University of Southampton

Faculty of Environmental and Life Sciences

Educational Psychology

An Exploration of Causal Attributions for Challenging Behaviour in Primary-School-Aged Children.

by

Caroline Francesca Bird

Thesis for the degree of Doctorate in Educational Psychology

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Abstract

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Weiner's attributional theory of interpersonal motivation (1985, 1995) proposes that attributions are followed by a consideration of mitigating circumstances, an associated judgement of responsibility (JoR), then emotional and behavioural responses.

Chapter 1 presents a systematic literature review exploring parents and carers' attributions for, and behaviour management responses to, children's challenging behaviour. The aim was to understand the role of mitigating circumstances and the JoR within this context. Ten articles were identified which met the inclusion criteria. Findings revealed no conclusive pattern of results regarding the attributions made about challenging behaviour other than that these appear to be affected by the presence and type of special educational needs of children. The findings suggested that adults consider mitigating circumstances and that the relationship between attributions and behaviour management is mediated by the JoR.

Chapter 2 presents a study of the attributions made, and wider explanations given, by foster carers and teachers regarding the challenging behaviour they encountered in primary-school-aged children who are looked after. Ten foster carers and eight teachers took part in semi-structured interviews. Using a mixed methods approach, transcripts were inductively thematically analysed and coded for attributions. The majority of attributions made were internal, stable and uncontrollable. Children's previous experiences were a key consideration of both groups in explaining the challenging behaviour, and, along with children's age and SEN, appeared to be considered a mitigating circumstance absolving children of responsibility for their behaviour.

Findings are discussed in terms of the implications for practice and research. It was identified that teachers would benefit from training aimed at increasing their self-efficacy. Future research should further explore the role of SEN in attribution theory, factors that impact on the controllability dimension, and the gathering of the child's voice and perspectives regarding their own challenging behaviour.

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Research Thesis: Declaration of Authorship

Print name: Caroline Francesca Bird

Title of thesis: An Exploration of Causal Attributions for Challenging Behaviour in Primary-School-Aged Children.

I declare that this thesis and the work presented in it is my own and has been generated by me as the result of my own original research.

I confirm that:

1. This work was done wholly or mainly while in candidature for a research degree at this University;
2. Where any part of this thesis has previously been submitted for a degree or any other qualification at this University or any other institution, this has been clearly stated;
3. Where I have consulted the published work of others, this is always clearly attributed;
4. Where I have quoted from the work of others, the source is always given. With the exception of such quotations, this thesis is entirely my own work;
5. I have acknowledged all main sources of help;
6. Where the thesis is based on work done by myself jointly with others, I have made clear exactly what was done by others and what I have contributed myself;
7. None of this work has been published before submission

Signature:

Date: 05.06.2020

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To my family and friends. Thank you to Auntie Sue and Uncle Richard for some much-needed proof-reading[1]. To my Mum and Dad, thank you for always being there for me, for believing in me, and for helping set the groundwork of my education which has blossomed into this doctorate. To Rebecca, thank you for how you modelled dedication to academic work during my formative years. To Nicola, my sister, thank you for being my 'person' and for picking me up when I was struggling the most. And to my husband, Michael, for your seemingly un-ending love and the sacrificial way in which you have supported my many years of study throughout the course of our marriage. Finally, to my God, for Your guidance, peace and love.

[1] No intellectual changes were made as a result of this.

Definitions and Abbreviations

ADHD	Attention Deficit Hyperactivity Disorder
CASP	Critical Appraisal and Skills Programme
DD	Developmental Delay
DfE	Department for Education
F	*F* distribution
FASD	Foetal Alcohol Spectrum Disorders
JoR	Judgement of Responsibility
LA	Local Authority
LAC	Looked After Children
LACS	Leeds Attributional Coding System
ID	Intellectual Disability
M	Mean
Mdn	Median
MMAT	Mixed Methods Appraisal Tool
N	Total number of cases
n	Number of cases in subsample
ns	Not statistically significant
p	Statistical value of probability
PICO	Population, Intervention, Comparison, Outcome
PRISMA statement	Preferred reporting items for systematic reviews and meta-analyses
r	Estimate of the Person product-moment correlation coefficient
R^2	Multiple correlation squared; measure of strength of association
SD	Standard Deviation
SDQ	Strengths and Difficulties Questionnaire
SEN	Special Educational Needs
SES	Socioeconomic Status
TACT	The Adolescent and Children's Trust
TD	Typically Developing

Chapter 1: A Systematic Literature Review of Causal Attributions for, and Behaviour Management of, Challenging Behaviour in Primary-school-aged Children.

1.1 Introduction

1.1.1 Attribution Theory

Attributions are cognitive mental models that people create to help make predictions about the outcomes and behaviour of both ourselves and others (Hogg & Vaughan, 2011). Specifically, attributions are beliefs about the causality of a given outcome (Munton, Silvester, Stratton, & Hanks, 1999). For example, for the outcome of *failing a test,* possible causal attributions could include, *I am not clever enough*, or *the test was harder than it should have been.* An attribution, therefore, can be considered of comprising both an outcome – failing the test – and a causal explanation – the 'why' of that outcome.

In order to support the development of more accurate predictions, individuals can utilise a number of different attributional dimensions (Munton et al., 1999). Weiner's (1985) attributional theory is a widely used theory and identifies three causal attributional dimensions: internality (internal/external), stability (stable/unstable), controllability (controllable/uncontrollable).

The dimension of internality is the first to appear in the research literature. It was introduced by Heider in 1958 and built upon by Kelley (1973) and Jones and Davis (1965). The common definition used at the time stated that internal causes were factors such as an individual's personality or disposition and external causes were factors such as the situation or the environment surrounding that individual. However, later work suggested that these definitions were too restrictive. Taking the example of falling asleep whilst driving, the cause of this could be considered to be tiredness. Whilst tiredness is not necessarily considered a personality trait or part of a person's disposition, it would be fair to spatially place the 'tiredness' within the individual. This notion led to classifying internal causes as being 'within the skin' of the individual, whilst external causes are anything that is 'outside the skin' (Abramson, Seligman, & Teasdale, 1978; Munton, et al., 1999).

Following on from internality is that of stability, a dimension developed by Weiner (1985). Stable causes are ones that the person has reason to believe are likely to continue to affect events in the future, whilst unstable causes are considered to be transient and unlikely to affect the outcome of a similar event in the future. For example, if failure of an exam is attributed to being unwell with a cold, then you are more likely to predict that you would do better in the next exam in a week's time, than if you are unwell with a chronic condition.

The third and final dimension is controllability. This dimension provides further context to the internal/external dimension, by exploring whether or not the individual perceived that they had control over the outcome. For example, failing an exam due to being unwell could be attributed internally; however, you might also consider that this should be attributed as uncontrollable by the individual.

Another factor of causal attributions is that they can be made for other people's behaviours as well as one's own behaviours; the implication being that attributions made for others' behaviour can also affect one's own emotions, behaviour and actions. For example, if a teacher attributed their pupil's failure at an exam to a lack of preparedness on the part of the pupil, they might make an attribution that was internal and controllable by the pupil. This might lead them to blame the pupil and therefore be less likely to help them in the future. However, if the teacher had attributed the failure to the pupil's turbulent home-life, an external and uncontrollable attribution, then the teacher is perhaps more likely to feel sympathetic to the pupil's situation and be more inclined to help them experience success in the future.

In this systematic literature review, attribution theory will be applied in the context of challenging behaviour in children, exploring the causal attributions that are made by adults (parents, teachers, foster carers) about this behaviour. In addition, the impact of these attributions on the behaviour management decisions then made by adults will be explored.

1.1.2 Attribution Theory and Challenging Behaviour

In the above section it was explained that an attribution is composed of an outcome and a proposed cause. For the purposes of this literature review, the outcome that will be focused on is that of challenging behaviour expressed by primary-school-aged children. The application of attribution theory to challenging behaviour of children is particularly relevant in the contexts of parenting and teaching, in which the adult would often be expected to act in response to the behaviour (Sawrikar & Dadds, 2018). One definition of challenging behaviour widely used in the literature is:

> Culturally abnormal behaviours of such an intensity, frequency and duration that the physical safety of the person or others is likely to be placed in serious jeopardy, or behaviour which is likely to seriously limit use of, or result in the person being denied access to, ordinary community facilities. (Emerson, 2001, p. 7)

This definition is useful in that it provides the parameters within which one could assess whether a behaviour has reached the threshold of 'challenging' or not. However, when considering the views and opinions of lay persons in relation to challenging behaviour, as if often the case in the literature, those individuals are unlikely to be using this definition when determining whether the behaviour they have encountered is challenging or not. In particular, the word 'challenging' is subjective and its interpretation will differ for different individuals depending on their socially constructed view of the world.

Previous research into attributions of challenging behaviour has shown a relatively robust pattern of findings, with parents and teachers tending to make attributions that are internal, stable and controllable by the child for children who had diagnoses of autism (Hartley, Shaidle, & Burnson, 2013), Attention Deficit Hyperactivity Disorder (ADHD; Chen, Seipp, & Johnston, 2008), and intellectual disability (ID; Alevriadou & Pavlidou, 2016; Lancaster, Balling, Hastings, & Lloyd, 2014). In addition, Rae, Murray, and McKenzie (2011) measured attributions made by teachers of children with ID and found that they too made internal attributions, but in contrast to findings in the aforementioned research, they made unstable attributions. Kuhns, Holloway, and Scott-Little (1992) found that mothers and caregivers rated personality, external factors, child control, adult control and stability factors all as 'somewhat important' in explaining their typically developing (TD) 4-year-olds' behaviour.

1.1.3 Attribution Theory and Behaviour Management

In addition to examining attributions of challenging behaviour, this review is also interested in how these attributions may influence subsequent behaviour management decisions by adults. Behaviour management is an umbrella term being used in this review to describe both parenting approaches and behaviour management in classrooms (where the relevant literature exists). Behaviour management can include both active and passive responses to challenging behaviour, and includes variables such as lax parenting, harsh parenting, positive parenting and discipline.

Attribution theory is particularly well placed to explore the link between challenging behaviour and behaviour management as attributions are theorised to help us determine how an

individual should respond to a given behaviour. As outlined above, the attributional theory that this literature review is based on is that of Weiner's attributional theory of interpersonal motivation. Weiner's original theory was proposed in 1985, but by 1995 an amended version of the theory was published. One key difference between the two theories concerns the causal mechanism between attributions and the behavioural response. This review seeks to establish which of the two theoretical proposals are best supported by research in the field of children's challenging behaviour.

1.1.3.1 Weiner (1985)

In Weiner's outline of attribution theory from 1985 he suggested that attributions impact on actions through the mechanism of emotions, see Figure 1 for visual illustration. For example, in the situation where an adult notices that a child has broken a new toy, this behaviour might be attributed as internal to and controllable by the child, leading to feelings of anger and then punishment for the behaviour.

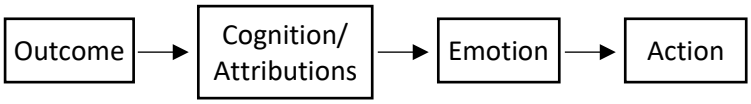

Figure 1. Visual representation of Weiner's (1985) proposed mechanism from attributions to actions.

Some papers have found evidence of a link between causal attributions and emotions, the first stage in the mechanism outlined above. For example, Bolton et al. (2003) found that maternal criticism (a subset of expressed emotion) was significantly positively correlated with internal and controllable attributions. In addition, Alevriadou and Pavlidou (2016) have found that teachers who made internal, controllable and stable attributions about the child's behaviour also seemed to blame the child and were more reluctant to provide support.

Further evidence for this mechanism is found in papers linking attributions with the action element of the mechanism. Butcher and Niec (2017) found that parents primed with 'dysfunctional child-referent' attributions (i.e., were told: "It seems like s/he likes to push your buttons and be in control rather than do what you tell him/her to do, like clean up... ." p. 135) were significantly more likely to use over-reactive discipline than parents primed with environment-referent attributions (i.e., were told: "The assessment situation will challenge [child name] and make it hard for him/her to listen to you and not bother you... ." p. 135). Additionally, parents who attribute challenging behaviour externally to themselves tend to have higher

attrition rates from parenting programmes (Miller & Prinz, 2003). Internal attributions are also associated with a lower acceptability of behavioural recommendations (Reimers, Wacker, Derby, & Cooper, 1995).

However, there has also been research that did not find supportive evidence for a link between attributions and behavioural responses. Armstrong and Dagnan (2011) did not find a link between their measures of attributions and the likelihood to punish in mothers of children with ID. However, they did find that attributions of controllability correlated with sympathy, such that high attributions of control are linked to lower feelings of sympathy. Johnston, Hommerson, and Seipp (2009) explored two measures of behaviour management – responsiveness and over-reactivity – in relation to two types of challenging behaviour across two time points. They found that responsiveness only correlated with attributions on one of the four measures, however over-reactivity correlated with three out of the four measures, indicating perhaps that negative behaviour management is better related to attributions than positive behaviour management approaches.

1.1.3.2 Weiner (1995)

In his later work, Weiner (1995) argues that there is an additional step in the mechanism from causal attributions to action, suggesting that a 'judgement of responsibility' (JoR) follows attributions. See Figure 2 for visual representation of both proposed pathways. The difference between a causal attribution and the JoR is that the causal attributions are theorised to relate to a specific incident, whilst the JoR is theorised to be more of a 'moral' judgement of the person more generally.

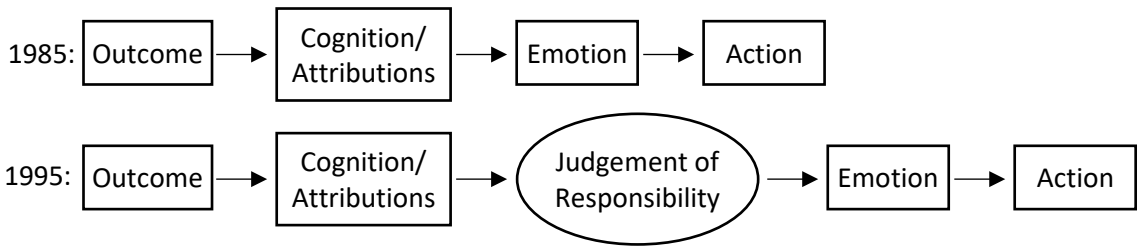

Figure 2. Visual representation of Weiner's 1985 and 1995 proposed mechanisms from attributions to actions.

Weiner proposes that there are three factors that contribute to the JoR. See Figure 3 for a visual representation. The first two factors relate to the causal attributions; in order for an individual to be deemed responsible for the outcome, there must be internal and controllable

causal attributions. The third factor that impacts JoR is that of mitigating circumstances. Weiner suggests that even internal and controllable attributions may not result in an individual being judged responsible if the person making the judgement considers there to be mitigating circumstances. One of the mitigating circumstances suggested is if the individual is very young or has some form of incapacity than renders them unable to comprehend the "wrongness" of their action or behaviour (Weiner, 1995, p. 9). This might be individuals with a learning need or developmental delay. However, any number of additional factors could also be considered a mitigating circumstance (Weiner, 1995).

