Impact Evaluation Report

Attachment Aware Schools Pilot Project Phase 1

Bath and North East Somerset Virtual School

Introduction

This report provides an impact evaluation of the Attachment Aware Schools project commissioned by Bath and North East Somerset’s Virtual School in 2014-2015. B&NES Virtual School worked in collaboration with Kate Cairns Associates and Bath Spa University to undertake training for practitioners from numerous schools in the area. This training was commissioned in order to improve the educational outcomes and wellbeing of Looked After Children and other vulnerable children in need, or at risk. Looked After Children are one of the lowest performing groups in terms of educational outcomes, internationally (Sebba et al., 2015). The project also addresses key government policy which seeks to raise the attainment gap for disadvantaged pupils (DfE, 2014) and improve provision for children with SEN (DfE, 2013). It also reflects key findings from research reviews which highlight the most effective intervention systems for children with additional needs. For example, the project’s actions correlate with many of the key messages within the recent report ‘Narrowing the Gap’ from the Centre for Excellence and Outcomes in Children and Young People’s Services (C4EO, 2010). The project also resonates with the new SEN/D reforms (DfE, 2013) in addressing children with social, emotional and mental health difficulties (SEMH) and addresses Ofsted’s new Common Inspection Framework in relation to pupils’ personal development, behaviour and welfare. The Department of Health (DoH) report ‘Future in mind’ also identified as a key issue, ‘significant gaps in data, information and system levers’ and the need to promote positive mental health and wellbeing for children and young people, including the mental health needs of children and young people from vulnerable backgrounds (DoH, 2015).

The Attachment Aware Schools project is premised on the basis that ‘an attachment-informed approach for all professionals working with children, including those within the universal services, offers the best prospect for effective early intervention for children, whatever their age or family situation’ (Furnivall et al., 2012). It provides a coherent and integrated theoretical framework, discourse and practice for all professionals who work with children and young people. Whole school practice and targeted interventions, informed by research on attachment needs and trauma, are
increasingly being recognised as significant in helping to support children with SEMH difficulties (Parker et al., 2015; Furnivall et al., 2012; NICE, 2015). NICE (2015) has recently reported that:

Behaviours associated with attachment difficulties such as disruptive behaviour in the classroom and difficulties forming relationships with teachers or positive peers are commonly seen in schools. Some children may display clinginess to teachers, older children may have difficulties with boundaries. For teachers it is really important to be able to ‘read’ these behaviours and respond appropriately. It is a concern that the majority of teachers will not have covered such issues in their training.

A recent review has reported that teachers and school staff were identified by Looked After Children as the main determinants of educational progress (Sebba et al., 2015). Attachment issues and trauma affect children’s relationships with peers, teachers and support staff (Pianta, 1992; Cozolino, 2013). Securely attached children are more likely to attain higher academic grades, have greater emotional regulation, social competence and willingness to take on challenges and have lower levels of ADHD and delinquency (Bergin & Bergin, 2009). It has been suggested that ‘schools may be the optimum sites for buffering the impact of stress, building resilience and enhancing individual capacities for learning’ (Nagel, 2009).

There has been increasing recognition of the need to address such issues on a national level from a range of major national organisations, such as the Department for Education, and the National Institute for Health and Care Excellence (NICE, 2015), has called for education professionals to be trained in understanding attachment difficulties; how they can present, how these difficulties can affect learning and behaviour and how they can support children and young people with attachment difficulties.

The Project team considered that Attachment Aware Practitioners are needed because (Rose et al., 2012):

- the nature of a child’s primary attachments (caregivers) lay the foundations for socio-emotional well-being and a child’s capacity to learn
- educators, themselves, can facilitate ‘attachment-like’ relationships with pupils (i.e., nurturing and responsive) and adopt attachment-based support strategies, particularly with challenging and vulnerable pupils, in order to enhance learning opportunities
- secure attachment relationships correlate strongly with higher academic attainment, better self-regulation, well-being and social competence

**Executive Summary**

1. Among schools that participated in the programme, there were significant improvements in academic achievement (including reading and writing) between Time 1 (end of terms 1-2, 2014) and Time 2 (end of terms 3-5, 2015).
2. There was an accompanying decrease in pupils not meeting expected levels of attainment, signifying how such approaches can lower the attainment gap.
3. In terms of the impact on pupils regarding the behavioural indices, there was a significant decrease in sanctions (lessons and incidents) observed between Time 1 and Time 2.
4. The Strengths and Difficulties Questionnaire (SDQ) which was used to assess strengths and difficulties experienced by a child, revealed a statistically significant reduction in symptoms (overall difficulties).

5. Overall, 97% of professionals agreed or agreed that sometimes Attachment Aware Schools training and the strategies impacted positively on their professional practice, 95% agreed or agreed that sometimes it impacted positively on adult self-regulation, 99% agreed or agreed that sometimes it impacted positively on pupils’ behaviour.

6. There was a positive impact on professional practice through the improved consistency in using attachment aware strategies like Emotion Coaching, through staff becoming more aware of pupils’ emotions, through improved understanding of the reasons behind pupils’ behaviour and their underlying needs, through staff looking for issues that may initiate poor behaviours and through staff having practical behavioural strategies to support pupils which provided them with a clear structure for behaviour management.

7. There was a positive impact on adult self-regulation, as staff were better able to cope with challenging behaviours; they had increased empathy and understanding as well as more confidence in tackling difficult behaviours and their relationships with each other, with parents and with pupils improved.

8. There was a positive impact on pupils’ behaviour as the strategies helped pupils to have a better understanding of their own emotions; they were more able to control their emotions and subsequent behaviours, leading to improved behaviour and they improved their ability to problem solve and had better relationships with staff.

9. An Attachment Aware Schools audit revealed that between Time 1 and Time 2, participating schools: improved their professional knowledge, competence and team work; created an improved attachment aware environment and direct support for adults and children; and increased the awareness and practice of senior leadership.

10. Case study examples and vignettes indicate significant improvements in vulnerable pupils’ behaviour, attainment and ability to self-regulate.

Aims of the Attachment Aware Schools Project

The project’s main aims were:

- To promote positive learning outcomes and well-being for all children, whilst supporting the needs of children who have unmet attachment needs and those who have experienced trauma and neglect
- To provide schools with new approaches to managing and responding to children’s emotional and behavioural needs and help all children to understand and regulate their own behaviour
- To implement whole school approaches and facilitate more targeted interventions to meet a spectrum of need
The project’s keys aspirations were:

- The headteacher and governors commit the school to becoming an Attachment Aware School
- The school designates an Attachment Lead Teacher
- Training on attachment, trauma and nurturing strategies is run regularly for all staff
- Support is made available for parents and carers
- Attachment and trauma aware strategies are implemented

Key principles underlying the Project:

- To be child-centred and acknowledge children’s different attachment styles
- To create nurturing relationships to promote children’s learning and behaviour and satisfy children’s innate need to have a secure ‘sense of belonging’ and feel safe
- To acknowledge adults’ roles as a potential secondary attachment figure that can help to reshape insecure attachment behaviours and support the development of more secure ones
- To create appropriate nurturing infrastructures for children with emotional and behavioural impairments (as we do for physical and learning impairments)
- To reduce permanent and fixed-term school exclusion, as far as possible, for children and young people with attachment difficulties
- To utilise, in the first instance, whole school strategies that would avoid the dangers of stigmatising or problematising individuals, such as Looked After Children
- The belief that every child has the right to an appropriate education and to maximise his or her educational and life opportunities

As the former Children’s Commissioner for England, Dr Maggie Atkinson, has declared, ‘Every teacher, and every school, should be so aware and so practising, because it is the duty of the public body to adapt to the child, not the other way round (Rose et al., 2014).

