Boxall Profile Strand F 'is emotionally secure' is set out in Figure 2. For eight of the ten children, their scores for observed emotional security increased or remained unchanged at T3 when compared with their baseline scores at T1.

**Figure 3: Behavioural Indicators of Self Esteem. Max score 65.**



Progress for all ten children on the BIOS assessment of self-esteem is set out in Figure 3. For six of the ten children, their BIOS scores increased between T2 and T3.

**Figure 4. Social and Emotional Adjustment Scale Subscale 1. Max score 10.**



Progress for all ten children on the SEA Scale Subscale 1 are set out in Figure 4 where each score represents the average score recorded across the 19 items. For eight out of ten children, their scores for social and emotional functioning increased or remained unchanged at T3 when compared to T1.

Table 3 offers a summary of progress across the four measures of emotional security for each child. The light cells indicate scores that have remained unchanged or improved at T3. The dark cells represent scores at T3 that are lower than the child’s first baseline measure.

**Table 3: Summary of individual progress.**

Child	Boxall Profile Section 1	Boxall Profile Strand F	BIOS	SEA Scale subscale 1
C				
E				
G				
H				
I				
J				
K				
L				
M				
N				

All ten children made positive progress on at least one of the measures. Children C, G and L maintained or improved their emotional security and social-emotional functioning in the classroom on all four measures. Data relating to Child J and N indicate a series of ongoing barriers to emotional security in the classroom as defined by observed confidence in the classroom, trust in adults, self-esteem, behavioural regulation and engagement with learning.

Progress in socio-emotional functioning is neither regular nor linear, particularly for children with ACE scores of seven or above. While all ten children made positive progress on at least one of the measures, seven children also recorded reduced scores at T3 on at least one of the measures.

**Findings Section 2: Staff Focus Groups**

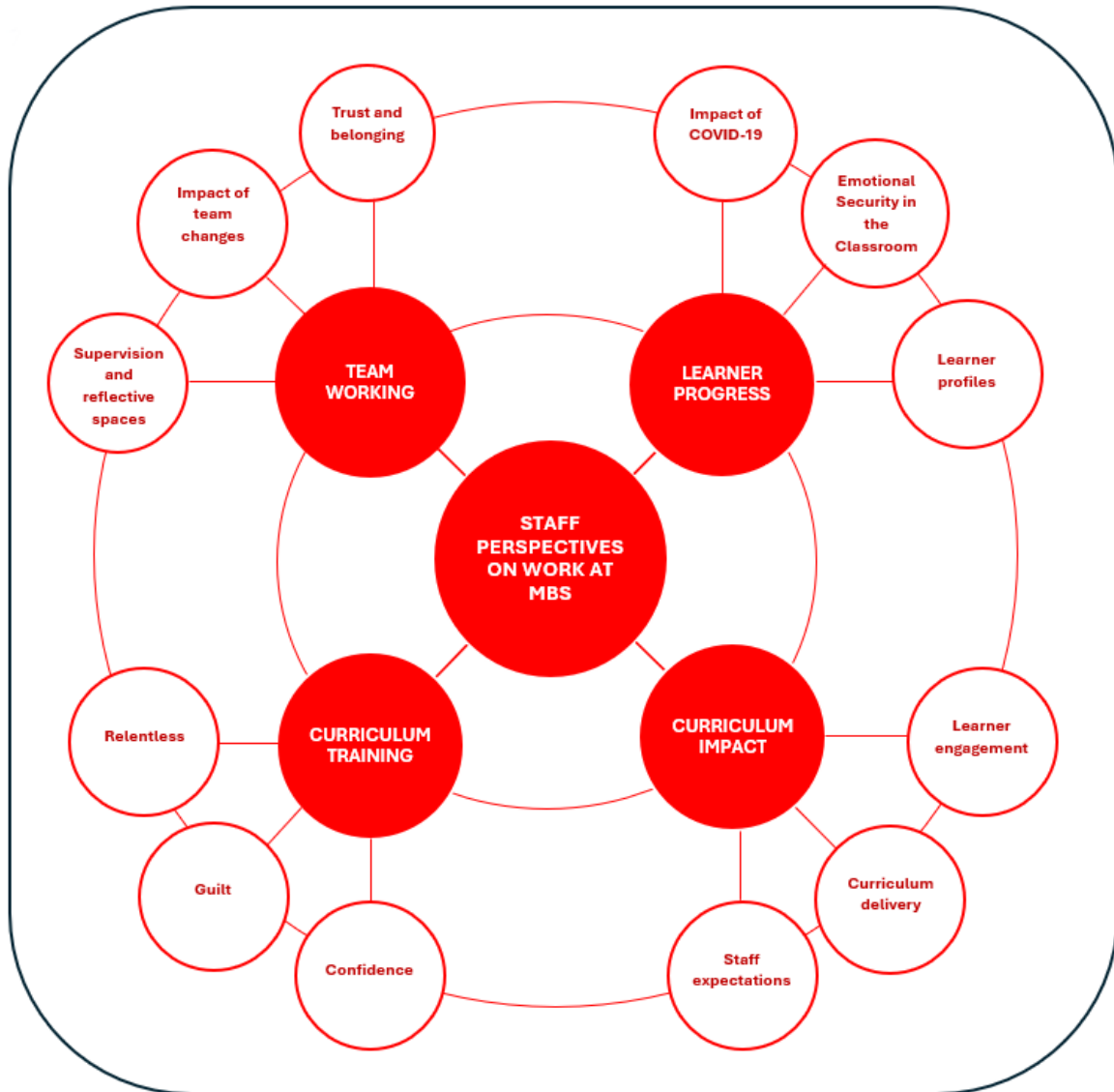
Focus Group interviews were held with MBS staff participants on three occasions. The aim was to investigate staff perspectives on curriculum training, curriculum impact and broader staff perspectives on the work at MB. Table 5 confirms participant roles and attendance to aid the interpretation of results.