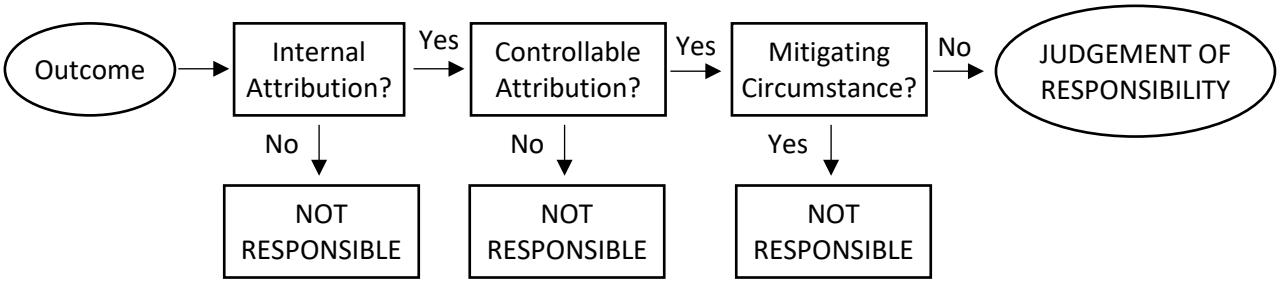

Figure 3. Visual representation of Weiner's (1995) theoretical proposal for the judgement of responsibility process. Adapted from "Judgments of responsibility: A foundation for a theory of social conduct." By B. Weiner, 1995, p. 12. Copyright 1995 by The Guildford Press.

For example, following a child breaking a new toy by throwing it across the room, a parent could make internal and controllable causal attributions. However, one parent may look at the situation and determine that their young child is over-tired and therefore consider this a mitigating circumstance, absolving the child of responsibility for the breakage and be sympathetic to them. However, another parent may not perceive there to be any mitigating circumstances contributing to the behaviour and therefore levy a judgement of responsibility on the child for the action of breaking the toy, blame the child and subsequently punish them.

This example demonstrates that the same set of causal attributions (internal to and controllable by the child) can result in different behaviour management approaches, theoretically due to the JoR. The theory suggests, therefore, that attributions themselves are not necessarily predictive of the behaviour management outcomes, but instead that it is the JoR that would predict behaviour management.

Support for the proposal that it is the JoR that is related to behaviour management choices, and not specifically attributions, can be found in the research literature. For example, Chavira, López, Blacher, and Shapiro (2000) found that parents of children who had a developmental disability generally did not rate their children as responsible for their challenging

behaviours; however, when they did do so, it was associated with harsh or aggressive discipline. Additionally, Armstrong and Dagnan (2011) found that, whilst their attribution measures did not correlate with likelihood to punish, assignment of responsibility did correlate with likelihood to punish, with mothers being more likely to consider punishing their child when they assigned more responsibility to the child. Slep and O'Leary (1998) found that when mothers were primed to attribute their children as responsible for their misbehaviours, they were more over-reactive in their discipline. Similarly, Leung and Slep (2006) found that responsibility judgements predicted more over-reactive discipline.

1.1.4 Current Systematic Literature Review

The current literature review is important for two reasons. The first is that it aims to explore the link between causal attributions and actions in the context of children's challenging behaviour: in particular, seeking to comment on which of Weiner's two theories (1985 or 1995) are best supported by the evidence.

Secondly, this review is also important given a wider societal context of an at least perceived, if not absolute, rise in challenging behaviour in primary-school-aged children. This can be seen in an increase in fixed term and permanent exclusions in primary schools by 37.25% and 50% respectively, over the past 5 years (Department for Education, 2014, 2019b).

In summary, this review aims to answer the following questions:

1. How do adults attribute the challenging behaviour of primary-school-aged children?
2. Are attributions related to behaviour management decisions?

1.2 Method

1.2.1 Search Strategy

To identify studies to be included in the literature review, a systematic search strategy was employed, following the Preferred Reporting Items for Systematic Reviews and Meta Analyses (PRISMA) approach (Moher, Liberati, Tetzlaff, Altman, & Group, 2009; see Appendix A). Three databases were searched, PsycINFO, ERIC and Scopus. Key words were identified through the reading of known papers (see Figure 4) and appropriate synonyms were also considered. Appropriate Booleans were used to ensure that different spellings were included as well as

ensuring words with different endings were also returned. In addition, when searching PsycINFO subject terms were also used.

For the child category, in order to ensure that results returned related both to parents' and teachers' attributions, the term 'child*' was included as opposed to only having the 'student*' and 'pupil*' search terms. This addition increased returned results in PsycINFO from 767 to 1714. In an attempt to increase specificity, the additional operators 'NOT preschool*', 'NOT adolescen*' and 'NOT college*' were used, with each addition reducing the results returned to 1528, 1109 and 1014 respectively. Having 1014 results was deemed a reasonable compromise between the 767 returned for only 'student* AND pupil*' which lacked sensitivity and 'student* AND pupil* AND child*' which returned 1714 and lacked specificity.

Another way in which specificity was increased was to use an operator to link the proximity of attribution and challenging behaviour search terms. Without a proximity operator the search returned 2538 results. By using an N15 proximity operator between the attribution search terms and the challenging behaviour search terms, the number of returned results was reduced to 1014. Scopus help advice recommends using N15 when looking for results that include these search terms within the same sentence. This felt an appropriate level of closeness between attributions and challenging behaviour, as this was representative of papers that the author knew would meet the inclusion criteria.

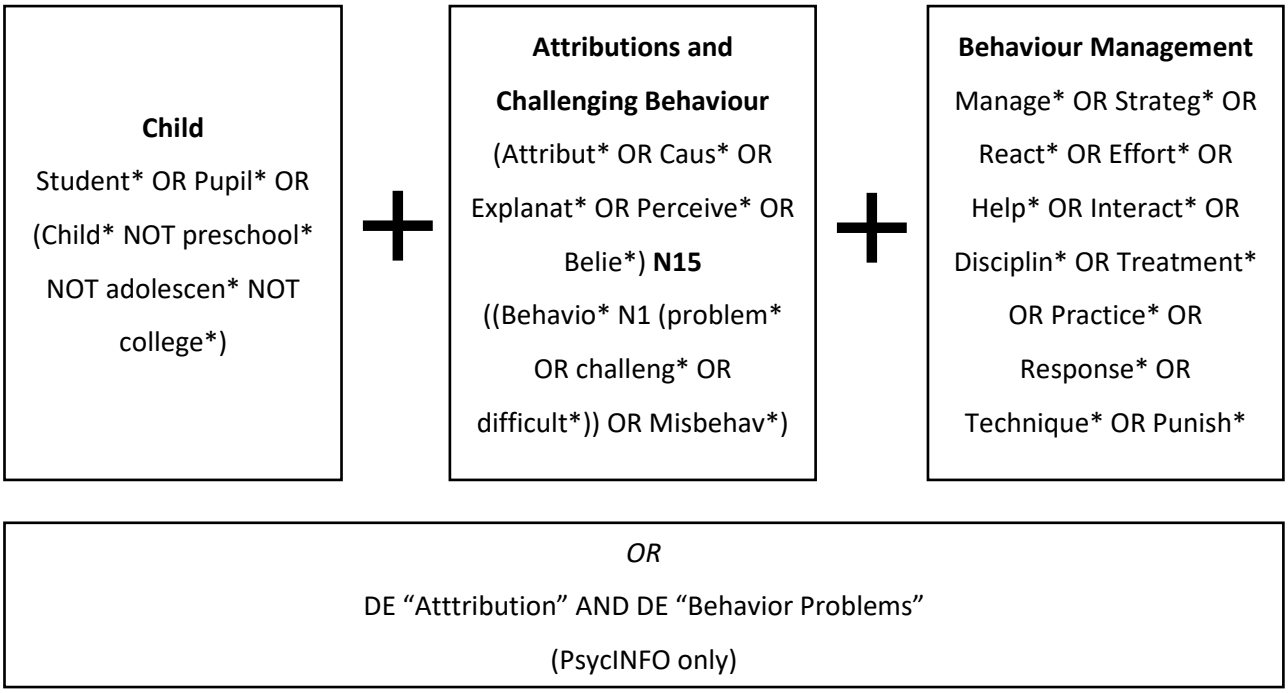

Figure 4. Search terms utilised in the search strategy.

In addition, the databases WorldCat, OpenGrey and openDOAR were also searched for additional relevant grey literature, revealing an additional 33 papers. Of the 2502 results from searches, 446 were removed as duplicates, leaving 2056 titles and abstracts to be screened according to the inclusion and exclusion criteria presented in Table 1.

Table 1.

Inclusion and Exclusion Criteria in Relation to Specific PICO (Population, Intervention, Comparison, Outcome) Components

	Inclusion criteria	**Exclusion criteria**
Participants	• Participants must be adults (parents, foster carers or school teaching staff) • Primary-/elementary-school-aged children as focus of the study (typically aged 4–11 years old).	• Children as the participants • Pre-service teachers • Secondary school teachers • Care staff • Secondary-school-aged pupils as focus of the study (typically aged 12–18 years old)[2]. • Pre-school-aged children as focus of the study (typically <4 years old)
Outcomes	• Describes attributions, perceptions, beliefs, or explanations for challenging behaviour. (This is because not all papers specifically cite attribution theory but are however drawing on this concept). • Challenging behaviour seen within home or school settings. • Evaluation of the behaviour management or parenting approaches. • Methodology allows for assessing the relationship between	• Not challenging behaviour • Not attributions • Simply describing challenging behaviour • Ranking types of challenging behaviour • Focus on the emotional effects/responses to challenging behaviour on the adults around the child. • Not where acceptability of specific types of interventions or

[2] Where the ages of the target children spanned both the inclusion and exclusion criteria, additional criteria were used to determine whether or not each paper should be included. See Appendix B for details.

	attributions and behaviour management.	medication is considered as behaviour management. • Not looking at referral outcomes or help-seeking behaviours • Not to include papers related to abuse.
Language/ country	• Written in English • Research from all countries and cultural backgrounds included	• Written in a foreign language
Date	• 1973–Present (term first introduced on PsycINFO)	
Type of research	• Academic journals, dissertations • Quantitative and qualitative	• Editorials, opinion pieces

Following screening, 1985 results were excluded leaving 71 articles to be assessed for eligibility through the reading of the full text. Sixty-one papers were rejected for not meeting the inclusion criteria leaving a total of ten papers which met the inclusion criteria and were taken forward. This included one qualitative, one mixed methods and eight quantitative papers.

1.2.2 Data Analysis

Given the small number and heterogenous nature of the studies included in this systematic literature review, a narrative synthesis approach was deemed most appropriate to answer the research questions. The findings both within and between studies, alongside their methodological strengths and weaknesses are discussed.

1.2.3 Quality Assessment

In order to assess the quality of the studies to be included in this literature review, amended versions of two Critical Appraisal Skills Programme (CASP) checklists were employed: Cohort Studies Checklist (CASP, 2018a) and the Qualitative Checklist (CASP, 2018b), along with the Mixed Methods Appraisal Tool (MMAT; Hong et al., 2018).

Each study was assessed in relation to the criteria put forward in the checklist and could be given one of four possible responses: Yes (to indicate the criterion was met), No (if the

criterion was not met); N/A (if the criterion was not applicable to the specific paper); or Unable to determine (if there was not sufficient information in the paper). The quality of each study was assessed by calculating the percentage of applicable items for which a 'yes' response was given, thereby removing the effect of different studies having a different number of applicable items. Using a percentage also allows for comparison of quality irrespective of their methodology (quantitative, qualitative or mixed methods). Papers with a percentage score of 70% or above were considered to be good quality, 50-69% was considered medium quality and papers with a score of 49% or below were considered to be of poor quality.

There was not a cut off percentage at which papers were either included or excluded; instead, the quality assessment results informed the critique of the individual studies when exploring the findings.

1.3 Results

A list of the ten papers included in this review are detailed in the data extraction table of Appendix D. In this table, each paper has been allocated a number (one to ten) which will be used throughout this paper for the purposes of referencing.

1.3.1 Quality Assessment

For full details of the quality assessment, please see Appendix C. Quality assessment percentage scores ranged from 44–100% with a Mean score of 73%. No papers were excluded due to their scoring on the quality assessment. Generally, the quality assessment shows that the papers had a good level of quality, suggesting that the results can be trusted. There are a few exceptions to this which will be explored in more detail below.

1.3.1.1 Quantitative Papers

Questions 5a and 5b pertaining to the identification and controlling of confounds posed a challenge to four of the eight quantitative papers. Of the four papers that identified confounds (5, 6, 7, 9) only three went on to clearly control for these, with study six not providing sufficient data to determine. The results of the other four papers (1, 2, 4, 10) should therefore be treated with additional caution. Furthermore, only two of the quantitative papers (5, 10) provided sufficient information to indicate whether the findings were generalisable, with the other six papers

considered ‘unable to determine’. This was mainly due to difficulties in determining whether the sample was sufficiently representative of the target population. The final challenge was in relation to the reporting of precise results (1, 2, 4, 6).

Three papers received a score of 50% or below (1, 2, 4). All three had challenges in relation to the items described above. However, in addition to this, study two also did not provide enough information to determine whether their outcome measures were valid, and study four did not utilise valid exposure measures.

1.3.1.2 Qualitative Paper

Study three is the only qualitative paper included in this literature review, scoring 60% on its quality assessment. It received a ‘no’ response to the question of whether the relationship between researcher and participants had been considered, and an ‘unable to determine’ response in relation to the appropriateness of the recruitment strategy, whether or not data collection addresses research issues, and whether data analysis was sufficiently rigorous.

1.3.1.3 Mixed Methods Paper

Study eight is the only mixed methods paper included in this literature review; it employs a qualitative deductive thematic analysis, before using quantitative methods to develop and analyse a coding system. Study eight scored 100% on its quality assessment, however it is worth noting that the MMAT, whilst encompassing both quantitative and qualitative components, has less sensitivity, with only five questions each directed at the qualitative and quantitative methods. It is likely that had the CASP checklists been used to individually asses two sections of the paper, the quality assessment score may have been lower.

1.3.2 Paper Mapping

1.3.2.1 Demographic details

Ten papers met the inclusion criteria for the present systematic literature review. Appendix D presents a summary of the key components of each piece of research, references, and associated citation numbers.

Of the ten articles, five took place in the United States of America (1, 6, 8, 9, 10), three in Canada (2, 5, 7) and two in the United Kingdom (3, 4). One paper used a qualitative approach (3), another mixed methods (8) and eight papers a quantitative approach. Participant numbers were ten for the qualitative research, 31 for mixed methods and ranged from 73 to 277 for the quantitative papers. Four papers included only mothers, another five included a mixed sample of mothers, fathers and carers, and a final paper included caregivers who were not the biological parent of the child.