Theoretical and Research Context of the Attachment Aware Schools Project

The National Institute of Excellence (NICE, 2015) has recently reiterated the extensive, cross-cultural research which demonstrates how attachment is an important influence on ‘school students’ academic success and wellbeing at school’. Attachment theory is derived from the work of Bowlby (1988). At its core, it refers to the instinctive need for humans to feel protected and safe which, in turn, allows them to explore their world more confidently. Bowlby’s work and subsequent research shows how children develop either secure or insecure attachments with their main caregiver, as a result of the quality of their early experiences. Secure attachments develop from nurturing relationships and support mental processes that enable the child to regulate emotions, reduce fear, attune to others and have self-understanding and insight, empathy for others and appropriate moral reasoning (Sroufe & Siegel, 2011). Insecure attachments can develop if early interactions are more negative, insensitive, unresponsive, inappropriate and/or unpredictable, and can have long-term deleterious consequences. If a child cannot rely on an adult to respond to their needs in times of
stress, they are unable to learn how to self-soothe, manage their emotions or engage in reciprocal relationships later on (Sroufe & Siegel, 2011). They do not necessarily develop a view of themselves and others as trustworthy, safe, dependable and deserving of care (Bowlby, 1988).

A child’s natural, initial dependence on others provides the experiences and skills to learn how to cope with frustrations, develop self-confidence and pro-social relationships with others and eventually, act independently (self-regulate). External experience is absorbed and transformed into an internal mental state known as ‘symbolic representation’ which informs behavioural responses and has a recursive action. According to Bowlby, early experiences are symbolically represented in the form of an internal working model. This internal working model appears to be primarily regulated by the brain and body’s stress response system and the social engagement system, laying the foundations for the executive function skills needed for learning (Porges, 2011; NSCDC, 2012).

Attachment theory has important implications for teachers as it highlights how children’s receptivity to learning is affected by their early relationships and how close, positive relationships in school can foster more effective learning (Kennedy & Kennedy, 2004). Since Pianta’s (1992) pioneering work, linking attachment theory to teacher-child relationships, research has inextricably linked attachment to school readiness and school success (Bergin & Bergin, 2009; Commodari, 2013; Geddes, 2006). Indeed, Riley (2009) considers that the application of attachment principles to the dyadic teacher-pupil relationship ‘offers teachers new ways to inform and improve their practice’ going on to advocate that ‘the adult attachment model of reciprocal care-giving and care-seeking is a more appropriate lens through which to view the teacher-student relationship’. Riley (2009) and Kennedy and Kennedy (2004) all cite the evidence which shows how children will form ‘bonds’ with significant adults outside the family, such as teachers, who can become ‘attachment figures’ to pupils. Close and supportive relationships with teachers have demonstrated the potential to mitigate the risk of negative outcomes for children who may otherwise have difficulty succeeding in school (Driscoll & Pianta, 2010).

Indeed, Davis (2003) highlights various studies which have shown how the quality of teacher-child relationships shape classroom experiences and influence children’s social and cognitive development and the literature on attachment is able to offer new insights into the nature of such relationships and their consequences on learning and behaviour (Verschueren & Koomen, 2012). For example, Bergin and Bergin (2009) point to the evidence of how pupils’ attachment styles to caregivers can parallel the attachment relationship between teacher and child and how ‘secure teacher-student relationships predict greater knowledge, higher test scores, greater academic motivation, and fewer retentions or special education referrals than insecure teacher-student relationships’. They suggest a need to acknowledge and forge ‘attachment-like’ relationships between pupil and educator, within the realms of professional boundaries.

Kennedy (2008) offers an interdisciplinary theoretical model for the role that teachers can play in helping to ‘rehabilitate’ a pupil’s internal working model with a subsequent impact on academic progress. She writes that teacher-pupil relationships may offer a context for an insecurely attached child to ‘repair’ or ameliorate their internal working model through more positive relational experiences and highlights how internal working models can shift (despite operating as a prototype from early experiences) throughout the life span. Although more research is needed to ascertain the positive effect secure attachments between pupil and teacher might have, the evidence implies that schools might play a role in affecting constructive changes in attachment representation with a
subsequent impact on academic progress (Bergin & Bergin, 2009; Kennedy, 2008; Kennedy & Kennedy, 2004; Riley, 2009; Verschueren & Koomen, 2012).

Attachment theory has recently received support from neuroscientific research, particularly in the field of neurobiology. Several authors have linked the findings emerging from neuroscience (Balbernie, 2001; Cozolino, 2013; Kennedy, 2008; Schore, 2001; Siegel, 2012; Trevarthen, 2011). For example, Siegel (2012) demonstrates how warm, responsive relationships and interactions (attunement) help to create the cognitive-affective neural structures of the internal working model, creating the prototype for future relationships. Schore’s (2001) work has shown how the early, emotionally laden attachment communications that occur between infant and caregiver help to wire the maturing brain in areas essential for affect regulation.

Kennedy and Kennedy (2004) also draw attention to the evidence which suggests how teachers may misinterpret insecurely attached children’s behaviour as uncooperative, aggressive, demanding, impulsive, withdrawn, reactive and/or unpredictable. These judgments of behavioural manifestations of underlying inner experiences and relationship history, affect teachers’ attitudes and responses to behaviour. It is suggested that teachers need to understand the meaning behind such behavioural displays and the needs that are being expressed in such defensive behaviour (Kennedy, 2008). This is a necessity, given that it is estimated that at least one third of children have an insecure attachment with at least one caregiver which, in turn, will affect their school performance and behaviour (Bergin & Bergin, 2009). O’Connor and Russell (2004) indicate that 98% of children they surveyed had experienced one or more trauma event and for one in four this trauma resulted in behavioural and/or emotional disturbance. Clarke et al. (2002) and Moss and St-Laurent (2001) also indicate that as many as 80% of children diagnosed with ADHD may have attachment issues.

Mindful of the debates that currently contribute to educational neuroscience (Ansari et al., 2011; Howard Jones, 2014; Hruby, 2012), a key message about the neuroscience of attachment for education is how the brain’s attachment system takes priority over the brain’s exploratory system. Thus, feeling safe and secure is more important than learning (Sroufe & Siegel, 2011). By recognising the critical role of neuroplasticity (the process by which the brain’s neuronal connections are continually shaped by experience), positive attachment-like relationships, such as those that can exist in school contexts, can also contribute to the reparation of impaired internal working models (Schore, 2003). Verscheuren and Koomen (2012) add to the claim that relational-based teaching might play a moderating role in supporting ‘at risk’ children. Therefore, teachers can function as both a safe haven and a secure base from which a child can explore and learn (Verscheuren & Koomen, 2012). This suggests that, at the very least, ‘attachment-like’ or ‘ad hoc’ attachment relationships with pupils and the utilisation of attachment-based systems and strategies to foster such relationships, may be beneficial for all children, but particularly for those who may have insecure working models. Both Bergin and Bergin (2009) and Verschueren and Koomen (2012) do, however, offer a cautionary note that such secondary attachment relationships are not necessarily of the same ilk or as bonded as those with primary caregivers. Hart’s (2010) consideration of psychodynamic strategies based on attachment theory for supporting children’s behaviour draws attention to the importance of the relational model and relational actions that address the meaning of behaviour, rather than merely the behaviour itself. There is a range of literature that now attests to the importance of stable, caring and trusting relationships which promote success at school and
beyond (Kennedy, 2008). Such approaches are rooted in humanist ideology and notions of unconditional positive regard and the encouragement of critical thinking.

In England, there are a number of influential practice-based guides such as Cairns and Stanway (2004) and Bomber (2007, 2011) which offer an effective model, rooted in attachment practice. However, they tend to be evidence informed rather than evidence based. This pilot project is an attempt to help to contribute to the evidence base for an Attachment Aware Schools’ model. This work has been endorsed by a recent report on the educational attainment of Looked After Children which suggests:

Initiatives to support pupils with social, emotional and mental health difficulties need to become more widely known and studied to address the educational problems we have highlighted including school exclusions (both external and internal in which young people may not be accessing high quality teaching) and school transfer. These initiatives include ... ‘attachment aware’ schools and ‘emotion coaching’ for pupils (Rose et al., 2015). Young people attributed their educational progress to the characteristics, skills and commitment of individual teachers and carers (Sebba et al., 2015).

