

Trauma, adoption & education

Education has long been a key issue for adoptive parents and special guardians. In the last few years, the Department for Education has increasingly acknowledged the importance of meeting the needs of permanently placed children, who are now entitled to priority admission and to the pupil premium plus grant. In this excerpt from PAC-UK's Practice Guide for Schools (<http://www.pac-uk.org/education>), Julia Clements explains the impact of trauma and in-utero experiences on children's cognition, learning and attainment. Emma Gore Langton, Head of PAC-UK's Education Service, then provides an up-to-date picture of what is known about the educational outcomes of permanently placed children.

Excerpt from PAC-UK's Practice Guide by Julia Clements

Chronic trauma and its effects on children's cognition, learning and attainment in school.

It has been found that both child abuse and child neglect are independently associated with impaired cognition and academic functioning in adolescence (Mills, Strathearn, Alati, O'Callaghan, Najman, Williams and Bor 2011). This study found that child neglect has developmental effects that are independently at least as deleterious as abuse and children who experienced both abuse and neglect were doubly affected. As many children experience both abuse and neglect, we can expect the effect on their cognition, learning and attainment in school to be significant.

Children who have been subjected to neglect (i.e. little or no care-giving) may experience the neglect as a 'trauma of absence'. Children subjected to severe neglect have been found to have atrophy in parts of the brain – that is, brain cells that are not used die off in what is known as 'pruning' (Schwartz and Begley 2002). It has also been found that the circumference of the brain of severely neglected children is significantly smaller than the norm (Perry 2002). Severely neglected children have diminished activity in parts of the brain responsible for language and emotional understanding and expressiveness (Music, 2011).

During fight/flight/freeze, the neocortex, which is responsible for more developed cognitive capacities such as higher order thinking and reasoning, is barely active (Music, 2011). Hence, the traumatised child's ability to engage in tasks which demand executive functioning is much reduced, as is their capacity for impulse control and empathy.

Trauma and executive functioning

Executive functioning describes the processes necessary for managing oneself and one's resources in order to achieve a goal. It is an umbrella term for the neurologically-based skills involving mental control and self-regulation. When in fight/flight/freeze mode, more basic ways of functioning and surviving take over, and children in fight/flight/freeze are likely to have difficulties with the following aspects of executive functioning:

Inhibition – the child may have difficulty in stopping their behavior at the appropriate time. They may appear impulsive and out of control. E.g. when challenged on the playground by a member of staff, the child may run and climb the fence.

Shift – the child may have difficulty in moving from one situation to another and may find it hard to think flexibly in order to respond appropriately to the situation. E.g. the child may be resistant when asked to stop what they are doing and line up for assembly.

Emotional control – the child may have difficulty in modulating their emotional responses by bringing rational thought to bear on feelings. E.g. the child may burst into tears and be difficult to comfort when they believe another child has “told” on them to an adult.

Initiation – a child may have difficulty in beginning a task and find it hard to generate ideas, responses, or use problem-solving strategies. E.g. the child may not have started their work even though the lesson is well underway.

Working memory – the child may have difficulty with holding information in mind for the purpose of completing a task. E.g. the child may not be able to tell you what they are supposed to be doing, even though you have just given them the instructions.

Planning/Organisation - the child may have difficulty with managing current and future- oriented task demands. E.g. the child may be haphazard in how they complete tasks and have little clear idea about what they need to do next.

Organisation of materials - the child may have difficulty with imposing order on work, play, and storage spaces. E.g. the child may not have the correct equipment for a task, may lose things and seem disorganised.

Self-monitoring - the child may have difficulty with monitoring their own performance and measuring it against some standard of what is needed or expected. E.g. the child may not be able to think about their work and talk about it or evaluate it.