Table 5: Table of Focus Group participants and roles

<b>Participant</b>	<b>Role</b>	<b>FGs attended</b>
A	Researcher (external to MBS)	1,2,3
B	Teacher	1,2
C	Teaching Assistant	1,2
D	Teacher	1,2,3
E	Senior Teaching Assistant	1,2,3
F	Teaching Assistant	1

Reflexive thematic analysis was used to generate patterns of shared meaning across the data set, as set out above (Braun and Clarke 2020). Following this process, four key themes with 12 sub themes emerged from the data and these are presented in Figure 5.

**Figure 5: Thematic Map: Staff Perspectives on work at MBS.**



## Theme 1: Team Working

Theme 1 describes the experience of being a member of the MB education team and has three subthemes.

### *Trust and Belonging*

Participants confirmed that working in a therapeutic residential community with children who have all experienced multiple, traumatic events in their lives is 'relentless work' and 'a really tough job'. To work successfully at MBS, staff need to trust one another and offer the highest

levels of support to their colleagues. This in turn promotes a unique sense of belonging to the school:

- *'I think that the nature of the work means that as a group of adults, we need to be able to trust each other 100% and with that trust comes a sense of belonging. And I know that I could turn to any one of my colleagues and .. they would be there to have my back. And I think that is a really unique thing here' (FG2:41C)*
- *'I was trying to explain it to someone outside of work that we work so closely together in our teams ... that it feels like a family - and I think that is a really key part of it' (FG2:43E)*

### *Impact of Team Changes*

Post-Covid, the MBS teaching teams were in flux at the start of the project but became more settled as the project progressed and this was reflected in staff comments made in Focus Group 2 (FG2) when compared with Focus Group 3 (FG3):

- *'One of my teaching assistants only started at the beginning of this year and I've totally felt the pressure of holding the group together, much more intense' (FG2:51B)*
- *'The consistency is important. All of the three classes (now) have stable teams and those children with difficult behaviours are met with a consistent response' (FG3:38D)*

The goal of working within a team that is stable and consistent was recognised in Focus Group 2 as being of benefit to the learners:

- *'If the team working around them is stable and secure, the child group is stable and secure. I've definitely experienced that over the last 6-9 months' (FG2:46 B)*

### *Supervision and Reflective Spaces*

Professional supervision and facilitated Reflective Spaces are key aspects of support for staff that are embedded into practice at MBS. Half-termly individual supervision focuses on what is going on for staff members in life generally, as well as at work. Reflective Spaces take place every 2 weeks and are opportunities for teams to sit together and reflect upon the impact of the work on themselves, their team and their practice.

Supervision was described as central to the well-being of staff, but also provided accountability for what had and had not been achieved in the classroom (FG1:2). Indeed, without supervision the work at MBS would be *'impossible'* (FG1:2).

While supervision could be *'potentially challenging'* (FG3:31D) this was anticipated and valued.