Outline of Training Programme

Attachment Aware Schools is a whole school programme that supports the emotional and social development of all children, in addition to targeted support for the most vulnerable learners. It offers practical, effective tools and techniques, underpinned by a programme of training and online training support. The core training incorporates an understanding and insight into attachment theory, the neuroscientific evidence which appears to support the research on the attachment process and an outline of the impact of trauma on the developing brain. Participants were expected to undertake a small-scale action research project implementing attachment aware strategies, which included tracking targeted pupils.

A key aspect of the Attachment Aware Schools model is the utilisation of Emotion Coaching as a useful tool, or approach, in supporting children’s behaviour and well-being. This is based on the work of John Gottman and colleagues in the USA. It emphasises the importance of considering the emotions which underlie particular behaviours ‘in the moment’, before dealing with limit setting and problem solving (Gottman et al., 1997). Emotion Coaching views all behaviour as a form of communication and makes an important distinction between children’s behaviour and the feelings that underlie that behaviour. A key belief is that all emotions are acceptable, but not all behaviour. It is about helping children to understand their different emotions as they experience them; why they occur and how to handle them, leading to happier, more resilient and well-adjusted children.

Emotion Coaching resonates strongly with attachment-based strategies and has been correlated to secure attachment (Chen et al., 2011). The main research evidence base for Emotion Coaching comes from America and Australia. Randomised Control Trials in America have demonstrated that Emotion Coaching enables children to have fewer behavioural problems, achieve more academically in school, be more emotionally stable and resilient, be more popular and have fewer infectious illnesses (Gottman et al., 1997). Although research has not specifically focused on looked after or adopted children, Emotion Coaching has been used to support children with conduct behavioural
difficulties (Havighurst et al. 2013; Katz & Windecker-Nelson, 2004), depression (Katz & Hunter, 2007) and those exposed to violent environments, including interparental violence, maltreatment and community violence (Katz et al., 2008; Cunningham et al., 2009). Emotion Coaching has also been used effectively to improve the psychological functioning of children who have experienced complex trauma (Murphy et al., forthcoming), as well as reduce the externalising behaviours of children with ASD (Wilson et al., 2013). It has also recently been identified as a protective factor for children with ODD (Dunsmore et al., 2012) and for children at risk (Ellis et al., 2014). Emotion Coaching instils the tools that will aid children’s ability to self-regulate their emotions and behaviour (Shortt et al., 2010). Our findings from this work have been reported elsewhere (Gilbert et al., 2014; Rose et al., 2015; Rose et al., 2016; Gus et al., 2015) and our evidence appears to complement the work being undertaken in the USA (Gottman et al., 1997; Katz et al., 2012; Shortt et al., 2010) and Australia (Havighurst et al., 2012; Havighurst et al., 2010), which points to the efficacy of Emotion Coaching in supporting behaviour management across the age range.

Havighurst et al. (2009) have highlighted how Emotion Coaching can contribute to children’s ‘internal working models’. Internal working models are created in the first few years of life via social interactions with caregivers and they guide children’s thoughts, feelings and behaviour. Attachment research has shown how ‘emotion-focused talk’ by the adult can teach children to use appropriate strategies to cope with stress, literally helping to build the architecture of their brains (Bowlby, 1998; Schore, 1994). This links to the idea of reflective functioning as well as to the work of Vygotsky (1986) and his notion of an ‘internal dialogue’. Emotion Coaching assists children to develop an internal dialogue about social and emotional experiences and aids them in regulating their emotions and social behaviour. It is, essentially, an empathic and dialogic process which enables children to: feel appreciated; to explore their feelings and relationships; to reflect with others; and to confront their anger, fear and anxiety, rather than projecting them through challenging behaviour (Matthews, 2006). The narrative provided by Emotion Coaching creates a communicative context for a child’s emotional experiences to be explicitly and meaningfully processed within a relational dyad, and resonates with Siegel’s work on interpersonal neurobiology (Siegel, 2012). It can operate as a stabilising factor to enable children to focus their energies on learning and to help them moderate the challenges of school (see Annex C for more information regarding this key strategy).

The actual programme entailed:

- Full day training on attachment and trauma and the implications for learning
- Half day workshop on emotion coaching
- Half day workshop on project and research methodology and leading change
- Half day briefing for heads and governors
- Half day workshop on needs and interventions (drawing on sensory integration strategies, based on Theraplay techniques and sensory integration theory)

Another important part of the training included opportunities for online learning through KCA to extend and deepen their understanding. Mentors were provided to support the learning and reflective process. The online courses made available were:

- Attachment & brain development
- Emotion coaching
- Secondary trauma
Findings of Impact Evaluation

Findings are drawn from the following data sources: Tracking Records of behaviour, academic progress, attendance, social and emotional progress, communication, Strengths and Difficulties Questionnaires, Staff Questionnaires, audit data.

The report of findings is in the following parts:

Part A – Children & Young People (C&YP) Progress Data
Part B – Impact on professionals and practice – quantitative data
Part C – Impact on professionals and practice – qualitative data
Part D – Audit data

In addition, an illustrative case study of a child can be found in Annex A. This demonstrates how being an Attachment Aware School and using trauma-informed practice can significantly improve individual children’s wellbeing and attainment in school. The Annex also includes four vignettes which, likewise, demonstrate the impact of being an Attachment Aware School and how strategies like Emotion Coaching can support children’s behaviour and wellbeing.
Part A: C&YP Progress Data

Among schools that participated in the programme from the B&NES area, significant improvements in academic achievement (including reading and writing), decreases in sanctions (lessons and incidents), and improvements in overall difficulties were observed between Time 1 (end of terms 1-2, 2014) and Time 2 (end of terms 3-5, 2015), as detailed below. All other variables (Maths, English, exclusions, attendance, and other sub-items within the SDQ) failed to reach statistical significance.

**Academic achievement**

Academic achievements including reading, writing, maths and English were tracked at both Time 1 (end of terms 1-2, 2014) and Time 2 (end of terms 3-5, 2015) to explore for differences within schools in B&NES that took part in the programme. Improvements in reading and writing were observed and are detailed below.

**Improvement in reading achievement**

While there was a decline in the number of children not meeting expectations in reading (33 were not meeting expectations at Time 1 and 28 were not meeting expectations at Time 2), this difference failed to reach statistical significance (Fig 1).

Figure 1. Pupils not meeting reading expectations from Time 1 to Time 2.

Note. N = 49.

There was a significant improvement in the number of students achieving expectations in reading (meeting, exceeding or strongly exceeding) from Time 1 to Time 2 $\chi^2 = 7.56$ (df = 1), $p < 0.05$. There was an increase in the number of students meeting expectations in reading from Time 1 ($n = 11$) to Time 2 ($n = 13$), an increase in the number of students exceeding expectations from Time 1 ($n = 5$) to Time 2 ($n = 7$) and an increase in the number of students exceeding expectations from Time 1 ($n = 0$) to Time 2 ($n = 7$) (Fig. 2).
Figure 2. **Pupils achieving (meeting, exceeding, strongly exceeding) reading expectations** from Time 1 to Time 2.

Note. N = 49

**Improvement in writing achievement**

While there was a *reduction* in the number of students *not* meeting expected *writing* achievement between Time 1 (end of terms 1-2, 2014) (n = 35) and Time 2 (end of terms 3-5, 2015) (n = 27), this difference was not significant $X^2 = 1.83$ (df = 1), $p > 0.05$ (Fig. 3).

Figure 3. **Number of students not meeting achievement expectations in writing** from Time 1 to Time 2.

Note. N = 49.

There was a *significant improvement* in the number of students achieving expectations in *writing* (meeting, exceeding or strongly exceeding) from Time 1 to Time 2, where $X^2 = 4.57$ (df = 1), $p < 0.05$. At Time 1 there were 11 pupils meeting expectations and 19 pupils meeting expectations at Time 2.
There were 3 pupils exceeding expectations at both Time 1 and Time 2 and no pupils strongly exceeding expectations at these two time points (Fig. 4).