The age range of the target children of the participants was from four to twelve years old. The majority of papers had a relatively even balance between male and female target children with the exceptions of studies four and eight who had a higher proportion of males than females, and study five who was male only. Study 1 did not report sex demographics of the children.

In eight of the papers the children were considered to be typically developing (TD) (1, 2, 4, 5, 6, 7, 9, 10), whilst study four included children with developmental delay (DD), study 3 included children with ID, study eight included children with Foetal Alcohol Spectrum Disorders (FASD) and study five included children with ADHD.

Eight papers utilised a correlational cohort design (1, 2, 3, 4, 7, 8, 9, 10) whilst the final two papers utilised a longitudinal design over one year (5) and four years (6).

1.3.2.2 Attribution variables

Across the ten papers, ten different attributional dimensions were measured, including two which measured parent-referent attributions. In addition to these ten variables, one paper conducted a thematic analysis to explore which attributions were present in the data (see Table 2 for a summary of the variables measured by each paper along with the methods used to elicit attributions).

Table 2.

Attributions Measured and Methods Used for Each Paper

		Child referent								Parent referent		Both referent	Additional Measures[a]		
Papers	Measures	Internality	Controllability	Stability	Globality	Hostile/Benign	Positive/Negative	Dysfunctional	Wilful disobedience/ neurodevelopmental	Control	Responsibility	Thematic Analysis	Intent	Blame	Responsibility
1.Bradshaw (2001)	**Cognitive Vignettes** *Likert Scales*						X								
2.Geller and Johnston (1995)	**Unnamed Measure** *Likert Scales*	Measured individually, made into composite measure		Measured individually, made into composite measure											
3.Jacobs, Woolfson, and Hunter (2016)	**WAQ** *Open ended responses, thematically analysed*											X			
4.Jacobs Woolfson, and Hunter (2017)	**WAQ** *Likert Scales*		X							X	X		X	X	X

5. Johnston et al., (2009)	**WAQ** *Likert Scales*	Measured individually, made into a composite measure				
6.Nix et al., (1999)	**PPQ** *Likert Scales*			X		
7.Park, Johnston, Colalillo, and Williamson (2018)	**ARS** *Likert Scales*	b	b			[b]Measured individually, made into a composite measure
8.Petrenko, Pandolfino, and Roddenbery (2016)	**Qualitative Interview** *Open ended responses, deductively thematically analysed*				X	
9.Snarr (2006)	**ARI** *Open ended responses, later coded*				X	
10.Snyder, Cramer, Afrank, and Patterson (2005)	**P-SIP** Structured Interview *Open ended responses, later coded*			X		

Note. Stimulus Material in **bold**, measures in *italics.* WAQ = Written Analogue Questionnaire; P-SIP = Parenting Social Information Processing; PPQ = Parenting Possibilities Questionnaire; ARI = Attributional Repertoire Interview; ARS = Attribution Rating Scale.

[a]These three variables do not measure causal attributions, but instead measure subsequent responses as part of the cognition-emotion-(JoR)-action pathways. Intent and blame are both considered emotions, whilst responsibility is the variable discussed as part of Weiner's 1995 theory.

[b]all variables with the same superscript are combined into one composite 'responsibility' variable.

1.3.2.3 Behaviour management variables

From the ten papers included in this literature review, there are twelve measures of parenting, eight of which are regarded to be 'negative' parenting and four which are 'positive' parenting. Table 3 shows examples of the facets that each variable is attempting to measure. Table 4 shows details of which papers utilise which behaviour management measures.

Table 3.

Example Items and Definitions of What Is Measured in Each of the Behaviour Management Variables

Variable	Example item/coded response
Demanding/Restrictive Parenting (1)	Negative behaviour including: verbal, non-verbal or physical behaviour directed to the child that was demeaning derogatory or disparaging.
Negative/Blaming Strategies (2)	Expressing negative emotion, blaming the child.
Lax Parenting (7)	Items such as: "you threatened to punish your child and then do not actually punish him/her"
Over-reactivity (5, 9)	Responding to the question "when my child misbehaves...", uses a 7-point Likert scale to indicate responses on a scale from more effective to less effective strategies, such as: "I speak calmly to my child" to "I raise my voice or yell".
Harsh Discipline/Parenting (6, 7)	Nix et al. (1999): semi-structured interview responses coded on a 5-point Likert scale: 1 – "non-restrictive, mostly positive guidance", 3 – "generally moderate, sometimes physical discipline", 5 – "severe, strict, often physical discipline". *Also* spouses responses on a 7-point Likert scale to items such as "argued heatedly but short of yelling" or "pushed, grabbed or shoved your child". Park et al. (2018): responses on a 5-point Likert scale to statements such as "how much do you yell at your child for being bad?"
Punishment (8)	Responses coded from 1 (Infrequent use of common punishment strategies, or no major behaviour problem) through 3 (Multiple common punishment strategies OR elaborates on using 1 common punishment strategy frequently) to 5 (maltreatment).

Ineffective/Irritable Discipline (10)	Rate per minute of behaviour in which parent directed aversive behaviour and/or negative affect toward their child (including: coercive threats, anger, disapproval, teasing). *Also* coding on a 7-point Likert scale parent's use of a range of behaviours such as: relies on negative affect, threatens punishment, is strict and oppressive.
Dysfunctional Discipline (4)	Composite measure of laxness (permissive discipline such as "when I say my child can't do something, I let my child do it anyway") and over-reactivity (anger and irritability such as "I get so frustrated or angry that my child can see I'm upset").
Positive/Non-active Strategies (2)	Talking to or offering emotional support to the child, distracting the child, gathering information, failing to respond.
Positive Parenting (7)	Involvement (e.g., "you have a friendly talk with your child"), positive parenting (e.g., "you let your child know when he/she is doing a good job with something"), disciplinary warmth (e.g., shared decision-making and praise) , personal closeness (e.g., companionship and intimacy) and warmth (e.g., affection and admiration for and by the parent).
Responsivity (5)	Coded from parent-child interaction. 7-point Likert scale for whether mothers showed each of the following: - Authoritative style of control - Sensitivity of control - General responsiveness - Positive, affective tone - Acceptance of the child - Involvement
Antecedent Strategies (8)	Coded on scale from 1 (e.g., describes systematic use of positive behaviour support planning), through 3 (non-specific use of antecedents) to 5 (no mention of antecedent strategies).

Table 4.

Measures Used and Variables Elicited in Relation to Behaviour Management for Each Paper

		Negative Parenting Variables								Positive Parenting Variables			
Papers	Measures	Demanding/Restrictive Parenting	Negative/Blaming Strategies	Lax Parenting	Over-reactivity	Harsh Discipline/ Parenting	Punishment	Ineffective/Irritable Discipline	Dysfunctional Discipline	Positive/Non-Active Strategies	Positive Parenting	Responsiveness	Antecedent
1.Bradshaw (2001)	Parent-Child Interaction *Coded*	X											
2.Geller and Johnston (1995)	Open-Ended Question *Coded*		X							X			
3.Jacobs et al., (2016)	Semi-Structured Interviews *Thematic Analysis*												
4.Jacobs et al., (2017)	The Parenting Scale								X				
5. Johnston et al., (2009)	The Parenting Scale Parent-Child Interaction *Coded*				X							X	
6.Nix et al., (1999)	Semi-Structured Interviews *Coded* Spouses Reports *Likert Scale*					X							

7.Park et al., (2018)	Parent-Child Relationship Questionnaire Alabama Parenting Questionnaire	X		X				X	
8.Petrenko et al. (2016)	Parenting Practices Interview *Coded*				X				X
9.Snarr (2006)	The Parenting Scale		X						
10.Snyder et al., (2005)	Parent-Child Interaction *Coded*					X			

1.3.3 Summary of results

1.3.3.1 What attributions do adults make about children's challenging behaviour?

Across both the measures used to gather data on attributions and the attributional dimensions measured there was a lot of heterogeneity, making it hard to do a meaningful comparison across the ten papers. To support doing so within this review, each of the ten research papers has been classified as finding either relatively positive, negative, or neutral attributions. This positive/negative distinction is more easily transferred to attributional dimensions such as benign/hostile (6) or dysfunctional attributions (9). For papers that utilise the attributional dimensions included in Weiner's (1985) theory, attributions that are either internal, controllable, stable or global are considered 'negative' attributions for the purpose of this review and in line with previous research (Choi & Kovshoff, 2013; Johnston et al., 2009; Morrissey-Kane & Prinz, 1999). Attributions that are either external, uncontrollable, unstable or specific are considered 'positive' attributions. Where mean attributional scores fell within 15% either side of the midpoint of their scale, these were considered 'neutral' findings. A neutral category was utilised to recognise that when an average score fell within the mid-point this was indicative of a participant making an approximately equal number of 'positive' and 'negative' attributions. For example, if the range of possible responses was 1–7, any score that fell between 2.97 and 4.03 would be considered neutral. Table 5 represents the key findings regarding the nature of the attributions measured in each of the papers along with the positive/negative/neutral classification. It is important to note that whilst this model of interpreting attributions has been employed to aid comparison between papers, it is reductionist in nature, not allowing for the full complexities of attributions regarding challenging behaviour to be captured.

Four papers found that participants made generally positive attributions about challenging behaviour (1, 3, 6, 9). A further three papers found that participants made attributions that were not particularly positive or negative (2[3], 7, 10). However, it is worth noting at this stage that study seven created one composite attributional variable that combined measures of causal attributional dimensions with measures of responsibility, intent and blame. According to Weiner's (1995) theory these are not theoretically the same and therefore inappropriate to combine in this way.

[3] It is worth noting that study two (Geller & Johnston, 1995) interpreted their findings as showing that "mothers generally made favourable attributions" (p. 26).

Two papers found that participants generally made negative attributions (5, 8). Both of these focused on children with Special Educational Needs (SEN: specifically, ADHD and FASD respectively); attributions made in the context of SEN are discussed in a section below.

In study four, only information regarding the statistical relationship between the attributions of the two participant groups (parents of children with DD and parents of children with TD) was provided and not any descriptive statistics for the attributional measure. Therefore, it is not possible to comment on the nature of the attributions made by participants in their research.

From these papers there is a relatively mixed pattern of results, although there seems to be a tendency towards making attributions that are either positive or neutral, more so than negative attributions. It does seem though that the attributions made are affected by the child's SEN status as is explored in the section below.

1.3.3.1.1 Attributions as a Factor of SEN Status

Of the ten papers, eight included TD children in their studies (1, 2, 4, 5, 6, 7, 9, 10). Of these eight, three reported that parents made attributions that were positive (1), benign (6), and low in dysfunctionality (9). Another four papers reported attributions that were neither positive or negative (2, 5 (TD only), 7, 10). In regard to study four it is not possible to evaluate whether attributions for the TD group were positive or negative.

Four papers included SEN populations as part of their research. Study eight explored attributions given by carers of children with FASD and found that whilst some explanations pertained to neurodevelopmental causes, relatively more carers gave attributions that referenced wilful disobedience, an arguably negative attribution. Study five found that parents of children with ADHD made attributions that were significantly more internal, controllable, stable and global, i.e., negative attributions, than parents of TD children.

In contrast to studies five and eight, study four found that parents of children with DD made significantly more positive attributions than parents of children who were TD; specifically, parents of children with DD attributed less control to their children for the challenging behaviours. This sentiment is echoed by the findings in study three, who, utilising thematic anlaysis, found that parents of children with ID gave a range of attributional causes for their children's challenging behaviour, recognising both their children's disabilities but also the impact of the environmental context. However, it is important to note at this stage that the quality assessment of study three highlighted the unclear nature of the analysis process involved in the

thematic anlaysis, and therefore it is not clear whether the analysis was inductive (and naturally found these themes) or deductive (and was looking for these themes in the data).

The findings in these papers suggest that parents of TD children make either neutral or positive attributions, whilst parents/carers of children with ADHD or FASD make comparatively more negative attributions, and parents of children with DD or ID make more positive attribtuions compared to parents of TD children.

Table 5.

Findings from Each Paper in Relation to Attributional Dimension Measured and Positive and Negative Distinction

	Child referent[a]							Parent referent[b]		Both referent	Additional Measures			
	Internality	Controllability	Stability	Globality	Hostile/Benign	Positive/Negative	Dysfunctional	Control	Responsibility	Thematic Analysis	Intent	Blame	Responsibility	Positive/Negative Distinction
1.Bradshaw (2001)						Positive								+ve
2.Geller and Johnston (1995)	Mean score within 15% of midpoint													Neutral
3.Jacobs et al., (2016)										Range of themes generated				+ve
4.Jacobs et al., (2017)		TD > DD						ns	ns		TD > DD	TD > DD	TD > DD	c
5. Johnston et al., (2009)	TD: mean score within 15% of midpoint ADHD: internal, controllable, stable and global ADHD scored significantly lower													TD: neutral ADHD: -ve
6.Nix et al., (1999)					Benign									+ve
7.Park et al., (2018)	d		d	d							[d]mean score within 15% of midpoint			Neutral

8.Petrenko et al. (2016)			Wilful disobedience	-ve
9.Snarr (2006)		Low in dysfunctionality		+ve
10.Snyder et al., (2005)	Mean score within 15% of midpoint			Neutral

Note. ns = not significant; TD = typically developing; DD = developmental delay; +ve = positive; -ve = negative.

[a]Child-referent attributional variables are those where the adult has made attributions regarding the child's role in the behaviour.

[b]Parent-referent attributional variables are those where the adult has made attributions regarding their own role in the behaviour.

[c]unable to determine positive or negative nature of attributional dimensions as descriptive data not provided in research.

[d]all variables with the same superscript are combined into one composite 'responsibility' variable on which the findings in the table are based.

1.3.3.2 Are Attributions Related to Behaviour Management Decisions?

1.3.3.2.1 Negative parenting

Four papers found a significant relationship between their attribution variables and their behaviour management variables (1, 5, 7, 9), another three found mixed results (2, 4, 6), and another two found no significant relationship (8, 10). Table 6 provides a visual representation of these findings.

Study one found that the degree to which the challenging behaviour was deemed intentionally caused by the child significantly predicted demanding/restrictive parenting when measured at the same time point ($F(1,70) = 7.27$, $p = .008$, $R^2 = .09$); with more intentional attributions predicting a higher level of demanding/restrictive parenting. Attributions accounted for 9% of the variance in parenting behaviour in a model in which no other variables were entered as predictor or control variables.

Study five measured maternal attributions for two types of challenging behaviour (inattentive-impulsive and oppositional) at two different time points one year apart. These four measures of maternal attributions were correlated with a measure of over-reactivity taken at the first time point. Of the four resulting correlations, three were significantly negatively correlated ($r = -.32$, $r = -.26$, $r = -.21$, all $p < .05$), with attributions that were more internal, stable and global related to higher levels of over-reactivity.