## **Theme 2: Curriculum Training**

Over the course of the project, MBS introduced a number of curriculum changes and training sessions were delivered in an intense period. This theme describes the response of staff to the curriculum training and has three subthemes:

### *Relentless Training*

For some, but not all staff, the curriculum training was demanding and intense:

- *'We've had phonics, maths, writing training, word awareness training. It's quite overwhelming in a short period of time' (FG2:30D)*
- *'Relentless!' (FG2:31B)*
- *'I think I sit in a different space where I don't find it overwhelming' (FG2:37 C)*

But the training was finite and delivered greater clarity to MBS's curriculum content.

- *'When we started this there was too much training... but now we've come out the other side of that' (FG3:22D)*
- *'(The curriculum is) now much more prescribed with schemes of work to follow – which I don't have a problem with' (FG2:30D)*

### *Guilt*

Staff members expressed feelings of guilt and self-doubt as part of the experience of working at MBS, where demands in the classroom are high:

- *'When something goes wrong or you don't feel like you've done a good enough job, you can feel really self-persecuted because you feel like you've let people down and you are your own worst critic' (FG2:44B)*

In addition, there were concerns about the new curriculum and the team's ability to deliver the curriculum effectively:

- *'But there is an element of relentlessness to (the training) and the worry, the guilt, the shame that I've been trained but I'm still not doing it right' (FG2: 32B)*

### *Confidence*

Over time, however, staff reported that the training had been worthwhile and their confidence increased when working with the new curriculum, and that this had affected their relationships in class:

- *'I've grown in confidence and with that comes a different level of engagement with the children. I don't question myself and second guess as I did before, and the children look to me for different things now (such as) containment and nurture' (FG2:54 C)*



- *'Yes personally for me the training has been worthwhile. It took a while to get into it... but the more we've done it, the easier it has got' (FG3:12 E)*

### **Theme 3: Curriculum Impact**

In some respects, the impact of the new curriculum and staff training was dramatic. Staff reported a more consistent approach across classrooms, a renewed confidence within the teaching teams and an excitement among learners who were engaged with the writing tasks.

#### *Staff expectations*

Staff reported that the new curriculum and training led to a more consistent approach and clearer expectations regarding academic progress:

- *'There is now an expectation that this is what (the pupils) are going to do, and this is what is going to happen. It's fairly clear to them that the team is in place and they know that, generally, if they don't do it then - they come back to it. So, it's a consistency of approach, I think' (FG3:14 D)*
- *'I think there is a clearer distinction around what academic progress looks like while there is also a strong drive for academic work being done in the classroom and that is being pushed forward' (FG3:9 D)*
- *'Yes consistency, clear expectations' (FG3:15E)*

#### *Curriculum delivery*

Curriculum training in the early stages of the project had been described as 'relentless' and 'overwhelming' (see above) but once embedded, the new curriculum offered clarity on what was to be taught and this resulted in a renewed confidence for teachers and teaching assistants. In addition, the curriculum was now being delivered irrespective of incidents in the classroom, which might have previously disrupted or derailed learning:

- *'Now we have done a whole term with (the new programmes), this feels more embedded and, personally, I feel more confident in teaching the children with our new programmes' (FG3:8E)*
- *'...the key thing, especially for the TAs, is knowing exactly what needs to be taught' (FG3:10E)*
- *'Perhaps (classroom incidents) are not being tackled as much in a group setting because 'this is maths time now – we'll pick this up in the allotted time or in Circle time'. Whereas previously, some teachers might have said 'That's enough now. Stop (the maths) now -what is going on for you as a group?' (FG3:18D)*

#### *Learner engagement*

In Focus Group 3, an exchange between the two members of staff highlights the excitement generated by the engagement of pupils with the new writing tasks:

- *'Some work on writing took quite a while to get to the final piece. But when they got to their final piece ..' (FG3:34D)*
- *'.. they wouldn't stop writing...' (FG3:34D)*
- *'..they wouldn't stop writing. All the things that they refused to do to begin with – editing, revisiting, working through...' (FG3:36D)*
- *'.. they were choosing to do it... they were choosing to do it at playtimes!' (FG3:37 E)*
- *'..from September to Christmas .. they have just bashed out a ridiculous amount of writing' (FG3: 40E)*

#### **Theme 4: Learner Progress**

##### *Impact of Covid-19*

In Focus Group 1, the pressures of COVID were alluded to on a number of occasions and included a reduction in flexibility of practice and reduced staff energy levels (FG1:5). Individual children also struggled with the transition from education 'bubbles' back into full classes.