Figure 4. Number of students meeting, exceeding or strongly exceeding achievement expectations in writing from Time 1 to Time 2.

**Improvement in maths achievement**

There was a decrease in the number of students who were not meeting maths expectations between Time 1 (end of terms 1-2, 2014) and Time 2 (end of terms 3-5, 2015) with 33 students at Time 1 and 27 students at Time 2, however this difference failed to reach statistical significance (Fig. 5).

Figure 5. Students not achieving expectations Time 1 to Time 2.

Note. N = 49.
There was an increase in the number of students who were achieving (meeting, exceeding, strongly exceeding) maths expectations between Time 1 (end of terms 1-2, 2014) and Time 2 (end of terms 3-5, 2015), however, this difference failed to reach statistical significance. 12 pupils were meeting expectations at Time 1 and 17 pupils at Time 2, 5 students were exceeding expectations at Time 1 and 4 at Time 2, 12 pupils were strongly exceeding expectations at Time 1 and 17 at Time 2 (Fig. 6).

Figure 6. Students meeting, exceeding and strongly exceeding expectations in Maths from Time 1 to Time 2.

Note. N = 49

**Improvement in English**

While there was a decrease in the number of students not meeting English achievement expectations between Time 1 (end of terms 1-2, 2014) and Time 2 (end of terms 3-5, 2015), this difference failed to reach statistical significance. At Time 1, 14 students were not meeting expectations and at Time 2, 12 students were not meeting expectations in English (Fig. 7).
Note. N = 19

While there was an increase in the number of students achieving student expectations (meeting, exceeding, strongly exceeding) in English between Time 1 (end of terms 1-2, 2014) and Time 2 (end of terms 3-5, 2015), this difference failed to reach statistical significance. At Time 1, 5 students were meeting expectations and at Time 2, 7 students were meeting expectations, in English (Fig. 8).

Figure 8. Pupils achieving (meeting, exceeding, strongly exceeding) English expectations from Time 1 to Time 2.
**Improvement in Behaviour**

**Decrease in sanctions (lesson and incidents)**

Sanctions (lesson and incidents) were tracked at both Time 1 (end of terms 1-2, 2014) and Time 2 (end of terms 3-5, 2015) to explore for differences. There was a **significant decrease in sanctions** (lessons and incidents) between Time 1 (end of terms 1-2, 2014) and Time 2 (end of terms 3-5, 2015), where \( t = 2.99 \) (df = 24), \( p < 0.01 \). The number of sanctions at Time 1 was 9.84 (SD = 3.28) and was 5.2 (SD = 1.95) at Time 2 (Fig. 9).

Figure 9. **Mean change in sanctions** from Time 1 to Time 2.

Note: \( N = 25 \)
**Decrease in exclusions (inside and outside of lessons)**

Exclusions (inside and outside of lessons) were tracked at both Time 1 (end of terms 1-2, 2014) and Time 2 (end of terms 3-5, 2015) to explore for differences. Whilst, there was a decrease in exclusions (inside and outside of lessons) between Time 1 (end of terms 1-2, 2014) and Time 2 (end of terms 3-5, 2015), the mean number of exclusions at Time 1 was 0.23 (SD = 0.12) and at Time 2 was 0.16 (SD = 0.07) - this difference failed to reach statistical significance.

**SDQ improvements**

The SDQ was used to assess strengths and difficulties experienced by a child (Goodman, 1997). Strengths and difficulties (including conduct, hyperactivity, peer problems, prosocial behaviour, conduct behaviour and overall difficulties), as assessed by the SDQ, were tracked at both Time 1 (end of terms 1-2, 2014) and Time 2 (end of terms 3-5, 2015) to explore for differences. **Improvements** were observed and are detailed below. Other differences failed to reach statistical significance.

**Decrease in overall difficulties (SDQ)**

There was a significant decrease in overall difficulties as assessed by the SDQ between Time 1 (end of terms 1-2, 2014) and Time 2 (end of terms 3-5, 2015), where t = 1.69 (df = 35), p < 0.01. The mean overall difficulty score at Time 1 was 30.72 (SD = 1.99) and was 27.5 (SD = 2.85) at Time 2 (Fig. 10).

Figure 10. **Mean change in overall difficulties** (SDQ) from Time 1 to Time 2.
Note: N = 36
Part B: Impact on professionals and practice – quantitative data

At the end of the programme participants completed an Exit Questionnaire and were asked to indicate whether they agreed (‘yes’), disagreed (‘no’) or somewhat agreed (‘sometimes’) with statements, regarding the impact of their training. These items related to their professional practice, adult self-regulation and the behavioural impact on the pupils they were supporting. Overall, 45 participants responded to the questionnaire. The items were drawn from the preliminary AAS pilot study in B&NES and pilot studies in Emotion Coaching.

Impact on Professional Practice

In total, 78% indicated agreement (‘yes’), 19% agreed somewhat (‘maybe’) and 3% disagreed (‘no’) with statements regarding training impact on professional practice (Fig. 11).

Figure 11. Positive impact on Professional Practice

Note. N = 45
Impact on Adult Self-regulation

In total, 75% indicated agreement ('yes'), 20% agreed somewhat ('maybe') and 4% disagreed ('no') with statements regarding training impact on adult self-regulation (Fig. 12).

Figure 12. Positive impact on Adult Self-Regulation

Note. N = 45
**Impact on Pupil Behaviour**

In total, 72% indicated agreement ('yes'), 27% agreed somewhat ('maybe') and 1% disagreed ('no') with statements regarding training impact on child behaviour (Fig. 13).

Figure 13. **Positive impact on Pupil Behaviour**

Note. N = 45
Part C: Impact on professionals and practice – qualitative data

The findings in this section were also drawn from the Exit Questionnaires that participants were asked to complete. The questionnaires included free text responses, which are presented here. Although 45 completed the Exit Questionnaire, only 14 responded to the free text items. A process of open coding, identified numerous initial themes from the free text responses in the Exit Questionnaire. The questionnaire asked staff to consider the following:

1. Please explain why you think being an AAS School may be beneficial for pupils.
2. Please explain how your practice has changed since doing the training.
3. Please explain why you think EC is a beneficial tool to use.
4. Comment on any challenges faced in applying the training.

The open coding analysis from all responses to the different questions was further ordered into three interrelated areas: Effects on Staff and Effects on Practice and Effects on Pupils. In turn, these were further coded to correlate with previous pilot research on the impact of Emotion Coaching, in terms of the Impact on Professional Practice - Adults’ Capacity to Self-regulate and the Impact on Pupil Behaviour. The feedback focused on the use of Emotion Coaching, which was the main attachment-based strategy adopted by the participating schools. Illustrative quotes are provided at times which reflect a particular finding.

The three core themes identified (Effects on Staff, Effects on Practice and Effects on Pupils) are interdependent. For example, an increase in adult skills, confidence and understanding creates improved abilities in pupils to reflect on their behaviour and increase their understanding of their emotions. Consistency in approach is key to maximising the potential for both students and professionals’ own learning and subsequent outcomes. It is significant to note that most feedback centred on the change of practice for the adult – this seems to be the pivotal requirement for success in implementation of Emotion Coaching and AAS strategies within schools. It was also apparent that Emotion Coaching engenders positive changes in individual behaviours for both staff and pupils and in the interactions between the two groups.

Findings from the final question, relating to challenges, largely centred on issues related to inconsistency by staff and implementing strategies across the board. For example, one commented that some people ‘say one thing but do another’ and another flagged the difficulty of ‘getting staff to buy into effective strategies’. It was also acknowledged that strategies need to adapt to the child: ‘Not every child responds in the same way and all attachment needs are different, therefore a variety of approaches are necessary’. Time was also a common concern: ‘The time as a teacher with a demanding timetable to have those conversations when they are needed’ and even the physical space to find a ‘safe haven’ and use Emotion Coaching: ‘Space for pupils to have safe spaces and for emotion coaching to take place.’ The participants considered that without staff consistency and effective implementation of the strategies, pupil disengagement and negative pupil reactions will be more frequent in their occurrence, leading to greater stress for staff.