Foetal alcohol spectrum disorders (FASD)

In addition to the executive functioning difficulties that many traumatised children experience, it is worth mentioning separately the difficulties in school faced by children who are diagnosed with foetal alcohol spectrum disorders (FASD). FASD is an umbrella term for several diagnoses that are all related to prenatal exposure to alcohol i.e. exposure to alcohol while a baby is still in the womb. The term spectrum is used because each child with FASD may have some or all of a spectrum of mental and physical challenges. In addition each individual with FASD may have these challenges to a degree or spectrum from mild to very severe. Many children with FASD have an IQ within the “normal range”, however, in the school setting the child with FASD may have difficulties due to:

- poor concentration
- being easily distracted
- having difficulty following instructions
- poor ability to organise themselves
- short-term memory loss
- inconsistent performance
- vulnerable to bullying, other abuse and easily led into trouble or influenced by others
- poor social skills, including friendships, turn taking, lining up
- inability to transition from one activity to another
- easily frustrated and can display oppositional / defiant behaviour
- physical disabilities, especially affecting fine and gross motor skills
- struggle with concepts, in particular, time, maths and money (adapted from the FASD trust website www.fasdtrust.co.uk)

What is the impact of trauma on school attainment?

Emma Gore Langton

Given all of the above, it may not come as a surprise that children with histories of trauma have poorer levels of educational attainment at school and increased prevalence of special educational needs (SEN). In 2013 just 15% of children in UK public care attained five or more GCSEs at grades A*-C including English and maths, compared with 58% of non-looked after children (DfE, 2013). Thirty four percent of looked after children leave school with no formal qualifications, compared with 1.2% of all young people (McAuley & Davis, 2009). Sixty eight percent of looked after children have special educational needs, with 29% having a statement of SEN; this can be compared with an SEN rate of 19% in the non-looked after population, with 3% having statements (DfE, 2013). ‘Social, emotional and behavioural difficulties’ is the most common category of need for this group of children (DfE,

2013). Consistent with this, children in care are twice as likely as the general population to be permanently excluded from school (0.15% compared with 0.07%), and three times more likely to receive a fixed term exclusion (11% compared with 4%) (DfE, 2013).

In contrast, far less is known about the educational outcomes for permanently placed children; data has historically not been collected, perhaps because these children have been indistinguishable from their not looked after or adopted peers.

The UK literature has tended to focus on adoptees who were voluntarily relinquished as infants in previous generations (e.g. Maughan, Collishaw & Pickles, 1998), and on international adoptees who have experienced profound institutional deprivation (e.g. Beckett, Maughan, Rutter, Castle, Colvert et al., 2007). However, the UK's contemporary population of adopted children is far more similar to the Looked After population in terms of their early experiences. Indeed, DfE (2014a) figures show that 70% of children who go on to be adopted have experienced abuse and neglect, compared with 60% of the overall population of children in public care. We would therefore expect permanently placed children to have some difficulties in school.

The launch of Pupil Premium Plus in 2014 for permanently placed children means that Local Authorities and the Department for Education can begin to gather information about educational outcomes for this group. The first wave of data, published by the DfE in July 2014 (DfE, 2014), covered the 24,160 children declared by their parents or special guardians in January 2014; the DfE estimates that they represent under 60% of the true number of permanently placed children of compulsory school age.

As eligibility for pupil premium plus was initially restricted to children adopted after 30th December 2005, this sample is likely to be skewed towards children placed at older ages. In addition, parents and guardians had to self-declare their child's adoptive status to the school at short notice. 2013 Key stage 2 data were available for 1050 permanently placed children, 2290 looked after children, and 519,660 children not looked after or adopted. In addition, children in Year 7 and above were retrospectively matched to their Key Stage 2 data from previous years.

The table below summarises data for the years in which aggregate data for reading, writing and maths were available:

	Adopted, SGO & RO	Looked After	Non-Adopted
2012 % achieving Level 4 in reading, writing & maths	46	42	74
2013 % achieving Level 4 in reading, writing & maths	49	45	75

Data extracted from 'Key Stage 2 attainment for children recorded as adopted from care, DfE (2014)'

These very concerning data show that despite being adopted out of care, permanently placed children's educational attainment is much more similar to that of their looked after peers than their peers who have never been looked after or adopted.

What can we do?

In its explanation of the Pupil Premium Plus, the DfE said:

We believe that teachers and schools have a vital role to play in helping these children emotionally, socially and educationally by providing specific support, to raise their attainment and address their wider needs.

PAC-UK's Education Service supports schools, families, education and adoption professionals by providing:

- training and consultation on the impact of attachment, trauma and loss
- education focused groups and consultation for parents and guardians
- reflective groups for school staff
- continuing professional development for adoption and education professionals
- a specialist Educational Psychology Service

References

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