- *'A little boy that I worked with when it was part of the (Covid) .. and our relationship there grew. In between going from bubbles back into classes he found it really, really hard to be in the classes and engaging' (FG2:4 C)*
- *'But (engagement) is still not back to where it was at levels pre Covid'. (FG2:20D)*

##### *Emotional security in the classroom*

Emotional security in the classroom has been defined for the project in terms of a child's observed confidence in classroom, trust in adults, self-esteem, behavioural regulation and engagement with learning. Staff members reflected on individual cases and also the progress made by groups of children as they moved through the staged levels of the school (Entry, Confidence and Independence classes):

- *'Yes, we've got one lad ..who is settled most of the time in regards to academic work. His engagement is predominantly through maths but his level is quite high in that' (FG2:12C)*

In Focus Group 1, members referred to how the work at MBS promotes trust with the children and that there are 'raw' new arrivals at the school whose emotional progress can be observed as the classes develop into more settled environments (FG1:13). This was illustrated by the observation of one staff member working across all three levels of the school:

- *'About a month ago, the Independence class had to go off site to go swimming. It was a Bank Holiday so it was really busy and their ability to navigate that setting and that*

*situation, getting changed and public spaces, was really impressive. Then the next day, I was then with our Entry level class and they weren't even safe enough to go into the back garden! And I was just really struck that the children we'd taken out the day before would have been those children some years before. For me, it feels important to see the progress that I do see' (FG2:7D)*

### *Learner Profiles*

The learner profiles of MBS children were understood to be inconsistent, non-linear and even contradictory at times. While a child may be making pleasing progress in some areas of development, the nature of the traumatic events they have experienced plays out in ongoing behavioural incidents:

- *'We are currently really struggling to keep (this child) and others safe physically and (to maintain) the child's placement in the school. But in terms of their learning academically and the relationships that they have built ... they've been doing very well. And when they are focussed on their learning they are making really good progress. But their behaviour has deteriorated so much that it's not safe' (FG2:2B)*

And in another case:

- *'(A child) has been able to come over to school and is spending most of the time in class and doing academic work as well. Again, his behaviour is challenging at times and he finds it really, really hard - but he is in the classroom' (FG2: 5C)*

### **Discussion**

Creating an emotionally secure classroom is a preoccupation for educators in special schools who have the task of creating a learning environment for children with a range of complex interpersonal difficulties. The attachment-based literatures suggest that early trauma and parent-child difficulties can be replayed in the classroom, and teaching staff can be imbued with the feelings which originate from the children's early experiences (Geddes 2017).

In this study, some children made progress in a number of areas (children C, G and L), but there were also some for whom progress appeared to deteriorate (child N). Our findings support other research that progress for children with social, emotional and mental health difficulties is not linear and identifying which children will progress and at which stages is unclear (Berridge [et.al](#) 2020). All except one child had an ACE score between 7 and 9 which is considered extremely high (Burke-Harris 2018).

Children's attachment styles and difficulties relating to adults and peers predominate when children arrive at MBS, and this aspect of being in the classroom needs considerable attention to enable children to feel contained, safe and settled enough to learn. For some, their experience of repeatedly harsh, critical parenting intrudes into their ability to trust teaching staff. Entering this arena can be emotionally demanding for all staff, but this is especially so for staff who

might not have had specific training in this area. There can often be a tension in getting the balance right between focussing on the nurturing and academic aspects of their roles. All teaching staff at MBS have daily team catch ups, regular individual supervision, and facilitated reflective spaces (Price et al 2023). Such levels of professional support is uncommon in most schools whereas MBS prioritises this and sees it as an essential element of therapeutic practice (Gardner, Southall and Baxter 2022). MBS encourages staff to grapple with the ‘messy’ and uncomfortable feelings that arise when these children start to engage with learning, and this emotional work needs recognition and support.

The level of emotional work that staff need to scaffold a group of children through their learning journey, means that teamwork and trust in colleagues is crucial. Teaching infants and young children about their feelings is an intense, time-consuming process, which is generally undertaken in families. This aspect of the children’s social and emotional development has been embraced by the new curriculum and is embedded in the philosophy and approach of MBS (Baxter, Southall and Gardner 2021).