Study seven found that their composite attribution variable was significantly positive correlated with measures of harsh and lax parenting for mothers ($r = .27$, $p < .01$; $r = .18$, $p < .05$ respectively) and fathers ($r = .24$, $p < .01$; $r = .21$, $p < .01$, respectively), such that attributions that were more negative (i.e., more internal, stable, intentional) were related to higher levels of harsh and lax parenting.

Finally, study nine used several prompts to elicit multiple attributions from parents. From these attributional responses several different attributional variables were created: an *overall dysfunctionality score* (the average score of all attributions made by each participant); an *initial score* (the average score of the first attribution given for each vignette); and the *initial set score* (the average number of dysfunctional attributions given before a benign attribution). Over-reactivity significantly positively correlated with the *overall dysfunctionality score* ($r = .18$, $p < .05$) and the *initial set score* ($r = .20$, $p < .05$), but not the *initial score* ($r = -.08$, p = ns). This suggests that it is not the type of initial attribution given by an individual that is related to their behaviour

management decisions, but instead the overall level of dysfunctionality in the whole range of possible attributional causes that an individual might have.

Whilst these four papers have found evidence for a significant relationship between attributions and behaviour management, another five found mixed results (2, 3, 4, 6, 8). In study two their composite variable of internality/controllability was significantly positively correlated with negative/blaming strategies (r = .33, p < .01), however the variable of globality/stability was not (r = .16, p = ns). Although, it is important to note, the quality assessment showed that this study did not necessarily have valid outcome measures; the measures of behaviour management were coded according to a "rationally-developed coding system" (2, p. 25), in which each category (negative/blaming and positive/non-active) was categorised by a range of behaviours. Therefore, these results should be interpreted with some caution.

Study three's qualitative analysis found that where attributions related to the child's social environment, the response by parents was one of sympathy and an attempt to make adjustments within the social environment. However, when attributions were made that were seen as controllable by the child yet not a result of their ID, strategies aimed at managing the child, rather than attempts to amend the environment often followed.

Study four found that child responsibility, blame, intent, and the interaction between child-control and group (DD or TD) were all significant predictors of dysfunctional discipline and accounted for 16% of the variance in the same model. In line with Weiner's attribution theory, higher levels of blame and intent were associated with more dysfunctional discipline; however, higher levels of perceived child responsibility were associated with less dysfunctional discipline counter to what would be expected.

In study six there are six different pertinent correlations resulting from three different behaviour scenario vignettes and two measures of mothers' harsh discipline practices. Of these six correlations only three are significantly positively correlated (r = .13, p < .05; r = .18, p <.01; r = .18, p < .01) such that attributions that were more hostile were related to higher levels of harsh discipline.

Finally, study eight found that attributions were not significantly related to punishment (r = .32, p = ns); however, they did find that when attributions were included alongside FASD diagnosis and a measure of the child's behaviour in a model predicting use of punishment strategies, the model was significant (F(3,27) = 5.07, p = .01, R^2 = 0.29), with attributions providing 6% of unique variance.

The final paper, study ten, was the only paper to find no relationship between attributions and behaviour management, in this case, hostile attributions and ineffective/irritable discipline (r = .10, p = ns).

The ten papers included in this literature review have shown a mixed pattern of results regarding the relationship between attributions and behaviour management. However, the weight of evidence is for at least a partial relationship between attributions and negative behaviour management. The difference in findings between different papers does not appear to be explained by the type of attributional dimension measured. However, there is a significant amount of heterogeneity in the measures used across these ten papers, and it is therefore possible that the range of results is also due to the range in the facets measured. It is therefore not possible to strongly conclude that attributions are significantly related to negative behaviour management, although the balance of results does seem to suggest that there is a link between attributions and negative behaviour management, with eight papers finding some significant findings, and only five papers finding some non-significant findings.

1.3.3.2.2 Positive parenting

Four papers included a measure of positive parenting (2, 5, 7, 8). One found a significant relationship (8), another found mixed results (7), and another two found no significant relationship between attribution and positive behaviour management variables (2, 5).

Specifically, study eight found that caregivers who made neurodevelopmental attributions tended to utilise a range of positive strategies and did not use punishment. This was found in their qualitative analysis and also by their quantitative analysis in which a correlation of r = 0.65, $p < 0.001$ was found between attributions and antecedent strategy use. Additionally, their regression analyses found that caregiver attributions accounted for 31.4% of the variance in antecedent strategy use over and above that contributed by family type (i.e., whether the caregivers were non-parental relative foster carers, non-relative foster carers, or adoptive parents). The fact that family type was also a significant predictor could suggest that the reason study eight found a significant relationship was related to the qualitative differences in the caregivers included in the research. This is supported by the fact that non-relative foster carers and adoptive parents were more likely to use antecedent strategies than were relative foster carers, and that non-relative foster carers and adoptive parents also had greater knowledge about FASD, with knowledge significantly correlated with attributions.

Study seven found mixed findings in that fathers' composite attribution variable (termed child responsibility and made up of: internality, globality, stability, intent, blame and responsibility) was significantly related to positive parenting, such that attributions that indicate a higher level of child 'responsibility' were associated with less positive parenting (r = -.16, p. < .05). However, there was no significant relationship for mother's attributions.

Neither study two nor five found a significant relationship between their attributional behaviour management variables. In study two neither internality/controllability nor globality/stability were significantly related to their measure of positive/non-active strategies. Similarly, study five's compositive attributional variable (made up of internality, controllability, stability and globality) was not significantly related to responsiveness.

The results from these four papers provide little evidence that attributions are related to positive behaviour management strategies. However, this conclusion is only based on four papers, all of which utilise different attributional dimensions and different positive behaviour management variables; variation in the results is therefore perhaps to be expected.

Table 6.

The Relationship Between Attribution Variables and Behaviour Management Variables for Each Paper

		Negative Parenting Variables								Positive Parenting Variables			
Papers	Attributions measured	Demanding/Restrictive Parenting	Negative/Blaming Strategies	Lax Parenting	Over-reactivity	Harsh Discipline/ Parenting	Punishment	Ineffective/Irritable Discipline	Dysfunctional Discipline	Positive/Non-Active Strategies	Positive Parenting	Responsiveness	Antecedent
1.Bradshaw (2001)	Positive/negative	✓											
2.Geller and Johnston (1995)	Internality/controllability, stability/globality		I/C ✓ G/S ✕							I/C ✕ G/S ✕			
3.Jacobs et al., (2016)	Range of themes												
4.Jacobs et al., (2017)	Control (Child), Control (parent), responsibility (child), responsibility (parent), intent, blame								Blame ✓ Intent ✓ Responsibility (C) ✓ Control (P) ✕ Control (C) ✕ Responsibility (P) ✕				

5. Johnston et al., (2009)	Internality, controllability, stability, globality – composite variable	✓				✗
6.Nix et al., (1999)	Hostile/benign		3 of 6 ✓			
7.Park et al., (2018)	Internality, stability, globality, intent, blame, responsibility – composite variable	✓	✓		Fathers ✓ Mothers ✗	
8.Petrenko et al. (2016)	Wilful disobedience, neurodevelopmental attributions			✗		✓
9.Snarr (2006)	Dysfunctional attributions	✓				
10.Snyder et al., (2005)	Hostile/benign attributions			✗		

Note. ✓ = significant relationship; ✗ = non-significant relationship; I/C = Internality/controllability; S/G = stability/globality; C = Child; P = Parent.

1.3.3.3 Impact of Judgement of Responsibility and Mitigating Circumstances on Attributions and Behaviour Management.

Only four papers measure attributional dimensions that are related to Weiner's theory (2, 4, 5, 7). Study four found that child-responsibility was significantly correlated with dysfunctional discipline, whilst child-control was not significantly correlated. This provides supportive evidence for the 1995 theory that it is the JoR rather than exclusively causal attributions that is related to behaviour management responses. This notion is also supported by the finding that measures of blame and intent were also related to dysfunctional discipline, blame being theorised by Weiner to occur as the result of a JoR.

Study two has two composite measures internality/controllability and globality/stability. Here they find that only internality/controllability is related to negative/blaming strategies. This is perhaps to be expected according to Weiner's 1995 theory, as in order to have a JoR and subsequent negative behaviour management, it is necessary to have an internal and controllable causal attribution. This study therefore supports the theory put forward by Weiner in 1995.

The two other papers that measure Weiner's causal attributional dimensions (5, 7) find a significant relationship between attributions and behaviour management. However, they use composite measures and therefore it is not possible to separate out which causal attributions, or in the case of study seven, which additional cognitions – such as responsibility, intent and blame – are driving the significant relationship seen between attribution and behaviour management variables.

In addition to looking at which papers measured a JoR directly, it is also possible to look at whether there is an impact of mitigating circumstances as a proxy for the absence of additional JoR measures. Weiner classifies mitigating circumstances as some element that renders the individual unable to comprehend the 'wrongness' of the behaviour or consider the consequences of those acts. Specifically, Weiner wonders whether young children or individuals with learning needs might be less likely to be judged responsible for their actions, even if internal and controllable causal attributions have been made.

Four papers used participants who were the parents or caregivers of children with SEN (3, 4, 5, 8). Study three found that where parents made causal attributions relating to their child's ID, their emotional response was one of sympathy, and sometimes attempts were made to restructure the social environment instead. This is supported by study four's quantitative study which compared parents of children with or without DD. They found that parents of children with DD rated their children as significantly less in control of and less responsible for their behaviour.

They also found that parents of children with DD were significantly less likely to blame their child and attributed significantly less intent to the behaviours. This suggests that in instances where children have ID or DD, such as autism, Down syndrome and cerebral palsy, parents take this into account when assigning JoR.

Study five focused on parents of children with or without ADHD and utilised a composite attributional variable. They found that parents of children with ADHD scored their children significantly lower (i.e., more intentional, more stable, more controllable and more global) than parents of TD children. This pattern of results is in the opposite direction to that found by study four. However, also unlike study four this study does not measure whether or not the parents think the child is responsible for their behaviour, and therefore it is possible that even though the parents of children with ADHD made more internal and controllable attributions (seemingly 'negative' attributions), they may still also have made a JoR that their children are not responsible for their behaviours due to the mitigating circumstance that they have ADHD.

Alternatively, it is also possible that there is something qualitatively different about having DD and having ADHD. With the exception of autism, one feature of the DDs included as part of study four's sample is a degree of facial or physical features indicative of the DD, particularly with Down syndrome. One possibility is that this visible indicator of a child's DD could be an indicator of the possible mitigating factors for the child's challenging behaviour, in a way that children with ADHD do not have. This possibility is tentatively supported by findings in study eight which found that the use of punishment was significantly higher for children without dysmorphic facial features associated with FASD (r = -0.50, p < 0.01). Whilst this does not link directly to JoR, it does suggest that there is something about the physical appearance of the child that contributes to the behaviour management responses of their caregivers and parents.

Interestingly, study eight also found that knowledge of FASD was linked to the type of attributions made, with caregivers who had a higher level of knowledge being more likely to give neurodevelopmental attributions (r = -0.38, p < .05). This suggests that knowledge about factors that could be considered mitigating circumstances can influence the causal attributions that are made. However, there was not a significant relationship between knowledge of FASD and use of antecedent or punishment strategies.

The findings from these four papers suggest that parents do take into account their child's SEN when making causal attributions. However, it is not clear whether the SEN are considered a mitigating circumstance, or instead worsen the causal attributions and JoR made, or indeed whether the direction of impact varies as a function of the type of SEN.

Other factors that could influence the JoR include the type and degree of challenging behaviour demonstrated by the child. Study five statistically analysed the effect of different behaviours presented in the vignettes on attributions and behaviour management decisions made. They presented two types of vignettes, one in which inattentive-impulsive behaviours were the focus, and another in which oppositional behaviours were the focus. They did not find an effect of vignette behaviour on attributions or behaviour management. This suggests that it is not the type of behaviour being demonstrated that is of significance in determining the attributions, JoR and behaviour management decisions that are made.

However, study five also found that maternal ratings of the child's challenging behaviour as well as independent observations of the child's non-compliance was significantly correlated with maternal attributions and parenting, such that greater child oppositionality (challenging behaviour) was related to attributions that were more internal, controllable, stable and global, and parenting that was higher in over-reactivity and was less responsive. This finding is further supported by studies seven and eight which both found that level of child behaviour problems positively correlated with harsh/lax parenting and use of punishment, respectively. These three papers suggest that the level or amount of challenging behaviour that a child shows impacts on attributions and behaviour management. JoR are theorised to be made about the person rather than the specific behavioural event. These findings suggest that it may be the degree of challenge associated with the behaviour that influences the perception that parents have about the child more generally, in that the higher the level of challenging behaviour a child demonstrates, the more likely the parent is to consider this a part of the child's character that might impact on the JoR.

1.4 Discussion

1.4.1 Summary of Findings

This systematic literature review set out to answer two main research questions. Both of these will be explored in turn using the findings from the ten papers which met the inclusion criteria. Despite actively searching the literature for research that included teachers as participants, no papers were found that met the inclusion criteria. Any papers including teachers that were initially identified focused on children who spanned a range of ages including primary and secondary. Analysis methods within these papers did not allow for conclusions to be drawn about attributions made for primary-school-aged children only (see Appendix B for more

information). Accordingly, for the remainder of this discussion the term 'adults' is used with reference to parents and carers only, and the findings cited do not reflect adults more generally including teachers.

1.4.1.1 How Do Adults Attribute the Challenging Behaviour of Primary-School-Aged Children?

In relation to the first research question, there was a relatively mixed pattern of results from the ten papers, with four showing that adults made positive attributions, three showing a neutral pattern of attributions, and two finding adults made negative attributions (the tenth paper did not provide descriptive data necessary to contribute to the understanding of this question). Whilst this was a mixed pattern, there was a slight tendency towards making either positive or neutral attributions. This is similar to the conclusion made by Kuhns et al. (1992), who found that parents made attributions that included a wide range of factors that were both internal and external to the child.

There was also the suggestion that the types of attributions made varied depending on whether the child had diagnosed SEN and according to the type of SEN they had. For example, study five found that parents of children with ADHD made attributions that were more internal, controllable, stable and global than parents of children who were TD, in line with previous findings from Chen et al. (2008).

The findings from this literature review suggest that parents of children with DD or ID make attributions which are more positive than parents of TD children, i.e., more external, uncontrollable and unstable. However, these findings are in contrast with those from Lancaster et al. (2014) who found that parents made attributions that were internal, controllable and stable. Having said this, it is important to highlight that study four does not provide descriptive statistics. Therefore, it is only possible to conclude that parents of children with DD scored significantly lower on their attributional measures of child-control, and not what their absolute score was. This means that in study four it is not possible to determine whether the attributions made by parents of children with DD were positive or negative.