The findings of the free text responses from the exit questionnaires are detailed below. These responses were overwhelmingly positive.
Benefits of AAS

1. **Effects on Staff – improved knowledge, understanding and skills**

   - Increased empathy and awareness of pupils’ emotions
     
     ‘It is important for us, as a school to be aware of pupils’ emotions and needs.’
     ‘I am calmer and more empathic when I have a conversation with students who are clearly upset/distressed.’
     ‘I feel as though I understand children’s feelings.’
     ‘I empathise with the feelings of children.’
     ‘Role model positive emotional states.’

   - Improved understanding of the reasons behind pupils’ behaviour and their underlying needs
     
     ‘All staff are aware of any specific attachment based needs.’
     ‘It has helped raise awareness of pupils with attachment needs and the understanding that there are reasons behind their behaviour.’
     ‘More understanding of why pupils behave as they do.’
     ‘Trying to be more aware of possible triggers.’
     ‘Some children are missing large chunks of their emotional development therefore, they need teaching to fill the gaps in their emotional needs.’
     ‘It is the next moral step towards helping and developing a vulnerable/traumatised child.’

   - Staff are better able to cope with challenging behaviours presented
     
     ‘Knowing an acceptable way to handle the situation in order to de-escalate.’
     ‘Adults have better skills to support young people and children.’
     ‘Staff are able to help with pupil needs and support emotional well-being and learning.’
     ‘Be calm, not anxious about the child’s emotions and see a way to problem solve.’

   - Increased staff confidence
     
     ‘I am not afraid to ask the big questions, face the ‘elephant in the room’ knowing that I cannot make things worse.’
     ‘Greater understanding of how to deal with students effectively.’
     ‘The training has given me the confidence to question others’ responses and relationships.’
2. **Effects on Pupils – improved relationships and behaviour**

- **Improved relationships with pupils**
  
  ‘It provides adults who want to get to know them and supports their growing ability to form relationships.’
  
  ‘Makes sure a child feels listened to and understood.’
  
  ‘Taking more time to get to know the pupils.’
  
  ‘Pupils feel they have been heard and their emotions validated.’
  
  ‘It also provides staff with the opportunity to understand the child better.’
  
  ‘Breaks down the student/teacher barrier.’

- **Helps pupils to have a better understanding of their own emotions**
  
  ‘Helps children to understand how they are actually feeling.’
  
  ‘Help pupils find a name for what they are actually feeling and particularly for SEN pupils who struggle to verbalise.’

- **Gives pupils strategies to control their emotions and problem solve better behavioural solutions**
  
  ‘They are able to think more easily, with support, about how to control their emotions.’
  
  ‘It gives children the vocabulary and strategies to sort themselves out.’
  
  ‘Pupils learn how to self-regulate and they are able to problem solve more independently in the future.’
  
  ‘The final step of “problem solving” with the child is vital and helps to explore appropriate ways of managing their emotions.’

- **Improved behaviour**
  
  ‘I have recognised that the use of empathy at the beginning of a conversation about an incident really helps the child to calm.’
  
  ‘The student sees that the teacher empathises and sees the pain/anguish and is prepared to see beyond the behaviour.’
  
  ‘It really helps them to calm and improve their behaviour.’
  
  ‘We’ve noticed it really reduces behavioural incidents.’
3. **Effects on Practice – improved consistency and practical strategies**

- **Improved consistency**

  ‘Enables staff to adopt a consistent approach which suits all children.’
  ‘Enables a whole school, consistent approach which meets all children’s needs.’
  ‘Pupils will know that they will get the same, fair, non-judgemental treatment from all adults.’
  ‘I have actively driven through a whole school initiative.’

- **Improved staff relationships and partnerships inside and outside school**

  ‘Partnership across the school, including lunch time staff, have strengthened.’
  ‘Lunchtime staff have been included in training to support partnership working.’
  ‘Created a group of like minded staff to drive ideas’
  ‘Ensure practice is shared with all stakeholders.’
  ‘I have actively implemented the approach with specific members of staff as a whole school initiative.’
  ‘It has also helped my relationships with parents and to support them better.’

- **Provides useful strategies to use in practice**

  ‘We now have a Wellbeing board in the staffroom to highlight the children to keep in mind.’
  ‘Used the Emotion Coaching script a lot!’
  ‘There is a clear structure to the process of EC and the skill can be taught to staff.’
  ‘Following a script in different situations.’
  ‘There has been effective use of safe spaces and key adults.’

A final analysis was undertaken of the qualitative findings in order to ascertain their correlation to prior research on the impact of EC in practice (Rose & Gilbert, 2015). Three key themes were identified in the original research in England. The themes identified through the content analysis of the B&NES Exit Questionnaires can be co-ordinated under them. This also eases the process in relating the quantitative data to the qualitative data, since the quantitative data in Part B is categorised into the 3 key themes of Impact on Professional Practice, Impact on Adult Self-regulation and Behavioural Impact on Pupil.

1. **Impact on Professional Practice**

- Improved consistency by using Emotion Coaching
- Staff became more aware of pupils’ emotions
There was improved understanding of the reasons behind pupils’ behaviour and their underlying needs
- Staff look for issues that may initiate poor behaviours
- Staff have practical behavioural strategies to support pupils
- Provides a clear structure for behaviour management

2. **Impact on Adult Self-Regulation**
- Staff are better able to cope with challenging behaviours
- Staff have increased empathy and understanding
- Staff have more confidence in tackling difficult behaviours
- Staff relationships improved with each other and with parents
- Staff relationships improved with pupils

3. **Impact on Pupil Behaviour**
- Pupils have a better understanding of their own emotions
- Pupils have an improved range of strategies to control their emotions and behaviours
- Pupils have an improved ability to problem solve
- Pupils have better relationships with staff
- Pupils improve their behaviour
Part D: Audit Data

AAS Audit data was collected from participating B&NES schools to explore for pre- and post- training differences on professional knowledge, competence, team work (joined-up working), attachment aware environment, direct support for children and adults and senior leadership awareness/practice. Participants were asked to indicate the extent to which each item represented a new area; emerging awareness/competence; competent awareness; consciously competent; and cutting edge, by percentage. This audit was developed by Tony Clifford, Stoke Virtual School Head and was based on insights and practices promoted in the attachment literature.

Individual knowledge was assessed by items, including, ‘Do staff have up to date knowledge about how children’s brains develop?’, ‘Do staff understand the effect of stress on the brain, including their own?’ and ‘Do staff know that their emotional state is the key determinate of the emotional climate in their classroom?’

Individual competence was assessed by items, including, ‘Are staff able to manage their own response to a child under stress in a way that helps the child to self-regulate and feel safe?’, ‘Are staff able to differentiate their strategies according to what is most effective with individuals?’ and ‘Are staff able to reflect on their own responses to stress, including recognising when they have gone into ‘fight, flight or freeze’?’

Team work was assessed by items, including, ‘Do teams recognise the different and complementary skills of team members in responding to children’s behaviour?’, ‘Do teams ask for and use support when they need it?’ and ‘How effectively do teams solve problems together when dealing with children with attachment and trauma difficulties?’

Attachment aware environment was assessed by items, including, ‘Are there readily accessible spaces to allow children to self-regulate safely?’, ‘Does everyone know who can access these spaces?’ and ‘Does everyone know the protocol for accessing these spaces?’

Children and adult support was assessed by items, including, ‘Does everyone have an identified ‘support person’ when they need one?’, ‘Are children and staff clear about when and how to go to their support person?’ and ‘How developed is the specialist supervision for staff working directly with children with attachment and trauma difficulties?’