It is important to acknowledge that the project took place shortly after the Covid-19 pandemic and the impact of the concomitant disruption to teaching, learning and family contact cannot be underestimated. Each participating child and adult will have managed the stresses of this period in their own way and the findings of the study should be considered in the context of this unprecedented and disturbing world event.

Ultimately, the findings from the research suggest that improved levels of emotional security in the classroom were evident for some children but not for others. In Table 3 children C, G and L maintained or increased their scores on all four of the measures and, for this reason, qualified claims can be made for the improved emotional security of these specific children in the classroom.

But the degree to which changes to the curriculum led to these improvements is difficult to correlate. The very nature of educational research precludes the control of every variable that might affect a research outcome, and all claims must be held lightly in this context. It could be argued that it is the practical consequences of an intervention that defines its worth and if improved emotional security in the classroom is in evidence, then the cause of that improvement need not be identified in isolation. It could also be that the introduction of the new curriculum galvanised the education team, reinvigorating their sense of cohesion and strengthening areas of weak practice. Everything is interlinked. What is important is that good progress has been made in several cases.

The educational profile of the participating children is, of course, atypical. The life experiences of children at MBS will have been extreme and adverse, and the referral itself is a clear indicator of the challenges each child has presented to their families and/or their former educational environments. Many factors will affect the variables at play on any particular day and these might include the quality and timing of home contact, incidents within the residential

care setting, peer difficulties, diet, sleep, health and the location of the child's journey through their placement (which they know to be finite). These factors are intrinsic to the child's progress in class, but staff feedback suggests that changes to MBS's curriculum and curriculum delivery, may have had a positive impact on learner engagement and esteem. In the staff Focus Groups, participants reported that while the training around three new curriculum developments was intense and relentless, the rewards were worth it. Children were rising to the new expectations being set by staff and children's levels of engagement were noted and remarked upon. Children were asking to stay in at break time to complete written tasks and their academic output also increased with the new curriculum.

For some children, however, improvements in emotional security in the classroom were less clear. Child N, for example, recorded a pronounced fall in her BIOS score from 42 to 28 out of 65. Although her BP scores remained relatively unchanged over time child N also recorded a reduced SEA Scale average score on Subscale 1 from 7.0 to 6.6 out of 10. This range of results suggests that Child N was not able to make the desired progress with confidence in the classroom, trust in adults, self-esteem, behavioural regulation and engagement with learning during the project. There is a context for this of course, and this may be explored in a future research paper. But progress for children who have experienced complex and cumulative trauma in their young lives does not follow a regular pattern. MBS staff describe progress as almost tidal, with certain aspects of socio-emotional functioning developing and then receding before returning. One idea is that this ebb and flow movement might match children's progress in understanding what happened to them and their family, and why they are currently in a residential special school (Farnfield and Onions 2021).

Understanding this fluctuation in child progress contributes to staff resilience (Mansfield 2020). Teamwork, trust and a sense of belonging were identified as key factors in managing the emotional work of supporting these children. Like other therapeutic settings professional supervision was seen as an essential support for staff when undertaking the work (Benveniste 2024). Supervision at MB allows staff to reflect on their practice, the impact the work has on themselves, the class and their colleagues. Acknowledging challenges and articulating difficulties becomes part of an ongoing cycle to help staff find solutions. Supervision can also celebrate successes and professional achievements, with the progress of children always to the fore.

From the moment children arrive at MB the team monitors each child's emotional readiness for the classroom because their preparedness to learn *is* the key driver for all the work. The emphasis is on promoting social and emotional awareness in the children through modelling appropriate ways of responding and reviewing incidents with the child in a calm and empathetic way. However, there is always the need to balance a child's academic and emotional needs (Somers et al. 2019). Staff are sensitive to how they respond in a crisis, as this can make or break a relationship. If a child expects a specific adult response to their challenging behaviour (such as adult anger, positive handling, sanctions) then an alternative, compassionate and thoughtful response from the adult might break the cycle of mistrust. For the child, the adult's

calm and caring response is significant and trusting relationships will emerge from crises, depending on how the crisis is managed.