Another point of comparison between Lancaster et al. (2014) and study three and four is the SEN of the focus children included, all of which were considered to have an ID. Closer examination of the studies' samples shows that 50% of the focus children in Lancaster et al. (2014) had autism, 25% had ADHD, the remaining 25% being children with Down syndrome and other developmental disorders. This sample differs in one key characteristic to that of study three and four in that they did not have focus children with ADHD. This suggests that rather than

causing one to question the findings of this literature review, the disparity with the findings of Lancaster et al. (2014) instead lends further support for the notion that parents of children with ADHD make more negative attributions than parents of TD children or children with DD.

Whilst the results of this literature review in the context of wider research do not provide a conclusive indication of the types of attributions made by parents of primary-school-aged children's challenging behaviour, a tentative conclusion is that this varies as a function of SEN status; although, again, the exact nature of this is not entirely clear. The notion, however, that attributions vary as a function of SEN status is supported by Gifford and Knott (2016), who showed care staff a video of an individual engaging in challenging behaviour, but varied the SEN status (autism, learning difficulties or Down syndrome) when describing the person. The way in which staff viewed the behaviour was significantly different depending on which SEN description they had been given; viewing the individual best when described as having autism and worst when described as having learning disabilities. This raises a further question of whether children with autism and children with learning disabilities, ID, or DD, should be considered part of a homogenous group as in studies three, four and Lancaster et al. (2014).

1.4.1.2 Are Attributions Related to Behaviour Management Decisions?

Although many types of behaviour management variables were measured across the ten papers included in this literature review, these were split into whether they measured positive or negative aspects of behaviour management. Of the ten papers that explored negative parenting, five found a relationship between their attributions and behaviour management, three found mixed results, and a final two found no relationship. The balance of evidence is weighted slightly in the direction of suggesting that there is a relationship between attributions and negative behaviour management, however the evidence is far from conclusive. This is similar to the pattern of previous research presented in the introduction between Armstrong and Dagnan (2011), Reimers et al. (1995) and Butcher and Niec (2017). In relation to positive parenting, only four papers measured this, with little evidence of a relationship between attributions and positive parenting. However, the findings from studies seven and eight do suggest that the relationship between attributions and positive behaviour management may be affected by the role of the adult (i.e., mother, father or non-relative foster carer).

1.4.1.3 Which Mechanism Proposed by Weiner (cognition – emotion – action *OR* cognition – JoR – emotion – action) Best Explains the Pattern of Results?

Weiner's original attributional theory of interpersonal motivation (1985) proposed a mechanism in which causal attributions led to emotions that led to action; and theorised a relationship between causal attributions and behaviour management. According to this theory you would expect to see a consistent pattern of findings in which attributions are related to behaviour management. In 1995, Weiner updated this theory to suggest that following causal attributions one also makes a JoR. Depending on the mitigating circumstances surrounding the individual, one could receive internal and controllable causal attributions, yet not be deemed responsible for the outcome. According to this theory you would not necessarily expect attributions to be consistently related to behaviour management outcomes.

The mixed pattern of results in this review suggests that the variables of attributions and behaviour management are related but are also affected by a third variable which would render them no longer related, i.e., the JoR. This suggestion is further supported by the findings in study four that attributions of child-control were not significantly related to behaviour management variables, but attributions of child-responsibility were. These findings are the first reason to suggest that the data is most representative of the 1995 theory.

The second area of evidence explored in relation to this was the impact of possible mitigating circumstances. Looking at papers which have children with SEN as the focus children suggests that SEN status affects attributions and its relationship to behaviour management; however, in some circumstances the SEN status appears to be considered a mitigating circumstance and thus reduces the chance of negative behaviour management (3, 4), whilst other types of SEN appear to be related to an increase in negative behaviour management outcomes (5, 8).

Additionally, analysis of studies five, seven and eight suggests that the degree of challenging behaviour presented by the child impacts on the JoR made, with higher levels of challenging behaviour associated with increased JoR. This finding could be explained by drawing upon Kelley's covariation model of attributions (Kelley, 1973), which suggests that when determining whether to attribute behaviour internally or externally, individuals look for three factors: consistency (whether this behaviour always occurs in response to the preceding stimulus), distinctiveness (whether the behaviour only occurs with one stimulus or with all) and consensus (do other people react the same way). Where consistency is high (always responds in this way to this stimulus), distinctiveness is low (responds the same way to all stimuli) and

consensus is low (responds differently to others), the behaviour tends to be attributed internally. This suggests that when children display a higher degree of challenging behaviour than their peers, consensus information would be low, distinctiveness more likely to be low, and consistency more like to be high, and thus be attributed internally.

The research discussed as part of this literature review, including wider research, provides supportive evidence for the presence of the JoR in the mechanism from attributions to behaviour management, as suggested by Weiner in 1995.

1.4.2 Strengths and Limitations

An important strength of this research is the high level of sensitivity within the search strategy for highlighting relevant papers. With a total of 2,056 titles and abstracts screened the likelihood of having included all relevant papers is high. Another strength is the quality of the papers included in the literature review. The mean score given to papers was 73%, indicating a good level of quality. This helps provide confidence in the findings and conclusions made based on each of the ten papers.

There are two key limitations that relate to the methodology of this literature review, and another two limitations that are specific to the final set of papers. The first methodological limitation relates to the inclusion/exclusion criteria. The second research question required that papers included in the literature review analysed the relationship between their attribution and behaviour management variables. This reduced the number of papers that were then included for review. Whilst this was appropriate for the second and third research questions, it limited the number of papers that could be drawn upon to answer the first question. This means that another review seeking only to answer the question “what attributions do adults make about primary-school-aged children’s challenging behaviour?” and therefore applying different inclusion and exclusion criteria, might find different, and arguably more valid, results due to the likely higher number of papers from which conclusions could be drawn.

Secondly, this review was only able to identify four papers that included positive parenting behaviour management variables. It is possible that this was due to the terms included in the search strategy, as there was only one specific reference to a ‘positive’ strategy, namely the term ‘help*’. Future research would benefit from using search terms that accommodate both positive and negative behaviour management approaches.

There were also a number of limitations related to the final ten papers. The first is that the statistics used when exploring the relationship between attributions and behaviour

management were often correlational, meaning that it is difficult to determine the causality of the relationship between challenging behaviour, attributions and behaviour management.

The second limitation is that the nature of the inclusion and exclusion criteria, in the context of the existing literature base, means that no papers exploring the attributions of teachers were included, and only one paper explored the attributions of carers who were not the biological parents of the child (study eight). This limits the scope of the reflections that can be made in this review to attributions by parents of primary-school-aged children's challenging behaviour. Whilst this is not in and of itself a particular problem, the fact that some research has found differences in the explanations given for challenging behaviour made by parents and teachers (Miller, Ferguson, & Moore, 2002) suggests that it would be interesting to systematically explore this further.

1.4.3 Future Research

Whilst this literature review has taken steps to address the question of the possible role of the JoR in attributions and behaviour management of challenging behaviour, there are several suggestions for future research that could be undertaken to explore this further. This could help contribute more conclusively to an understanding of Weiner's attributional theory of interpersonal motivation in relation to the field of challenging behaviour in children. The first is for more research that measures both the causal attributional dimensions of Weiner's (1995) theory and the JoR. Importantly, these variables should remain as individual variables when analysed to allow for comparison, and not combined into composite variables, something which is not always supported by the theory. This would be the best way to further examine the relationship between attributions, JoR and behaviour management.

Additionally, qualitative research regarding the attributions adults make about children's challenging behaviour might allow a more in-depth insight into the thought processes involved when making attributions and determining how to manage the behaviour. One example of how this could be done can be seen in Jacobs et al. (2016). They used vignettes to prime parents' thinking about their children's challenging behaviour and then used semi-structured interviews to elicit participants explanations for, and behaviour management of, their child's challenging behaviour.

One of the questions that has arisen from the current research is the role of identified SEN in the attributions that adults make for challenging behaviour. The literature base would benefit from research that compares, using the same measures, the attributions made by parents of

children with different types of SEN. This could be done quasi-experimentally in the same way as in study five, or alternatively the SEN status of the focus child could be experimentally manipulated as in Gifford and Knott (2016). However, one limitation of experimentally manipulating SEN status is that parents would not be considering their own child's behaviour, thus reducing the validity of the findings.

It would also be helpful for research to compare across a range of SEN groups and to create more homogenous groups in their focus children; for example, separating out autism, ADHD and ID, rather than including these all as one group. Taking this further, future research could explore the attributions that parents make of TD children who demonstrate high levels of unexplained behaviour, i.e., where they do not have a diagnosis that pertains to their challenging behaviour. The inclusion of this group of participants might help further explore whether SEN status is considered a mitigating circumstance impacting on JoR.

1.5 Conclusion

This paper set out to explore attributions for, and behaviour management responses to, challenging behaviour from primary-school-aged children, in the context of Weiner's (1985, 1995) attributional theory of interpersonal motivation. In order to answer the research questions, a systematic literature review was carried out, identifying ten papers which met the inclusion criteria, from an original 2056.

Analysis of these ten papers was unable to state conclusively how adults attributed challenging behaviour for primary-school-aged children, other than that attributions appear to vary in relation to whether the child has an identified SEN need. Whilst the evidence seems to suggest that parents of children with ID or DD make more positive attributions than parents of TD children, and parents/carers of children with ADHD and FASD make more negative attributions, this was not conclusive and would benefit from future research.

There was a tentative suggestion in the research that there is a relationship between attributions and behaviour management approaches; however, this appears to be mediated by the JoR and mitigating circumstances such as SEN. It does, however, appear to provide evidence for Weiner's 1995 theory, as opposed to the 1985 theory.

There would be a benefit in future research explicitly measuring the JoR alongside causal attributions. In addition, it would be helpful to compare these variables between parents of children with a range of SEN needs, and also of none, but who still display high levels of challenging behaviour.

2 Chapter 2. Attributions for the Causes of Challenging Behaviour of Primary-school-aged Looked After Children: Explanations given by Teachers and Foster Carers.

2.1 Introduction

2.1.1 Looked After Children

Children and young people are considered 'looked after' by the Local Authority (LA) if they are provided with accommodation in a setting not with their primary caregiver for a period of 24 hours or more (Drew & Banerjee, 2018). This placement may occur through voluntary agreement with parents, or involuntarily through a care or placement order, or if the young person receives a custodial sentence (Department for Education (DfE), 2019a).

As of the 31st March 2019, 78,150 children and young people were being 'looked after' by a LA in England, with 18% aged 5–9 years and 39% aged 10–15 years (DfE, 2019a). Reasons for children being looked after included: abuse and neglect (63%), family dysfunction (14%), family in acute stress (8%), no parents to look after the child (7%), child's disability (3%), parental illness or disability (3%) (DfE, 2019a).

The Adolescent and Children's Trust (TACT) recently released a document that presented key words often used by professionals, alongside the terms the children and young people who are looked after would prefer were used (Ortiz & TACT, 2019). When referring to 'Looked After Children', some young people suggested that every child is 'looked after' and therefore the term should not be used just to apply to them. Additionally, one professional commented that "the acronym 'LAC' can be understood as suggesting that the child or young person is 'lacking' something" (Ortiz & TACT, 2019, p. 9), despite this not being an intended consequence of the use of the acronym.

Alternative phrasings suggested in the document include: calling children by their names, the phrase 'Young People or Children', or that Local Authorities should say 'our children'. Given that this paper is focussed specifically on children and young people who fall under the definition of looked after, this paper will substitute the typically used LAC acronym and refer simply to

'children' as per the suggestion in the TACT document. The phrasing 'children who are looked after' will be used where clarity is needed.

2.1.2 Challenging Behaviour

Lowe & Pithouse (2004) consider a child who is looked after to meet the definition for challenging behaviour if they meet any of the following criteria:

- has at some time caused more than minor injuries to themselves or others
- has at some time resulted in the destruction of their immediate environment
- behaviour occurring at least weekly which either:
    i. places them or others in physical danger
    ii. requires intervention by more than one adult for control
    iii. causes damage which cannot be rectified by immediate carer
    iv. causes at least one hour's disruption
    v. has caused disruption lasting for more than a few minutes at least daily
- has resulted in the child being excluded/threatened with exclusion from a public facility because either:
    i. a ban has been/will be imposed by the facility
    ii. carers are reluctant to accompany the child
    iii. adequate supervision requires more than one adult
- has resulted in the child being apprehended by the police on more than one occasion

Importantly, the TACT document (Ortiz & TACT, 2019) highlights that children and young people prefer a range of alternative terms instead of the phrase 'challenging behaviour', such as: having trouble coping, distressed feelings, different thinking method, and difficult thoughts. All of these terms, whilst valid, shift attention away from observable behaviours and emphasise internal psychological processes possibly reflecting a shift to explanations for the observable challenging behaviour. Despite a willingness on the behalf of the author to use the preferred terms of the young people, as one of the aims of this research is to explore the explanations that foster carers and teachers provide for the challenging behaviour, it is not deemed appropriate to shift from using the term 'challenging behaviour' to any of those proposed by the young people in the TACT document.

Children who are looked after are commonly reported to display high rates of challenging behaviour (Brown, Waters, & Shelton, 2017). According to the DfE, 29% of children aged 5–16 years old had scores on the Strengths and Difficulties Questionnaire (Goodman, 2001; a brief

behaviour screening tool that measures emotional symptoms, conduct problems, hyperactivity/inattention, peer relationship problems and prosocial behaviour) that fell within the cause for concern range (DfE, 2019a). In a more focused piece of research, four LAs in Wales were asked to identify which of their looked after children met the definition of challenging behaviour by Lowe and Pithouse (2004). 28% of children were identified as showing challenging behaviour, with a third of these of primary-school age. This prevalence of challenging behaviour is likely associated with the higher rate of Special Educational Needs (SEN) seen in children who are looked after compared to children not 'in need'[4] or looked after. For example, Sebba et al. (2015) report that across the U.K., 86.5% of children who had been looked after for over a year required some level of SEN intervention in school, compared to 35.2% of children who were not in need or looked after. Of those children looked after and identified as having SEN, 50–60% had their primary need identified as behaviour, emotional and social needs, compared to 28.2% of children not in need.

Different types of challenging behaviour have been identified in children who are looked after. Octoman, McLean and Sleep (2014) asked foster carers of children aged 4–12 years old to rate how much of a problem they felt different behaviours were. Using principal component analysis, four factors were identified accounting for 60% of the variance: cognitive difficulties; sexual or risky behaviours; behaviours that were aggressive, controlling, or violent in nature; and anxiety-based behaviours. However, it is important to note that participants were asked to identify behaviours they thought were problems for foster carers generally, and not necessarily behaviours they had experienced themselves.

One study asked 115 foster carers to identify how often they had experienced each of a list of 48 behaviours within the previous month (Lowe & Pithouse, 2004). The following were identified as frequently occurring behaviours: attention seeking, telling lies, stubbornness, non-compliance, confrontation, verbal and physical aggression, and hyperactivity.