Senior leadership was assessed by items, including, ‘At what level would the SLT place itself as a team in relation to all the questions above?’, ‘How well developed is the school’s strategy for supporting the learning of children with attachment and trauma difficulties?’ and ‘How well developed is the involvement of governors in this strategy and in training?’

In total, 10 schools from B&NES completed this assessment at both time points.
Individual knowledge

Overall, individual knowledge in B&NES was rated as a new area at 23%, pre-training and this was reduced to 2% at post-training. Pre-training, individual knowledge as an emerging awareness/competence was reported at 31%, compared to post-training at 13%. Pre-training, individual knowledge as an area of competence and awareness was ranked at 27% and this increased to 30% at post-training. Pre-training, conscious competence in individual knowledge was rated at 14% and this increased to 32%, post-training. While cutting edge individual knowledge was rated at 4% pre-training and this increased to 23%, post-training (Fig. 14).

Figure 14. Improved Individual Knowledge pre- and post- training

Note. N = 10
**Individual competence**

In B&NES, overall, individual competence was rated as a new area at 2%, pre-training and this was reduced to 0%, post-training. Pre-training, individual competence as an emerging awareness/competence was reported at 18%, compared to post-training at 5%. Pre-training, individual competence as an area of competence and awareness was ranked at 37% and this was reduced to 22% at post-training. Pre-training, conscious competence in individual competence was rated at 28% and this increased to 41%, post-training. While cutting edge individual competence was rated at 14% pre-training, this increased to 31%, post-training (Fig. 15).

**Figure 15. Improved Individual Competence** pre- and post- training

![Bar chart showing improved individual competence pre- and post-training.](image)

Note. N = 10
**Team work (joined-up working)**

In B&NES, overall, team ratings as a new area were 10% at pre-training and this was reduced to 2%, post-training. Pre-training, teams as an emerging awareness/competence was reported at 21%, compared to post-training at 6%. Pre-training, teams as an area of competence and awareness was ranked at 23% and increased to 32% at post-training. Pre-training, conscious competence in teams was rated at 19% and this increased to 27%, post-training. While cutting edge teams was rated at 27% pre-training, this increased to 33% post-training (Fig. 16).

Figure 16. **Improved Team Work** pre- and post- training

![Graph showing improved team work pre- and post-training](image)

Note. N = 10
**Attachment aware environment**

In B&NES, overall, environment ratings as a new area were 7% at pre-training and this was reduced to 3%, post-training. Pre-training, environment as emerging awareness/competence was reported at 15%, compared to post-training at 3%. Pre-training, environment as an area of competence and awareness was ranked at 14% and increased to 15% at post-training. Pre-training conscious competence in environment was rated at 32% and this surprisingly decreased to 17%, post-training. While cutting edge environment was rated at 32% pre-training, this increased to 62% post-training (Fig. 17).

Figure 17. **Improved Attachment Aware Environment** pre- and post-training

![Graph showing improved attachment aware environment pre- and post-training](image)

Note. N = 10
**Children and adults – direct support**

In B&NES, overall, children and adults – direct support ratings, as a new area, were 23% at pre-training and this was reduced to 6%, post-training. Pre-training, children and adults – direct support as emerging awareness/competence was reported at 22%, compared to post-training at 1%. Pre-training, children and adults – direct support as an area of competence and awareness was ranked at 12% and increased to 16% at post-training. Pre-training conscious competence in children and adults – direct support was rated at 27% and this increased to 35% post-training. While cutting edge children and adults – direct support was rated at 17% pre-training and this increased to 41% post-training (Fig. 18).

Figure 18. **Improved Support – Children and Adults** pre- and post- training

![Bar chart showing improved support pre- and post- training for children and adults](image)

Note. N = 10
**Senior leadership practice/awareness**

In B&NES, overall, senior leadership ratings as a new area were at 28%, pre-training and this was reduced to 3%, post-training. Pre-training, senior leader ratings as an emerging awareness/competence was reported at 40%, compared to post-training at 19%. Pre-training, senior leaders as an area of competence and awareness was ranked at 15% and increased to 28% at post-training. Pre-training conscious competence in senior leaders was rated at 10% and this increased to 36% post-training. While cutting edge senior leaders was rated at 5%, pre-training and increased to 14%, post-training (Fig. 19).

**Figure 19. Improved Senior Leadership Awareness/Practice** pre- and post- training

Note. N = 10
Methodology

The methodology comprised a mixed method approach (Mertens, 2010), yielding both soft and hard data. Progress data on pupil academic achievement (including reading, writing, maths and English), exclusions (inside and outside of classroom) and improvements in SDQ were explored before the intervention at the end of terms 1-2 (Time 1) and after the intervention at the end of terms 3-5 (Time 2), with the aim to explore pre- and post-intervention differences. Purposive sampling was undertaken for pupils considered ‘at risk’ but no demographic data was collected. For categorical data (expected academic achievement levels), chi square was used to explore pre- and post-differences according to observed and expected frequencies (Ferguson & Takane, 1989), using Excel. For interval data (exclusions, sanctions, SDQ scores), t-tests were used to explore mean differences (Coolican, 2009), using Excel. All summary statistics and data visualisations were produced by Excel.

Both sets of qualitative data were analysed using a content analysis based on the sociological tradition (Tesch, 1990), where the researcher interpreted the participants’ perceptions, feelings, behaviour and knowledge of Emotion Coaching, as represented by their written feedback. Constructivist grounded theory and data reduction method (Charmaz, 2006; Strauss and Corbin, 1990) was used and all codes identified reflected the requirement that they reflect what is being researched (they are valid), that there was no overlap (they are mutually exclusive) and that all data fitted into a category (codes were exhaustive) (Miles et al., 2014). In the 1st phase, open coding, all responses were read and assigned a colour-coded category. All statements were then organized under each category. In the 2nd phase, axial coding, statements were reread to identify any further necessary statement allocation. During the 3rd phase, patterns and explanations were explored within the categories and codes were reordered under similar headings. This phase served as second order coding. Potential causal relationships between the codes were then identified and during phase 4, potential contradictory data and examples that illustrated the thematic coding were sought, through further scrutiny of the data. A final analysis was undertaken in order to ascertain correlation with themes identified in prior Attachment Aware School pilot studies in B&NES and pilot studies in Emotion Coaching (Rose et al., 2015).

Although some of the authors of this report were involved in part of the training programme for the project, all data was analysed by independent analysts, none of whom played any role in the training programme and interventions. Full limitations of the methodology are discussed in a forthcoming academic publication (Rose et al., forthcoming).

Acknowledgements

We would like to extend our deepest thanks to all the practitioners of the participating schools who gave so much of their time and energy in implementing attachment awareness in their settings and for going ‘above and beyond’ by collecting the data for the project.

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**Citation**


**References**


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ANNEX A

CASE STUDY OF A PUPIL WITH SEN USING ATTACHMENT AWARE AND ATTACHMENT BASED PRACTICES

This case study has been written by a practitioner who participated in the project and has not been subject to any analytical process. It is presented in its original form.