The qualitative data suggested that during the course of the research project Drysdale staff moved from feeling ‘worried and guilty’ regarding the ‘relentless’ training around the new curriculum to a more consistent classroom approach in the classroom that also raised expectations around learning and behaviour. Staff felt that the trust and belonging within the education team was central to the success of school. This increased confidence and consistency expressed by staff promoted emotional security markers for many of the participating children such as improved self-esteem, engagement with learning, trust in adults, confidence and behaviour regulation. Quantitative data suggested that on the BIOS self-esteem assessment, 60% of the cohort maintained or improved their scores between T2 and T3. On the Boxall Profile Section 1, 70% of children maintained or improved their scores between T1 and T3, while on Strand F, with its focus on being emotionally secure in the classroom, 80% of children maintained or improved their scores. Based on these results, it could be argued that levels of emotional security for most participating children were maintained or improved at a time when adaptations had been made to the school curriculum and curriculum delivery.

#### *Achieving the best outcomes for children*

Drysdale is a residential special school specialising in education and residential therapeutic care for children with extreme social, emotional and mental health difficulties. However, there are findings from this study that can be applied to mainstream educational settings when seeking to achieve the best outcomes for children:

- Child progress is not linear.

This study and previous MB projects (Gutman et al 2018; Farnfield and Onions 2021) confirm the non-linear progress of children with these difficulties. Progress can be erratic and this profile also applies to children in mainstream settings who are contending with social, emotional and mental health challenges. Appreciating the effects of adverse experiences on learning is an important professional position to hold. Academic progress and the development of social-emotional skills may take many terms to become evident as the children must first lay the foundations of trust in adults while simultaneously unlearning their automatic, dysregulated responses. This process takes time. Senior Leaders in mainstream settings must protect the time needed for dedicated practitioners to develop meaningful relationships with children and young people. Improved outcomes will follow, but time is needed to effect this change.

- The progress of each child is a developing story.

This project provides evidence that children can achieve good social and emotional outcomes over time although they may continue to experience difficulties on their developmental journey. For mainstream staff, it is important to remember that while

you may not be the one to bear witness to an engaged, regulated and well-adjusted young person, every positive experience your setting offers on that journey will be remembered. Even if the child is excluded from your setting, the positive experiences you created were not wasted and they will remain with the child as important models for what might be.

- Supervision is vital in educational settings.

Professional supervision is a process of learning, reflection and development that has been central to the Social Care and Health Care professions for decades. This project has highlighted the importance of supervision and facilitated reflective spaces at MBS and mainstream staff should be aware of the benefits. Supervision allows staff to work through the impact of a specific child on their classroom practice, plus their personal and/or family lives. Acknowledging the challenges presented by specific children and their families can help staff to find a perspective on the issues and promote staff resilience and self-care.

- The curriculum underpins engagement.

This study has reported on how developments to the school curriculum can enhance the emotional security of children, as observed through increased confidence in the classroom, trust in adults, self-esteem, behavioural regulation and engagement with learning. Developing an engaging curriculum and setting high expectations in your school will require whole school training to create staff who are confident in their task. This study suggests that achieving consistency across classrooms helps pupils feel secure in their learning and the quality of the curriculum will underpin learner engagement. Where children are enthused and demanding that they sacrifice their break to complete their learning tasks, the likelihood of disruption becomes much reduced.

### **Limitations and future research**

A limitation of the study is the small sample size of both child and staff participants and the project's decision not to link the progress of individual child participants with the views of individual staff participants explicitly. As a case study of one residential school the findings cannot be generalised although recommendations for mainstream practice can be made. In addition, the time period was immediately post Covid-19 and was not a typical snapshot. Furthermore, one of the measures, the SEA Scale, is not yet standardised. Future research might involve a re-examination of the data to explore the progress of individual children, including case studies to contextualise the progress reported.