There is relatively little research exploring which behaviours teachers find challenging in relation to children who are looked after. Boorn (2008) reported that 97 teachers rated children who are looked after as having significantly higher levels of behaviour problems on the Taxonomy of Social Situations (Dodge, McClaskey, & Feldman, 1985) in a range of social situations (such as response to provocation and response to stress) than children who are not looked after. Another study which used a grounded theory approach to explore the experiences of trainee teachers reported that attention-seeking, withdrawn, and quiet behaviours were perceived as challenging

[4] Children in Need are those who require further support from the Local Authority in regard to safeguarding and welfare under Section 17 of the Children's Act 1989.

(Alix, 2015). These descriptions are consistent with some of the challenges experienced by foster carers (Lowe & Pithouse, 2004; Octoman et al., 2014).

2.1.3 Attribution Theory and Challenging Behaviour

Attributions are the beliefs individuals hold about the causes of specific outcomes (i.e., behaviours or events) (Munton et al., 1999). Attributions can be made about your own or others' behaviours and events (Hogg & Vaughan, 2011). One pragmatic definition of causal attributions is any statement that answers the question 'why?' about a given behaviour or event (Munton et al., 1999). Weiner (1985, 1995) proposes that attributions of behaviour are organised along three causal dimensions: internal/external, stable/unstable, and controllable/uncontrollable.

Internal attributions are sometimes considered to be attributions about factors such as an individual's personality or disposition (Heider, 1958). This understanding was extended to highlight that factors can be internal to an individual, but not necessarily a factor of their personality or disposition (Abramson et al., 1978; Munton, et al., 1999). For example, hunger may be a causal explanation for why a child is showing challenging behaviour; whilst this may be internal to the child, it is not an element of their personality. This additional distinction therefore states that internal attributions are anything that is derived from 'within the skin' and an external attribution is anything 'outside the skin'.

Stable causes are ones where the causal factor is expected to persist over time, whilst unstable causes are those that are transient. For example, if a child was deemed to be showing challenging behaviour because their pet had died that morning, this might be considered an unstable cause.

The controllable/uncontrollable dimension builds on the internal/external dimension by indicating whether or not an individual had control over the behaviour or event. For example, a child who has thrown an item across a room may not be viewed as in control of their behaviours if they do not have the skills to regulate their emotions.

Causal attributions can influence emotions and behaviours (Hogg & Vaughan, 2011). Specifically, Weiner (1995) proposes a mechanism in which causal attributions are followed by a

Figure 5. Visual representation of Weiner's (1995) proposed mechanism from attributions to actions.

judgment of responsibility (JoR), which in turn influences the emotions and following actions of the individual making the attributions; see Figure 5 for a visual representation.

An individual can only be judged responsible if internal and controllable attributions have been made; however, this does not mean that all internal and controllable attributions lead to a JoR. Whilst causal attributions are made based on a specific behaviour or outcome, the JoR is made depending on factors that pertain to the individual more broadly, and not just the specific event. Where circumstances are perceived as mitigating, an individual may not be considered responsible. Possible mitigating circumstances include the person's age, SEN or learning needs, or any circumstances that might render an individual unable to comprehend the "wrongness" of their behaviour (Weiner, 1995, p. 9). It is conceivable, therefore, that an individual might consider the experiences that a child has been exposed to as a mitigating circumstance, particularly if these experiences are viewed as adverse.

In the previous chapter a systematic literature review explored attributions of children's challenging behaviour by adults. Two findings are important. Firstly, the findings from this review were mixed, with some papers finding that adults made attributions that were benign (Nix et al., 1999) and low in dysfunctionality (Snarr, 2006), whilst others found that parents made attributions that were roughly equally distributed between internal and external, controllable and uncontrollable, and stable and unstable (Geller & Johnston, 1995; Park et al., 2018).

Secondly, the presence and type of SEN of children appears to influence the attributions made. In particular, parents of children with intellectual disability (ID; Jacobs et al., 2016) or developmental delay (DD; Jacobs et al., 2017) were more likely to make favourable attributions, whilst parents of children with Attention Deficit Hyperactivity Disorder (ADHD; Johnston et al., 2009) and Foetal Alcohol Spectrum Disorders (FASD; Petrenko et al., 2016) were more likely to make less favourable attributions. As there is a relatively high prevalence of SEN within the population of children who are looked after (Sebba et al., 2015), it is difficult to ascertain from available data the kinds of attributions foster carers and teachers might make about the children's challenging behaviour.

To the author's knowledge there is no previous research that explicitly measures the causal attributions of Weiner's theoretical framework made by foster carers and teachers about challenging behaviour. However, some research has explored broader explanations given for challenging behaviour. For example, using a grounded theory approach, Taylor, Swann, and Warren (2008) interviewed 14 foster carers to explore their beliefs about the causes of challenging behaviour. A range of themes were identified: biological influences; rejection;

inconsistency; abuse; lack of positive role models; neglect; delays accessing resources, inadequacy of resources and conflicts in the system. Despite not directly measuring Weiner's causal attributions, Taylor et al. (2008) placed their findings within Weiner's theoretical framework and highlighted that some foster carers had described how the previous experiences of the child led them to feeling sympathy for them. Taylor et al.'s interpretations fit with Weiner's (1985) model of cognition – emotion – action; however, Taylor et al. (2008) do not comment on the 'action' component other than to hypothesise that any sympathy felt may lead to foster carers being more inclined to support the children.

Despite not directly measuring attributions in relation to Weiner's theoretical framework, the themes generated in Taylor et al. (2008) suggest that it is likely that foster carers would have been making uncontrollable attributions which would negate the possibility of the child being judged responsible for their behaviour. The present research will build on these findings by explicitly measuring causal attributions and placing these in the context of wider explanations for challenging behaviour.

In addition, there is limited research exploring teachers' explanations for challenging behaviour in children who are looked after. One piece of relevant research is a Bachelor of Education dissertation (McKillop, 2015) in which four primary school teachers were interviewed regarding their experiences with children who are looked after. Regarding challenging behaviour, two possible explanations were given: one was a perceived absence of social skills when working with peers; the second considered challenging behaviour as a device to obtain attention from others. Both of these explanations match the definition of internal attributions. However, it is not possible to determine whether or not teachers would perceive children as in control of, or responsible for, these behaviours.

Finally, previous research identified that when parents and teachers search for explanations for challenging behaviour of typically developing children, they sometimes blame each other for the behaviour (Miller, 1995; Miller et al., 2002). To date, it is not clear whether this tension extends to the relationship between teachers and foster carers. Given this precedent, the present study will explore and compare foster carers' and teachers' attributions.

2.1.4 Current Study

Using a mixed methods approach, the aim of the present study is to explore foster carers' and teachers' attributions of children's challenging behaviour and to compare their attributional styles and explanations for that behaviour. Specifically, this research focusses on the challenging

behaviour of primary-school-aged children (aged 4–11 years) for two reasons. Firstly, because teachers will have a high level of familiarity with the child and secondly, to increase the homogeneity of experiences that the participants will have had.

The study's objectives are, firstly, to measure causal attributions along Weiner's three causal dimensions: internal/external, stable/unstable and controllable/uncontrollable. Using these dimensions will enable a direct comparison between this study and findings from previous research. In addition, results of the internal/external and controllable/uncontrollable dimensions will inform a discussion regarding whether children are judged as responsible for their behaviour. Due to the complex and interacting factors at play for children who are looked after, the second objective of this study is to utilise inductive thematic analysis to explore foster carers and teachers lived experiences of challenging behaviour. These more in-depth accounts by participants will give further insight into whether the experiences of children who are looked after are considered to be mitigating circumstances that render looked after children less responsible for their challenging behaviour.

The current study will use a mixed methods approach to explore the following research questions:

1. What causal attributions are given for challenging behaviour?
2. What explanations are given for challenging behaviour and could these be considered to be mitigating circumstances?
3. What are the similarities and differences between foster carers and teachers' causal attributions and wider explanations?

2.2 Methods

2.2.1 Epistemology

The present study takes the approach of relativist ontology with a social constructivist epistemology. A relativist ontology suggests there is no single 'truth' to how individuals interpret events and how this relates to their thinking and behaviour (Guba & Lincoln, 1994). Instead, the approach values individuals' perceptions of experiences, events and their journey to constructing meaning. Research on attributions to date has highlighted a range of factors that influence the formation of attributions; such as, SEN (Gifford & Knott, 2016; Jacobs, et al., 2017; Johnston et al., 2009), maternal depressed mood (Bolton et al., 2003), and role of the adult (Park et al., 2018; Petrenko et al., 2016). This level of complexity suggests that multiple and interrelated factors

need to be considered when understanding the attributions of challenging behaviour made by adults. A relativist perspective allowed the research to take an inductive perspective to how foster carers and teachers understand and make sense of children's challenging behaviour.

In addition to ITA, where participants made causal attributions as part of the research process, these were coded via *a priori* coding in relation to the nature of the attribution that was made, specifically through use of the Leeds Attribtuional Coding System.

The foster carers', teachers' and the researcher's role in the research itself was acknowledged through a reflexive process. It is therefore neither possible, nor desirable, to withdraw the indivudals' and researcher's experiences from the process of the research (Blair, 2015). Predetermined thoughts and biases were acknowledged through the process of supervision prior to the research process commencing (Peshkin, 1988), with a reflective journal used throughout the research process to support with conscious acknowledgement of biases. Appendix E contains details of these reflections.

2.2.2 Participants and Recruitment

Participants were teachers and foster carers recruited from the South-East of England. Teachers were recruited via face-to-face meetings with the virtual school, at virtual school network events or through the researcher's own professional contacts. Recruitment methods aimed specifically at foster carers included the help of the Fostering Team Manager forwarding information to the fostering network for the same South-East LA. In addition, social media posts were made on foster carer groups asking interested individuals to contact the lead researcher. The final recruitment method was the utilisation of the lead researcher's own connections through family and friends, however no family members or friends of the researcher were included as participants. See Table 7 for numbers of participants recruited via each method.

Table 7. Numbers of Participants Successfully Recruited via Each Recruitment Method

Recruitment Method	Number of Foster Carers Recruited	Number of Teachers Recruited
Face-to-face Virtual School Meetings	4	2
Virtual School Network Events	0	3
Researcher Professional Contacts	0	3
Fostering Team Manager	4	0

Social Media	2	0
Researcher Personal Contacts	0	0

Please see Table 8 for demographic details of the participants. Of the teachers who participated, three were the Special Educational Needs Coordinators for their school, three were class teachers, one was Deputy Head and one was Head of Early Years.

Table 8.

Participant Demographic Details

	n =	Age (years)		Years in role	
	(Female)	Mean	Range	Mean	Range
Foster Carers	10 *(8)*	54.00	31–66	7.20	3–15
Teachers	8 *(6)*	38.60	25–50	12.71	1–25

Demographic details of the children discussed were not explicitly gathered, however the following information was spontaneously provided as part of the interview for all but one participant (see Table 9). Note that whilst multiple children were sometimes discussed as part of the interviews, this information refers only to the principle child identified by the foster carers and teachers.

Table 9.

Demographic Details Extracted from Transcripts for The Primary Child Discussed by The Participant

	n =	Age	
	(Female)	Mean	Range
Discussed by Foster Carers	10 *(3)*	7 years 10 months	5 years – 11 years
Discussed by Teachers	8 *(2)*	Year 2	Reception – Year 4

Note. Teachers discussed children's ages in regard to their year in school as opposed to their chronological age. Children in Year 2 are typically between six and seven years old.

Four foster carers mentioned Special Educational Needs in relation to the children they were discussing. These needs included: autism, Sensory Processing Disorder, Reactive Attachment Disorder, Chronic Trauma and ADHD. Two teachers mentioned an autism diagnosis in relation to the children they were discussing.

2.2.3 Procedure and Ethics

Informed and written consent was obtained in person prior to taking part (see Appendix G and H for information sheets and Appendix I for consent form). Data was collected via a semi-structured interview. The interview was conducted with a single interviewer in a quiet, private area: for teachers this was at schools and for foster carers this was within their home, with the exception of one foster carer who, also being a Headteacher, requested that the interview took place at their school. Once the interview had finished, participants were debriefed (see Appendix J and K for debrief sheets) and given a £5 voucher to thank them for their time.

Interviews were audio-recorded, transcribed and anonymised by the lead researcher. Audio recordings were stored on a password-protected computer until they were transcribed, at which point they were deleted. Ethical approval was provided by the University of Southampton Ethics Committee (see Appendix L for ethical approval).

2.2.4 Measure: Semi-Structured Interview

Data was collected using a semi-structured interview (see Appendix F for interview schedule). The interview started with the collection of demographic information (e.g. age, sex and years of experience). Next, participants were asked to identify and focus on one child about whom they felt able to talk in detail and whom they had seen exhibiting behaviour they considered challenging. Participants were not directed as to what challenging behaviour might be, so were free to interpret the term 'challenging behaviour' as they saw fit. Participants were then asked to describe that child in whichever way they would like to.

Participants were then asked a series of questions to elicit descriptions of the challenging behaviour they experienced, their explanations for the behaviours, and how they managed that behaviour. The interview was piloted with one foster carer and one teacher known to the author. Following piloting, a mood enhancing question was added to the end of the interview in order to help reduce any potential negative feelings experienced by the participants or researcher (Josephson & Singer, 1996; Rusting & DeHart, 2000).

Foster carer interviews were 24-64 minutes (average 39 minutes) and teacher interviews were 20-48 minutes (average 29 minutes).

2.2.5 Analysis

The present study utilised a mixed methods design. Firstly, transcripts were qualitatively analysed using inductive thematic analysis, and secondly, were quantitatively coded for causal attributions using the Leeds Attributional Coding System (Munton et al., 1999).

2.2.5.1 Inductive Thematic Analysis (ITA)

ITA was used to extract themes on participants' perceptions and experiences. ITA is a data-driven process that aims to look for any themes present in the data without looking through any theoretical lens. Braun and Clarke's (2006) six-phase procedure (familiarisation of data, generating initial codes, searching for themes, reviewing themes, defining and naming themes, producing the report) guided the process of analysis.

Phases one to five of ITA were carried out on the first five transcripts for each participant group, creating an initial draft set of themes and thematic map for each group. Each additional transcript was then analysed in turn and the codes assimilated into and accommodated by the existing thematic structure with the option for themes to be added, removed, or renamed. This process was utilised to inform discussions as to whether data saturation was reached, given the relatively small number of transcripts in each participant group. The coding of transcripts was also an iterative process in which earlier transcripts were revisited to assess whether they contained codes that were present in later transcripts but had not originally been identified.

Data from teachers and foster carers was analysed as two different groups to account for the social constructionist epistemological stance of this paper that individuals' views of the world are socially constructed based on their experiences (Holloway, 1997; Kukla, 2000). However, once the final thematic maps had been created, they were compared to identify themes in which the naming could be amended (whilst still staying true to the data) to allow for ease of comparison between the two groups. Once the thematic maps were finalised, a coding manual was created for each participant group.