<table>
<thead>
<tr>
<th>Pupil</th>
<th>Year 5, Boy, ‘E’</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of placement on SEN record</td>
<td>Reception Year</td>
</tr>
</tbody>
</table>

**Pen Portrait including area(s) of need / barriers to learning**

- E was identified when he started school as having significant emotional/behavioural needs
- He was diagnosed as having ADHD in June 2014 and a Statement of SEN was agreed in July 2014
- He has a history of being significantly overweight
- Parent received support from Connecting Families in 2014 and a PSA prior to that
- An EP assessment in February 2014 identified many skills in the very low range of the Beck’s Cognitive Profile with a likelihood of dyslexia
- Speech & Language Assessment in March 2014 identified significant difficulties with attention and listening, working memory and phonological awareness
- All assessments identified extremely low self-esteem, a significant reluctance to take risks and put himself in a position where he thought he might ‘fail’, showing no persistence or independence
- On transition to KS2 (September 2013) he struggled to cope with the academic demands of Year 3 Class. He refused to follow adult requests all of the time and would run out of class and around the school. He frequently had verbally aggressive outbursts with all staff and hurt children as he moved around school
- In Term 1 of Year 4 he could not manage to stay in class other than for registration and avoided even supported learning tasks by running out of the room. There were 8 Serious Incidents in Term 1.
- In receipt of Pupil Premium

**External agencies who have been involved**

- Speech & Language
- Education Psychologist
- Specialist Behaviour Support
- Connecting Families
- PSA
- Paediatrician
- Occupational Therapist
- Sports Mentors x 2 weekly
### PROVISION OVER TIME / ARRANGEMENTS OVER TIME

#### Year 3
- Small group learning support with HLTA daily, every morning

#### Year 4 from Term 2
- Full time Key Adult using attachment based strategies and activities (Louise Bomber) plus Now/Next, visual timetable
- Weekly Speech and Language support - ‘Attention Grabbers’ programme from trained teaching assistant, individually then in a small group
- Very high levels of Emotion Coaching from Key Adult and Assistant Head, especially when dealing with dysregulated behaviour to help E by co regulation then help him to regulate his emotions
- Development of a low stimulus ‘safe space’ for learning with E so that all his resources were accessible
- Very high level of positive feedback on progress, recorded visually and shared with parent daily and ‘heard’ by E between adults as positive praise would cause him to dysregulate
- High level of communication and relationship building with parent by Key Adult and Assistant Head Inclusion so that school had immediate support for Serious Incidents

### How the skills of staff have been developed to address needs

#### Key Adult
- observed and then provided interventions based on attachment strategies to stabilise anxiety and then enable him to feel safe, secure and able to engage and take risks in learning tasks
- consistently used strategies for supporting children on the Autism Spectrum to enable E to engage in adult led activities and follow routines
- consistently used emotion coaching to scaffold emotional regulation when dealing with events that raise his anxiety levels
- consistently used strategies given by S & L Therapist to scaffold learning tasks e.g. using visual cues and frameworks
- worked with Class Teacher to differentiate learning tasks to meet his learning and emotional needs
- worked with Brighter Futures to gradually provide more challenging expectations and tasks
### QUANTATIVE OUTCOMES FOR PUPIL

**Progress Summary**

- Reading age increased from 4 years 8 months in December 2014 to 7 years 8 months in November 2015 – a 3 year increase in a single year
- Now in class most days for teacher input and lessons in afternoon
- Able to work independently on many tasks in daily small group learning support with HLTA
- Serious Incidents reduced from 9 in Term 1 2014 to none in Term 1 2015, parent not called to school at all
- E can hear a positive comment shared between adults and smile
- E has been able to take part in all out of school events safely including the residential trip

### QUALITATIVE OUTCOMES FOR PUPIL / SCHOOL

- Parent and E are positive about progress made and can hear what he is good at
- E is part of the class and engaged in group and individual learning activities with sensitive support
- E takes part in all social activities alongside his peers within the school with sensitive support
- He has made significant progress since January 2015 particularly in reading
- We are beginning to challenge him to increase his independence in learning tasks and social activities
- Staff have gained skills and experience and observed how a child with significant needs can be supported to be included alongside his peers and make good progress
- Staff can acknowledge how some children need low stimulus environments and highly differentiated tasks to engage in learning and meet learning objectives
- School has evidence of how responding effectively to the emotional and behavioural needs of a child needs to happen in order to enable the child to feel safe and secure and ready to engage and learn
ANNEX B

VIGNETTES OF USE OF EMOTION COACHING AND ATTACHMENT BASED STRATEGIES TO SUPPORT VULNERABLE PUPILS IN SCHOOLS

Vignette 1

Professional Role: FPI worker  Child/Young Person: Boy, aged 7

Background

CH presenting challenging behaviour at school (suspected ADHD/Attachment disorder). Break down of relationship with parent and school. Mum felt that school did not understand her son and his needs and acted inappropriately towards the school. School felt that home life and parenting were the cause of behaviour at school.

AAS Interventions

Attachment Aware Schools and Emotion Coaching training delivered during summer holidays. The school also invited other agencies who work with C at the school to attend for a broader multi agency approach.

Outcome

School started back with new approach, proactively using strategies and advice from training e.g. Emotion Coaching. Three weeks into new term, a team around the child meeting was held. It was reported that both mum and school were seeing a different child.

Mum said: “It’s like a new school. My son is so much happier and he is much happier at home not to mention getting him to school. It used to be a nightmare”.

School said that he was at serious risk of permanent exclusion before the summer and now they have very few concerns.

FPI work made much easier due to this multi-agency approach. And we have a much happier child, mother, school, and community.

Vignette 2

Professional role: Vice Principal, Special School  Child/youn person: Male, aged 7

Background:

I selected this young person because he was at risk of permanent exclusion from the school. This was because of the impact of his ‘meltdowns’ on others around him. The young person became a LAC shortly before the AAS course started. His ‘meltdowns’ were frequent (several times in a school day) and severely upsetting for him and those around him including adults.
who were not able to comfort him. He would repeatedly hit and kick staff and throw items and break things. The meltdowns frequently lasted for over an hour.

**AAS Intervention:**

Emotion coaching approach applied consistently over time by staff.

**Outcome:**

This young person has much fewer incidences of ‘meltdowns’. If a meltdown does occur which is rare; once a fortnight now, he can calm within 20 minutes and no longer hits, kicks and throws things. He sometimes threatens to do these things but responds well to the three part conversation. In the school setting everyone is better off because this young person has improved so much. It has impacted on his learning, peer relationships, staff wellbeing, leadership team input reduced. His SDQ score also showed an improvement in strengths (from 3 to 7) and a reduction in difficulties (from 29 to 12).

---

**Vignette 3**

**Professional role:** TA, Special School  
**Child/young person:** Boy, aged 6

**Background:**

R is fostered and had a very tricky beginning. He has been diagnosed with FASD, PTSD, ADHD and Attachment difficulties. The playground is a big place filled with way too many opportunities for meltdown. Mostly we do small world play in a quieter space with a few safe friends. R and friends are building a car and someone else jumps in the driver’s seat. R has a meltdown and thumps his mate.

**AAS Intervention:**

I intervene and bring R to a bench. I use Emotion Coaching as a main strategy. I begin by simply saying, ‘come and sit next to me for a few minutes please. I can see by your eyes that your feeling really cross right now.’

R agrees reluctantly and I sit him on bench, check in that the other child’s ok and advise them to go back to main playground.

I give R some material to fiddle with as he’s really cross that the game appears to be over and he was not the driver. He sits next to me and begins fiddling with material and I say I’m counting to 20 in my head and we can sit and chill for a bit. I breathe deeply and slowly knowing my calm presence is enough to regulate him - he knows he’s accepted, cared for deeply by me, he knows the routine.

After a couple of minutes his shoulders drop, his body and face relaxes.

I test the water... ‘So you got cross cause your friend got in the driver’s seat, that made you feel really angry?’
‘Yes it’s not fair I made the car, it’s mine not his.’
I validate what he said: ‘You felt like you’d built most of the car and so it was your right to be driver?’
‘Yes’

R is calmer, he feels heard, he’s explained the injustice. He seems more ready to problem solve.

‘So can you think of another way you could have shared how you felt? What words could you have used instead of thumping your friend?’

‘Um D this is my car and I’m the driver?’

‘Great start - I’m wondering if D perhaps thought it was both your car as he built it too?’

‘Well he could have sat next to me?’

‘That’s brilliant R. D would love to sit next to you on your adventure - perhaps you could take it in turns to drive so he got a turn too?’

‘Hmm maybe...’

‘I’m wondering where D is now? He seemed to be really upset - what part of his body do you think might be hurting from the thump?’

‘His arm.’

‘Hmmm - shall we go find him?’

‘I’m not saying sorry...’

‘You don’t want to apologise. Shall we just go check he’s ok?’

‘Ok’

When we got to his friend, without prompting R said: ‘Alright D. Sorry I hit you.’