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## References

- Baxter, L. P., Southall, A. E., and Gardner, F. 2021. Trialling Critical Reflection in Education: The Benefits for School Leaders and Teachers. *Reflective Practice*, *22*(4): 501–514. <https://doi-org.uwe.idm.oclc.org/https://doi.org/10.1080/14623943.2021.1927694>
- Benveniste, T., Madsen, K., Chappel, S. E., and Sprajcer, M. 2024. Burnout in Residential Support Workers: The Impact of Locus of Control and Perceived Supervisor Support. *Residential Treatment for Children & Youth*, *41*(4): 412–430. <https://doi-org.uwe.idm.oclc.org/10.1080/0886571X.2023.2298463>
- Bennathan, M., Boxall, M. and Nurture Group Network (Great Britain). 2017. *The Boxall Profile Handbook (revised)*. London. Nurture Group Network.
- Berridge, D., Luke, N., Sebba, J., Strand, S., Cartwright, M., Staples, E., McGrath-Lone, L., Ward, J. and O’Higgins, A. *Children in Need and Children in Care: Educational Attainment and Progress*. Accessed 10.9.2024 [Final-Report-Nuffield.pdf \(ox.ac.uk\)](#)
- Bion, W. 1962. *Learning from Experience*. New York: Free Press.
- Bowlby, J. 1969. *Attachment: Volume 1 of Attachment and Loss*. London: The Tavistock Institute of Human Relations.
- Braun, V. and Clarke, V. 2006. Using Thematic Analysis in Psychology. *Qualitative Research in Psychology* *3* (2): 77–101.
- Braun, V. and Clarke, V. 2012. Thematic Analysis. In H. Cooper, P. M. Camic, D. L. Long, A. T. Panter, D. Rindskopf, and K. J. Sher (Eds), *APA Handbook of Research Methods in Psychology, Vol. 2: Research Designs: Quantitative, Qualitative, Neuropsychological, and Biological* (pp. 57-71). Washington, DC: American Psychological Association.
- Braun, V. and Clarke, V. 2019. Reflecting on Reflexive Thematic Analysis. *Qualitative Research in Sport, Exercise and Health* *11*(4): 589 – 597.



Braun, V. and Clarke, V. 2021. One Size Fits All? What Counts as Quality Practice in (Reflexive) Thematic Analysis? *Qualitative Research in Psychology*, 18 (3): 328-352. DOI: 10.1080/14780887.2020.1769238

Burke-Harris, N. 2018. *The Deepest Well: Healing the Long-Term Effects of Childhood Adversity*. Houghton Mifflin Harcourt.

Burnett, P. 1998. Measuring Behavioural Indicators of Self-Esteem in the Classroom. *The Journal of Humanistic Education and Development* 37 (2): 107-116.

Byrne, D. 2021. A Worked Example of Braun and Clarke's Approach to Reflexive Thematic Analysis," *Quality & Quantity*, pp. 1–22.

Colley, D. and P. Cooper, eds. 2017. *Attachment and Emotional Development in the Classroom: Theory and Practice*. London: Jessica Kingsley.

Diamond, J. 2009. The Mulberry Bush as a Therapeutic Community: Context and Culture 1948-2008. *International Journal of Therapeutic Communities* 30 (2): 217.

Dockar-Drysdale, B. 1991. *The Provision of Primary Experience: Winnicottian Work with Children and Adolescents*. Free Association Books: London.

Farnfield, S. and Onions, C. 2021. The Role of Affect Regulation in Developmental Trauma: An Empirical Study of Children in Residential Care. *Journal of Child Psychotherapy* 47 (3): 470-490. DOI: 10.1080/0075417X.2021.201542.

Felitti, V.J., Anda R.F., Nordenberg D., Williamson D.F., Spitz A.M, Edwards V., Koss M.P., and Marks J.S. 1998. Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventive Medicine* 14(4): 245-58.

Gardner, F., Southall, A. E., & Baxter, L. 2022. Effectively Supporting Teachers: A Peer Supervision Model Using Reflective Circles. *Teachers and Teaching* 28(3): 369–383. <https://doi-org.uwe.idm.oclc.org/10.1080/13540602.2022.2062727>.

Geddes, H. 2006. *Attachment in the Classroom*. London: Worth Publishing Ltd.

Geddes, H. 2017. Attachment Behaviour and Learning in *Attachment and Emotional Development in the Classroom: Theory and Practice*. Colley, D. and P. Cooper, eds. London: Jessica Kingsley.

Gilgoff, R., Singh L., Koita K., Gentile B., and Silverio Marques S. 2020. Adverse Childhood Experiences, Outcomes, and Interventions. *Paediatric Clinics* 67 (2): 259-273. doi: 10.1016/j.pcl.2019.12.001. PMID: 32122559.

Gutman, L.M., Vorhaus J., Burrows R., and Onions, C. 2018. A Longitudinal Study of Children’s Outcomes in a Residential Special School. *Journal of Social Work Practice* 32 (4): 409-421. DOI: [10.1080/02650533.2018.1503162](https://doi.org/10.1080/02650533.2018.1503162).

Mansfield, C. (ed.) 2020. *Cultivating Teacher Resilience: International Approaches, Applications and Impact*. Singapore: Springer.