2.2.5.2 Causal Attributions: LACS

Causal attributions were coded using the Leeds Attributional Coding System (LACS; Munton et al., 1999). The LACS follows a six-step process: (1) identify sources of attributions; (2) extract attributions; (3) separate cause and outcome elements of the attribution; (4) identify speaker, agent and target; (5) code attributions on causal dimensions; (6) analysis.

Attributions related to challenging behaviour extracted and were coded from the transcripts of the interviews with foster carers and teachers. A statement was considered to be an attribution if it answered the question "why?" in relation to a description of challenging behaviour. Attributions were coded when they related to specific incidences of behaviour and broader descriptions of behaviour. For example, an attribution about a specific behaviour might be: "the other day he hit me because he wasn't able to regulate his emotions", whereas an attribution for a general outcome of challenging behaviour could be: "she has meltdowns, kicking, screaming, but I think my behaviour would be challenging if I'd been through what they've gone through".

Step four of the LACS process involves the identification of the speaker, agent and target of each attributional statement. According to the LACS process, the speaker is the individual providing the statement, the agent is the person or entity considered in relation to the cause of the statement, and the target is the person or entity considered in the outcome of the statement. Given the context of the present research, the target would always be the child as the outcome would always be about the child's challenging behaviour. The person making the attribution (the speaker) will also always be either the teacher or foster carer. Accordingly, only the agent could vary between attributional statements, the agent being the person or organisation described as causing the challenging behaviour. In the present study, the agent was coded as being one of: self (i.e. the participant: foster carer or teacher), child (i.e., the looked after child being discussed), or other (i.e., the child's birth family, the school, etc.).

Step five involves coding the extracted attributions on a number of causal attributional dimensions. In the present research the three attributional dimensions from Weiner's (1995) theory were used: internal/external, controllable/uncontrollable, and stable/unstable, with each attributional statement being coded on all three dimensions. Although attributions are theorised to fall on a dimension, for the purposes of the present study attributions were coded as binaries with a code representing each end of each causal attributional dimension. In line with the LACS guidance, attributions that were unstable, external and uncontrollable were coded as 0, attributions that were stable, internal and controllable were coded as 1. Where there was insufficient information to make a valid judgment a score of 2 was given. The definitions used for each end of the attributional dimensions are drawn from Munton et al. (1999) and are presented in Table 10 below.

Table 10.

Attributional Dimensions and Associated Definitions

Attribution	Definition
Internal	Causes that are believed to originate from within the person; 'within the skin'.
External	Causes that could be characteristics of other people, or a set of circumstances; 'outside the skin'.
Controllable	Outcomes that could have been influenced or seen as under the control of the speaker without having to exert exceptional effort.
Uncontrollable	There is good reason to believe the speaker perceives the outcome to be inevitable or not open to influence.
Stable	Stable causes are those that are likely to continue to influence outcomes in the future. They do not change in the short term. It can also be a one-off event that continues to influence the speaker.
Unstable	If the event was deemed by the speaker to occur as the result of a temporary state of affairs.

Note. Definitions from Munton et al. (1999)

Step 6 is analysis. For this percentage data was calculated separately for each participant group and according to who had been coded as the agent (i.e., child, self, other). For each of the three attributional dimensions, the percentage of attributional statements to receive a score of either 0 (unstable, external, uncontrollable), 1 (stable, internal, controllable) or 2 (undecided) across all attributional statements for that participant group was calculated.

Munton et al. (1999) recommend that researchers wishing to use the LACS meet a threshold of 80% correct interpretation and analysis of the practice materials prior to conducting their own analysis. This threshold was met by the lead author.

2.3 Results

2.3.1 Causal Attributions: Similarities and Differences

Teachers identified the child as the agent (the cause of the challenging behaviour) in all of their attributions, whilst foster carers identified themselves or an 'other' (birth family, school etc.)

as the agent in only 5% attributions. As such, discussion of the results will focus only on attributions in which the child was the agent. Table 11 displays the findings.

Both groups attributed challenging behaviour more to internal, stable and uncontrollable causes. Of note is that more than four out of five times, foster carers and teachers attributed behaviour to stable causes. Additionally, whilst both groups attributed behaviour more to uncontrollable causes, teachers appear more likely than foster carers to attribute behaviour to controllable causes.

Examples of internal, stable and uncontrollable attributions made by foster carers and teachers are provided below; the phrases that are underlined indicate the outcome, and the phrases in italics indicate the causal attribution: "he was very volatile, *very, very unable to regulate his emotions*" (Participant F7)*;* "And then she'd run back into the classroom, hid under the table [...], *y'know not really being able to open up about it or anything"* (Participant T4)*.*

The percentage of attributions that were coded as undecided was low across the attributional statements where the child was the agent. The highest number of undecided attributional statements was for the dimension of controllability with the foster carer group.

Table 11.

Percent of All Attributions Coded in Each Causal Attribution Binary

	Teachers	Foster Carers		
	Child	Child	Self	Other
Number of attributions	116	229	6	7
Internality				
Internal	60.3%	61.6%	100%	28.6%
External	38.8%	36.7%	0%	42.9%
Undecided	0.9%	1.7%	0%	28.6%
Stability				
Stable	81.9%	89.5%	50%	85.7%
Unstable	18.1%	10%	33.3%	0%
Undecided	0%	0.4%	16.7%	14.3%
Controllability				
Controllable	41.4%	29.7%	83.3%	14.3%
Uncontrollable	56.9%	64.6%	16.7%	57.1%
Undecided	1.7%	5.7%	0%	28.6%

2.3.2 Inductive Thematic Analysis (ITA)

Whilst a full ITA was carried out for both foster carer and teacher interviews, the present study focusses on the presentation of themes pertinent to the research questions, i.e. descriptions of, and explanations for, challenging behaviour. A short summary of all the main themes identified for each participant group is presented.

2.3.2.1 Foster Carers

2.3.2.1.1 Summary

Analysis of the foster carers transcripts resulted in seven main themes and 23 subthemes – see Figure 6 for final thematic map and Appendix M for coding manual. Challenging behaviour featured throughout each interview and was therefore placed at the centre of the map. Foster carers also discussed their explanations for behaviour (*aetiology of behaviour*), together with how they managed the children's behaviour (*providing safety, security and love*). Whilst these three themes may reflect the questions in the semi-structured interview, an additional four themes were identified which were not explicitly linked to the interview questions. These included: *consequences of child's early experiences, improvements over time, impact for foster carers*. A final theme, *reference to a 'normal'*, captured the finding that foster carers often made reference to factors such as the child's behaviour deviating from the 'norm', having a 'normal' home, or needing to parent differently to 'normal'. It was therefore placed at the bottom of the map to indicate its relationship to many of the other main themes.

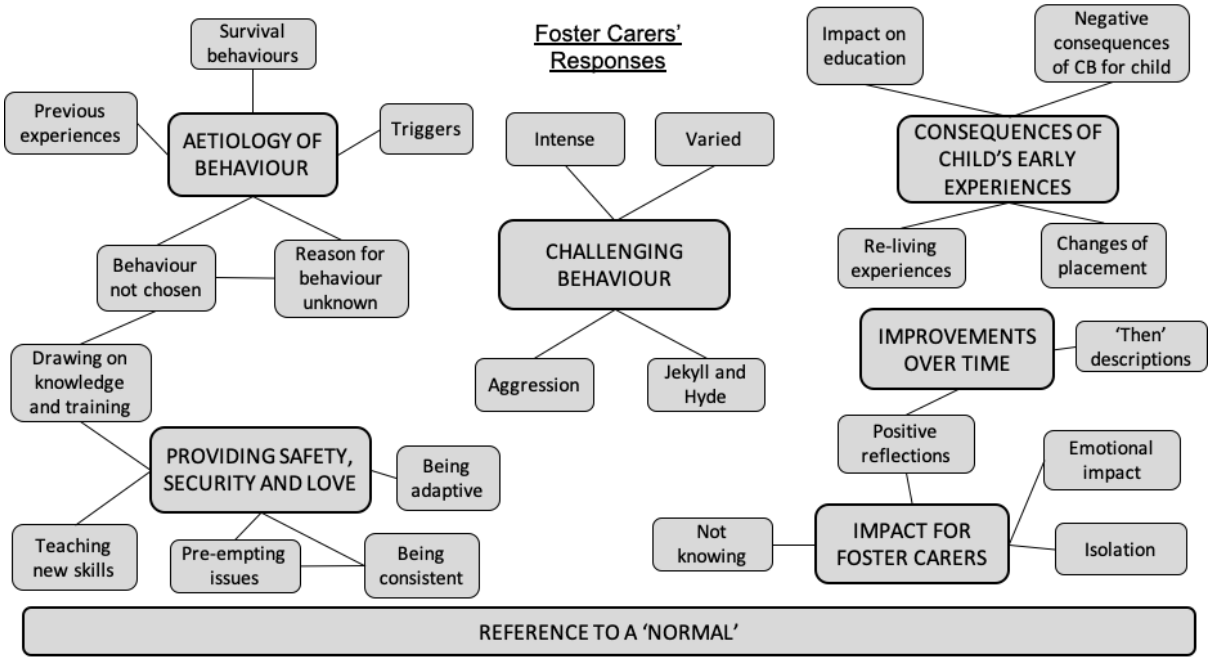

Figure 6. Final thematic map of foster carers' responses.

2.3.2.1.2 Challenging Behaviour

The challenging behaviour described by foster carers was wide ranging and varied between foster carers and between the different children discussed by any given foster carer. One element that came through was the *intense* level of behaviour that was experienced. For some foster carers this meant low-level behaviours (such as sleeping difficulties or defiance) being experienced consistently, whilst for others this intensity was seen in high-energy meltdowns or incidents of self-harm and *aggression*.

> So, the challenging behaviours was the intensity that he required, it was like a baby who needed to be with you all the time, but he is six. So that's hard work, that's all through the night, and evenings as well. (Participant F7)

One of two specific behaviours that were described more consistently by foster carers was *aggression*. These behaviours could be physical or verbal and also varied in terms of who the aggression was directed at .

> In the house she would pick things up throw them no matter what, she'd turn tables up she'd kick and hit and whatever she wanted to do, if she was really angry with herself she would probably, she'd get a duvet and stuff it in her mouth and pull it so hard that her

> teeth would bleed. She was so sort of angry with everything. Pull her hair, sort of self-harm. And this is at five. (Participant F6)

Another specific theme that came through in the behaviour was the notion of '*Jekyll and Hyde'* behaviours, in that the intense challenging behaviours would sometimes seemingly appear from nowhere as if at the 'flip of a switch'.

> She loved you but hated you if that makes sense, she just, she really wanted to be with you but also, she didn't want to get close, frightened of getting close to you so she'd actually be horrible as well. Really sort of Jekyll and Hyde personality. (Participant F6)

> She's quite a complex child, and she's lovely with it, she really lights up a room, she walks in if she's in a good mood, she walks in and it's just like someone's switched a light on. It's amazing, she's such a lovely person, and yet when she's in a bad mood or she's struggling with something, she's quite the opposite. She walks in and it's like someone's shut the curtains. Like a sink hole. So, yeah, she's quite difficult to balance and judge in that way, but she's adorable. (Participant F3)

2.3.2.1.3 Explanations for Challenging Behaviour

The explanations that foster carers gave for challenging behaviour fell under one main theme *Aetiology of Behaviour*, which will be explored in more detail below.

Aetiology of Behaviour. This theme emerged in response to questions about foster carers' explanations for children's challenging behaviour. It featured in every interview and comprised five sub-themes. These were: *behaviour not chosen, reason for behaviour unknown, previous experiences, survival behaviours,* and *triggers*. Often participants discussed a range of possible reasons for the behaviour: "*Interviewer*: What's your understanding of where some of those behaviours have come from...; *Participant*: There is a multitude of ideas, it's all nature/ nurture" (Participant F3).

Behaviour not chosen. This first subtheme refers to a seemingly philosophical understanding of the children's behaviour, that foster carers felt that the children often were not choosing to show the behaviours: "It's not a case of the child being naughty, it's the child

expressing an issue" (Participant F6); or that there were other underlying reasons for it: "I knew that there was going to be a reason to it, there's always, like, logic in the chaos" (Participant F3).

Reason for behaviour unknown. This subtheme encapsulates how foster carers sometimes felt unable to work out why a specific behaviour had occurred. However, often associated with this 'not knowing' was the sentiment that it still was not necessarily the child's fault that the behaviour had occurred: "Oh it wouldn't be him, he's 7. It won't be him" (Participant F2). Foster carers often suggested that there was likely a bigger reason for the behaviour, even if the specific reason eluded them at that time.

> These things will still happen and you think, well is it them, part of what they learnt, was it some sort of device they had to gain attention, or a hundred and one different things, a hundred and one different things why these things, sometimes there is a reason, sometimes there is no reason. (Participant F1)

Previous experiences. One of the broader underpinning explanations given by foster carers was that the children's previous experiences were having on-going emotional consequences that affected their behaviour today. For example, the impact of neglect on a child's view of themselves and the world around them, or the impact that living in a chaotic environment had on a child's later desire to seek out chaos: "She doesn't feel safe around people, she is testing, so she'll be testing me to see if I'll still be the one of those adults in the whole shop that will be there for her unconditionally" (Participant F4).

Additionally, foster carers talked about how children would sometimes act out behaviours that they had seen previously, or would struggle with social interaction due to a lack of adequate exposure as a result of their previous experiences: "So, when he's doing that to us, at home, I think, actually he is just a little boy and he is just living out this awful stuff that he has seen" (Participant F7).

Survival behaviours. This subtheme is similar to that above in that the associated behaviours stem from the child's previous experiences; however, this theme refers to explaining behaviours that were specifically aimed at providing safety and security.

> He was hyper, he was hypervigilant – "what's that?", and he would notice everything, absolutely everything. Even to the extent he would say, oh you've put nail polish on. And I just thought, kids at that age do not notice things like that. (Participant F8)

When discussing some behaviours, foster carers would describe them as behaviours that had previously served the function of survival when they had been with their parents.

> If she felt that she might be in a vulnerable position or she might be about to be abused in some way, which is why I said about bath time. Y'know you haven't got your clothes on therefore something bad's gonna happen. There's a man coming in your house, something bad's gonna happen. So, then she would, she'd go one or the other way, one way would be very sexualised behaviour and flirting with the man and sitting on his lap, and the other way would be angry and shouting and fighting and throwing things. (Participant F4)

Triggers. Foster carers sometimes described triggers that 'set off' the challenging behaviours they saw. Sometimes this would be a trigger from the child's past, such as particular places or words; sometimes this would be particular events that acted as triggers for other reasons, such as Christmas.