Outcome:

Using Emotion Coaching helps R to have time to calm down and with the help of an adult helping him to regulate by validating his emotions and giving him time to defuse his anger, he can revisit the event and mostly know a better way to handle things. He mostly apologises even when he says he won’t.

Vignette 4

Professional role: TA in a special school
Child/young person: Boy, aged 10
Background:

H has autism and possible attachment difficulties. He doesn’t want to do numeracy and is reminded only a few more minutes (with the use of a sand timer) but today it’s not happening and he tells me to ‘f*** off’ and runs out of class.

AAS Intervention:

Along the corridor he pulls over wheel chairs, walking frames and tried to pull hydrogen off the wall.

I calmly follow him up the corridor keeping a distance to give his anger space to disperse but for him to feel safe by my presence. I know this is him feeling unsafe. I have to listen to my instincts much more than my logic and look/listen for subtle changes in body language/breathing etc. I use Emotion Coaching as a primary strategy to support him.

After a minute I can sense a break in the storm and begin using soothing words: ‘It’s ok H, I know that maths made you really angry and maybe you felt I didn’t listen to you.’

‘I hate maths’ (shouts)

‘I can hear that was tough for you, how about we go sit on our bean bags for a bit?’

‘I don’t wanna sit on a bean bag.’

‘Ok you don’t fancy the bean bag right now. Come on let’s get ourselves out of this corridor and go chill for a bit and pop some bubble wrap and have a drink?’

‘Ok.’

So we go to our chill out area sit on a bean bag and pop some bubble wrap; he sucks cold water hard through a curly straw triggering the early years soothing sucking reflex and his body begins to slump and his red face returns to beige.

‘I’m not clearing up!’

‘You sound like you’re cross thinking you have to clear up?’

‘Yes you always make me clear up.’

Sounds like you don’t like clearing up?’

‘I hate it, it’s not my job.’

‘Hmmm ok.’

I sense he’s still cross so it’s just not time yet to begin repair. Repair has to come from them... they do have it. So I hand him a stress ball and we do some big breaths which he is sometimes resistant to, initially as he sometimes doesn’t want to calm down at my pace. Today he’s vented a lot physically and was in hyperarousal for a longer time so he welcomes the comfort/routine of big breaths. I read him a book, both snuggled on the bean bag - The Red Beast - one of his favourites. He’s totally calm by now and hungry so I reach for my biscuit and banana stash and we eat together.

‘So what happened? What was it about maths this morning?’
‘I just didn't understand it and you weren’t making any sense?’

‘Ah..... times tables can be tricky to teach and even harder to learn. I think I've got a better way for next time that involves jelly babies - and an iPad game - we'll have to wait till tomorrow for that though.’

‘Ok’

‘So how do you think we could both have managed that situation better earlier so you don't tip over the wheel chairs? I mean it can't be nice for some of the kids to come out of class and find their chair broken hey - a bit like goldilocks and the three bears hey?’

‘You should listen when I say I want to stop.’

‘I think that a good point H, I should've noticed it was a bit too much. Can you remember last week when you struggled with your spelling and Mrs D said, come on only 3 more. It was then you got your certificate. You were so close to winning I wanted you to get your award as you'd worked so hard. Sometimes I do encourage you to reach out a little bit more. What words could you use to show me it's too much?’

‘Miss this is too hard I don't want to do it anymore?’

‘Good idea- and maybe you could ask for me to help? You see if it's still too hard it simply means I've not taught you the right way for you.’

‘Ok I'll try.’

‘Awesome. Let's jump up and go sort this corridor out; if you pick up the frames, I will help you by picking up the chairs.’

Sadly a teacher is out in the corridor who hasn't had Emotion Coaching training. In a very ‘unsad’ cross voice she shares...

‘H I'm really sad that you did this. All these children need their equipment. How would you like it if they came and broke your things? You've made me feel very sad indeed. I hope you’re going to pick it all up and apologise.’

H is cross, humiliated and red in face. His shame and fear clear to see for those who understand. But this is masked by anger. The teacher only sees petulance. We are in the process of clearing up I explain and the teacher heads back to her room.

We head back to the chill out zone as H looks like he's about to erupt again and begin the coaching all over again...

**Outcome:**

Children like H needs lots of repeated experience like this to help them. All children seem to have a very strong instinctive justice system and it causes them to erupt at times. But given reflective non-judgmental space and using Emotion Coaching as a way of communicating with them, they can be helped to see their errors.
ANNEX C

WHAT IS EMOTION COACHING?

Emotion Coaching is based on the work of Gottman and Katz and colleagues (Gottman et al., 1996). It is essentially comprised of two key elements - **empathy and guidance**. These two elements underpin the adults’ approach whenever ‘emotional moments’ occur. Emotional empathy involves recognizing, labelling and validating a child’s emotions, regardless of the behaviour, in order to promote self-awareness of emotions. The circumstances might also require setting limits on appropriate behaviour (such as stating clearly what is acceptable behaviour) and possible consequential action (such as implementing behaviour management procedures) but key to this process is guidance: engagement with the child in problem-solving, in order to support children’s ability to learn to self-regulate and to seek alternative courses of action, preventing future transgressions.

Gottman has described Emotion Coaching as involving 5 steps:

1. Be aware of child’s responses
2. Recognize emotional times as opportunities for intimacy and teaching
3. Listen empathetically and validate child’s feelings
4. Help child to verbally label emotions – helps soothe the nervous system and recovery rate
5. Set limits while helping child to problem-solve

Research in England suggests that these 5 steps can be perceived more simply in 3 steps for the busy practitioner - recognising, empathising, validating, and labelling feelings; limit setting; and problem solving (Rose et al., 2015; Gilbert et al., 2014).

The main research evidence base for Emotion Coaching comes from America and Australia. Randomised Control Trials in America have demonstrated that Emotion Coaching enables children to have better emotional regulation, more competent problem-solving, higher self-esteem, better academic success, more positive peer relations and fewer behavioural problems (Gottman et al., 1997). Emotion Coaching has been used to support children with conduct behavioural difficulties (Havighurst et al., 2013; Katz & Windecker-Nelson, 2004), depression (Katz & Hunter, 2007) and those exposed to violent environments, including inter-parental violence, maltreatment and community violence (Shipman et al., 2007, Katz et al., 2008; Cunningham et al., 2009). Emotion Coaching has also been positively correlated with secure attachments (Chen et al., 2011) and used effectively to reduce the externalising behaviours of children with ASD (Wilson et al., 2013). It has also recently been identified as a protective factor for children with ODD (Dunsmore et al, 2012) and for children at risk (Ellis et al., 2014).

The findings from this study correlate with other research in England. Two pilot studies (Rose et al., 2015; Gilbert et al., 2014) show that by using Emotion Coaching when children experience ‘emotional moments’ which may manifest as challenging behaviour, significant improvements can be made in:

- adults’ attitudes to children’s behaviour as adults become less ‘dismissive’ of children’s emotions, generating a more relational model of behaviour management
- reducing the number of behavioural incidents by improving children’s behaviour and ability to regulate their behaviour
- staff well-being and efficacy via the way adults manage children’s behaviour and its contribution to adults’ reduced stress levels

Emotion Coaching appears to promote the development of social and emotional competences within children/young people. The findings suggest Emotion Coaching can be a valuable tool for practitioners in their work with children and young people (YP). The reported improvements in adult self-regulation during behavioural incidents and enhanced social relationships with children and young people have important implications for professional practice. The common participant claims of practitioners who have been trained in Emotion Coaching testify to how it can help to generate a more consistent response to behavioural incidents, resonating with literature which highlights the importance of consistent responsiveness in promoting social and cognitive growth; Landry et al. (2001), for example. The frequent descriptions by participants of the way in which Emotion Coaching de-escalates incidents and helps both the children/YP and adults to ‘calm down’ suggests improvements in the stress response system and reflects how children/YP (and adults) felt more able to regulate their emotional responses (Rose et al., 2015).