Price, H., Jones, D., Herd, J. and Sampson. A. 2018. Between Love and Behaviour Management: The Psychodynamic Reflective Milieu at the Mulberry Bush School. *Journal of Social Work Practice* 32 (4): 391-407. DOI: [10.1080/02650533.2018.1503167](https://doi.org/10.1080/02650533.2018.1503167).

Price, Heather, Joanne Brown, Jane Herd, and David Jones. (2023). A Bit Like You’re Going to Therapy: Reflective Practice Provision at the Mulberry Bush School. *Residential Treatment for Children & Youth* (2023): 1-20.

Somers, C. L., Day, A. G., Sepsey, A. M., Allegoet, D., Baroni, B. A., and Hong, J. S. 2019. Understanding the Residential Treatment Center School Academic Environment: Perspectives of Students and Teachers. *Residential Treatment for Children & Youth*, 38(2): 118–136. <https://doi.org/10.1080/0886571X.2019.1622167>

## Appendix 1

### Boxall Profile Section 1 Developmental Strands Summary

Strand	Developmental Focus	Maximum score	Competently functioning range
A	gives purposeful attention	20	18-20
B	participates constructively	12	10-12

C	connects up experiences	12	9-12
D	shows insightful involvement	20	16-20
E	engages cognitively with peers	8	7-8
F	is emotionally secure	12	11-12
G	is biddable, accepts constraints	16	13-16
H	accommodates to others	20	18-20
I	responds constructively to others	8	6-8
J	maintains internalised standards	8	7-8

Bennathan, M., Boxall, M. and Nurture Group Network (Great Britain) (2017) *The Boxall Profile handbook (revised)*. London. Nurture Group Network.

## Appendix 2

### Behavioural Indicators of Self Esteem (BIOS) items

BIOS item number	BIOS item	Scoring: 1 Never, 2 Seldom, 3 Sometimes, 4 Often, 5 Always	Reverse Score
1	Was confident in what he/she did	1-5	No
2	Was withdrawn from others	1-5	Yes
3	Appeared proud of him/herself	1-5	No
4	Gave limited responses	1-5	Yes
5	Was interested in what was happening	1-5	No
6	Was alone and isolated	1-5	Yes

7	Displayed good communication skills	1-5	No
8	Lacked satisfaction with own performance	1-5	Yes
9	Interacted well with other children	1-5	No
10	Needed constant reassurance	1-5	Yes
11	Displayed leadership qualities	1-5	No
12	Was interactive with others	1-5	No
13	Appeared happy with him/herself	1-5	No

Burnett, Paul C. 1998. Measuring behavioural indicators of self-esteem in the classroom. *The Journal of Humanistic Education and Development* 37 (2): 107-116.

### **Appendix 3**

#### A sample of the SEA Scale assessment

Child's name	DOB	Date of completion	Start of placement	Year 1	Year 2	Year 3
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Please answer every question by circling the number that best indicates how often the child...

Never

Always

1. can engage in imaginative play by themselves.	0	1	2	3	4	5	6	7	8	9	10
2. participates in imaginative play in peer groups.	0	1	2	3	4	5	6	7	8	9	10
3. is able to talk about the emotions they are feeling.	0	1	2	3	4	5	6	7	8	9	10
4. lashes out (e.g., hits, shouts, damages property) when faced with a new situation.	0	1	2	3	4	5	6	7	8	9	10
5. displays disruptive or harmful levels of aggression or intimidation when disagreeing with other children.	0	1	2	3	4	5	6	7	8	9	10
6. shares toys and equipment with their peers.	0	1	2	3	4	5	6	7	8	9	10

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## Appendix 4

### CYW Adverse Childhood Experiences Questionnaire (ACE-Q) Child

**Section 1.** *At any point since your child was born...*

- Your child's parents or guardians were separated or divorced
- Your child lived with a household member who served time in jail or prison
- Your child lived with a household member who was depressed, mentally ill or attempted suicide
- Your child saw or heard household members hurt or threaten to hurt each other
- A household member swore at, insulted, humiliated, or put down your child in a way that scared your child OR a household member acted in a way that made your child afraid that s/he might be physically hurt
- Someone touched your child's private parts or asked your child to touch their private parts in a sexual way
- More than once, your child went without food, clothing, a place to live, or had no one to protect her/him
- Someone pushed, grabbed, slapped or threw something at your child OR your child was hit so hard that your child was injured or had marks
- Your child lived with someone who had a problem with drinking or using drugs
- Your child often felt unsupported, unloved and/or unprotected

Burke-Harris 2018

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