> Y'know all the nice things we'd do y'know she would always wanna wreck them at some point. I think, take the example of Christmas dinner, y'know, you spend hours doing your Christmas dinner, then you all sit at the table. Just for no reason at all she puts her hands in her dinner, puts her dinner in to my plate – here into here – and then smashed the whole lot across the floor here, just chucked everything y'know. (Participant F6)

2.3.2.2 Teachers

2.3.2.2.1 Summary

The analysis of the teacher transcripts resulted in six main themes and 17 subthemes – see Figure 7 for final thematic map and Appendix N for Coding Manual. Challenging behaviour was a focus throughout the conversations and hence this theme was placed at the centre of the map. Themes that are likely linked to the questioning of the interviews included: *aetiology of*

behaviour and *wide variety in behaviour management approaches*. Another three main themes emerged that were not explicitly linked to the questioning of the interview. These were: *challenges associated with the care system, positive reflections* and *school-specific factors*.

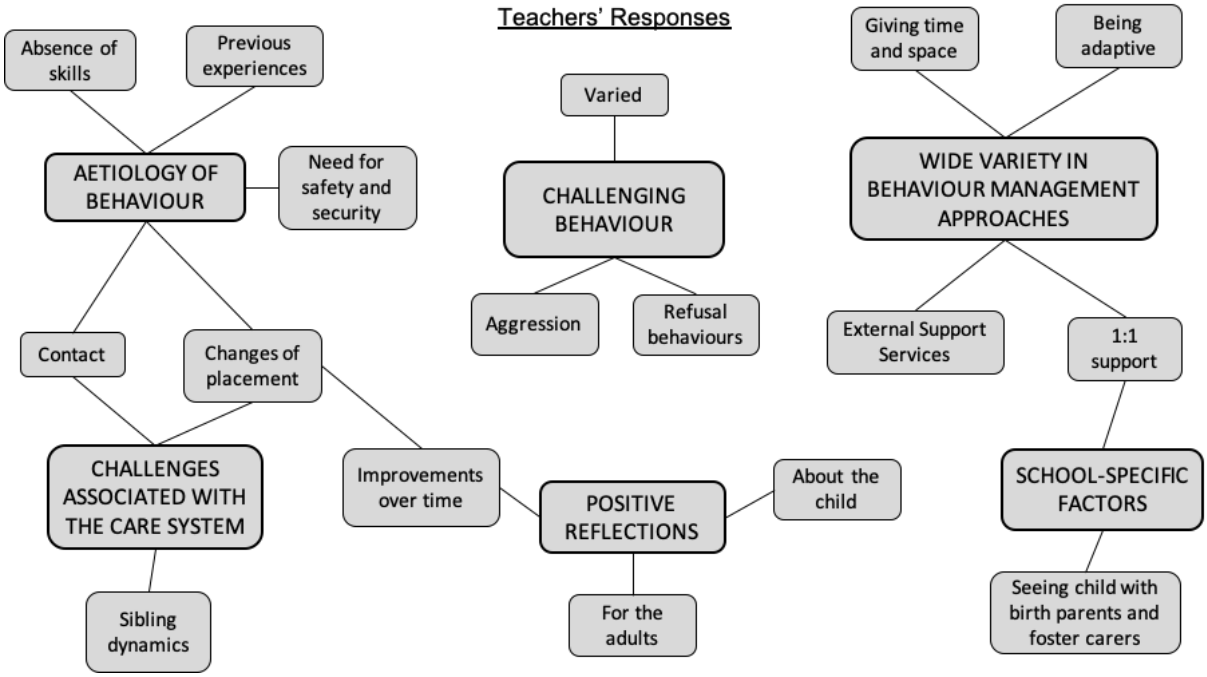

Figure 7. Final thematic map of teachers' responses.

2.3.2.2.2 Challenging Behaviour

The challenging behaviour described by teachers was highly varied and ranged from defiance and disruption to difficulties with concentration; as one teacher put it: "We have a lot of looked after children in our school and they're like a rainbow of emotions" (Participant T4). Two behaviours that were more prevalent in the data were *aggression* and *refusal behaviours*. Aggressive behaviours included those that were both physical and verbal – often this was described as directed towards peers or siblings rather than teachers. For example: "yeah, very high-level attacking others, going to physical attack other children, verbal aggression, use of extreme language, swearing, the most extreme forms of swearing you can imagine" (Participant T2).

Additionally, *refusal behaviours*, both passively refusing to follow instructions and more active shows of defiance, were also seen as challenging, particularly in the context of the classroom.

> So behaviours start with sort of the low-level stuff, he gets, he is very much a shouting out sort of child, wants a lot of attention, so that is, he will come and show you his work

> all of the time, he wants you to take pride in his work, he wants to show off his, the things that he has done. He wants you to notice him, whether it is positive or negative, so you get the calling out you get the poking and prodding of other children so that he is, he is focused upon by not only myself or by others, you get wandering around the classroom a lot of the time. He likes to have a purpose, he's quite fidgety, moving up, he has been known to have outbursts, so quite emotional outbursts, of both directed towards himself and his work, so that becomes, again scrunching up his work, and it'll just get chucked, or he'll take himself off in a temper tantrum, or he'll he will or he has lashed out in children in rage, and that has got himself into trouble. [...] but yeah he has been known to be quite disruptive from very low level stuff to very high level. (Participant T7)

2.3.2.2.3 Explanations for Challenging Behaviour

Explanations given by teachers for the challenging behaviour they experienced fell within the *Aetiology of Behaviour* theme. These will be explored in detail below.

Aetiology of Behaviour. Due to the nature of the interview questions, there was a lot of conversation around the reasons for the challenging behaviour, the detail of which can be seen in the five subthemes. An observation in some of the teachers transcripts was that when teachers were initially asked for an explanation of a child's behaviour they would explain the child's background: "*Interviewer*: when those behaviours were occurring, what was the understanding I guess, either from yourself or from the school as to why... *Participant*: Ok so a little bit of background family information was that..." (Participant T1).

Absence of Skills. This subtheme expresses teachers' thoughts on how the children lacked certain skills to help them manage their behaviour, such as emotion regulation or social interaction skills.

> I think that she, she wants to heal the bond, she doesn't know how to do it, and rather than her feel sad in herself, I think a part of her wants to make other people feel sad as well. (Participant T4)

Sometimes teachers highlighted that they felt the absence of skills was because children had not been taught the skills by their parents.

> He didn't have the language to talk about why he felt angry or why he felt sad about things and so it became erm, and then that's when you get the blame side of things, he couldn't communicate things and it'd become a, I feel angry why because I can't tie my shoe laces, well that's not something that's happened before, there's clearly something else that's bothering you but you just don't know why yet, and so that was very interesting. (Participant T7)

Previous experiences. The child's previous experiences were often considered a cause of the challenging behaviour. This encapsulated a range of factors, including behaviours that the child had learnt from their parents and the impact of the trauma they had been exposed to: "...and a lot of this has come from the home that she's come from and where she's imitating that behaviour" (Participant T4).

> I think I understand as well within the foster home, there were instances of items that had gone missing and they were found in her room, kind of thing so was hoarding that, I've got these things I don't want them to be taken away again if that makes sense. (Participant T3)

Need for safety and security. This subtheme is related to *previous experiences* but is different in that this explanation captures reasons that related more to active motivations for behaviour, i.e., that the child had behaved in certain ways because of a need for safety and security. For example: "he was testing our boundaries and seeing where we were. He needed to know he was in a safe and secure environment" (Participant T2), and "because he needed that attachment with us, he needed that security" (Participant T1).

Contact. This subtheme refers to how contact with their parents was associated with increases in challenging behaviour. This was commented on happening in anticipation of and also as a result of contact. Challenges around contact being cancelled were also highlighted: "like because he goes to contact like once or twice a week, sometimes if they've let him down, if he goes out of routine then he gets really upset" (Participant T5). This subtheme was also related to the main theme of *challenges associated with the care system*.

> And then mum, I think she went to rehab for quite a while, like over 3 months I think, and then came back and she was able to have like visiting and things and that would really, really disrupt the children would upset them, they didn't understand, the behaviour would deteriorate from before the visit and then afterwards it would take them a little while to settle down. (Participant T8)

Changes of Placement. As with the subtheme *contact*, this subtheme was also linked to *challenges associated with the care system*. Teachers mentioned children moving placements, describing the impact that this would have on the children's behaviour. Sometimes it was noted that a change of placement away from their parents to live with foster carers was associated with an improvement in behaviour. However, they also described how children's behaviour would often worsen in anticipation of a change of placement or immediately after a placement change:

> I will say that he, we did notice the last half term – the summer half term – his anxiety went through the roof in the anticipation of the summer holidays, and he was almost back to square one by the last day of the summer holidays because he knew that he wasn't going into school, so we found that very tricky with him, very sad really, because he knew that he was going back to, he was going back to his parent at that time, but he didn't know when or why, the trauma of all that, definitely shifted it. So, I thought that was very interesting in terms of him processing stuff. (Participant T7)

2.3.2.3 Similarities and Differences between Foster Carers and Teachers

The purpose of this section is to explore the similarities and differences in the challenging behaviour discussed and the explanations given by teachers and foster carers for children's challenging behaviour .

2.3.2.3.1 Challenging behaviour

Both participant groups discussed a wide range of challenging behaviours; however, foster carers also experienced an intensity associated with the challenging behaviour which teachers did not. *Aggression* was a subtheme that came through for both participant groups, whilst for teachers, *refusal behaviours* were also particularly prevalent. For foster carers,

alongside *aggression*, they also described *Jekyll and Hyde* behaviours, which perhaps links to the intensity that foster carers noted.

2.3.2.3.2 Explanations for challenging behaviour

One common theme between the two participant groups was the reference to the child's *previous experiences* as a possible explanation, specifically the idea that the child had an on-going *need for safety and security* or had been emotionally impacted by their experiences. However, foster carers tended to discuss the impact of previous experiences in more detail, referring to the fact that some behaviours were the result of *triggers* or were *survival behaviours*.

Aside from this, the subthemes presented by the two participant groups differ. The additional subthemes present in the teachers' data referred to temporally present factors as explanations for challenging behaviour, such as *contact* and *changes of placement,* and an *absence of skills* on the part of the child. In contrast, the additional subthemes present in the foster carers data were more philosophical understandings of behaviour. Namely that *behaviour was not chosen*, or that there was always a reason for the behaviour, even if foster carers were not always sure what this was.

2.4 Discussion

This paper used a mixed methods approach to analyse data collected from semi-structured interviews with ten foster carers and eight teachers. Participants were asked to discuss the challenging behaviour they have experienced from primary-school-aged children, their explanations for this behaviour and how they respond to and manage it. Interview transcripts were coded for causal attributions using binary distinctions based on Weiner's three causal dimensions and ITA was used to provide contextual and in-depth information of the participants' lived experiences of challenging behaviour and their explanations of it.

In the following sections, the reflections of foster carers and teachers are discussed in relation to the challenging behaviour they described, their causal attributions and wider explanations for challenging behaviour, and their consideration of mitigating circumstances. Similarities and differences between foster carers and teachers will be highlighted.

2.4.1 Challenging Behaviour

Both participant groups described a wide variety of challenging behaviours; there was an intensity to the behavioural descriptions provided by foster carers that was not seen with teachers. *Aggression* emerged as a theme for both foster carers and teachers. Foster carers also described behaviour to be like *Jekyll and Hyde* and that behaviour could change quickly and dramatically, whilst teachers described *refusal behaviours* as a prevalent challenge for them.

The notion that foster carers are exposed to a variety of behaviours is consistent with previous research. Lowe and Pithouse (2004) found that foster carers experienced, on average, 21 different behaviours in the last month from a list of 48 possible behaviour (including: stubbornness, attention-seeking, telling lies, confrontation, aggression, and sexually inappropriate behaviours).

Previous research using a grounded theory approach with teachers identified attention-seeking and withdrawn behaviours as prevalent challenging behaviours (Alix, 2015). However, these findings were not replicated in the present research. This disparity in findings may be due to a difference in the amount of experience between the participants in Alix's study who were trainee teachers, and the participants in the present research who had an average of 13 years' experience of working in schools.

2.4.2 Causal Attributions and Explanations for Challenging Behaviour

Attributional statements regarding challenging behaviour were coded using the LACS method along Weiner's (1995) three causal attributional dimensions: internal/external, stable/unstable, and controllable/uncontrollable. Where appropriate, the findings from the LACS analysis will be placed in the contextual findings identified through the ITA to support a deeper understanding. Similarities and differences between the findings from the two analysis approaches will be considered.

Findings from the LACS analysis revealed that only foster carers made attributions where the agent (the person identified by the participant as causing the challenging behaviour) was considered to be someone other than the child, but this only occurred in 5% of all attributions. This suggests that foster carers and teachers do not see themselves as the agent, or cause, of the child's behaviour. In contrast, research with parents of children with DD (Jacobs et al., 2017) and ID (Jacobs et al., 2016) – which used quantitative and qualitative methods respectively – reported that parents viewed themselves as responsible for, and in control of, the children's problematic behaviours.

Still, the findings from the ITA indicate that teachers and, to a greater extent, foster carers, perceive themselves as having a role in preventing the children's challenging behaviour. Specifically, foster carers identified the importance of *pre-empting issues* (the child's behaviour) and *teaching [children] new skills* to support them with regulating their emotions and, by extension, their behaviour. Both groups also talked about the importance of *being adaptive* to the child's needs, which for teachers also meant adjusting their expectations of the child.

Foster carers' and teachers' attributions (where children were identified as the agent) were more often to internal, stable and uncontrollable causes; however foster carers made more stable attributions and teachers made more controllable attributions.

Participants attributed challenging behaviour to internal causes for approximately 60% of statements. Other research has demonstrated that parents tend to make internal attributions about their children with ADHD (Chen et al., 2008; Johnston et al., 2009), ID (Alevriadou & Pavlidou, 2016) and autism (Hartley et al., 2013). Additionally, teachers of children with ID have also been found to make more internal than external attributions (Rae et al., 2011).

In line with making internal attributions, are the findings from the ITA that both participant groups identified *previous experiences* (of the child) as an explanation for behaviour. Whilst previous experiences, when they occurred, may have resulted from external factors (i.e., abuse/neglect from parents), participants now seemed to view them as part of the child and discussed previous experiences as internal factors:

> My impression was he was downed a lot as a child and therefore didn't think he was up to any good. He would say y'know "I'm not any good, I can't do anything". Really really quick "I can't do it" would come really quickly. (Participant F8)

Other internal attributions were reflected in foster carers' perceptions that behaviour reflected *survival behaviours* and teachers' perceptions of a *need for safety and security*. Teachers also discussed an *absence of skills*. Through semi-structured interviews, McKillop (2015) also reported that teachers identified an absence of social skills as a cause of challenging behaviour from looked after children. It is interesting that in the present study teachers did not consider the teaching of new behavioural management skills when they highlighted that children lacked these.

Attributions to external causes were reflected in the theme of *triggers* discussed by foster carers and the two themes *contact* and *changes of placement* discussed by teachers, both of which were also considered *challenges associated with the care system*. Interestingly, Taylor et al. (2008) using a grounded theory approach, found that foster carers identified delays in accessing,

and inadequacy of, resources, as well as conflicts in the system as causes for challenging behaviour. Moreover, in McKillop's (2015) study, teachers highlighted the impact of placement changes on children, however these were discussed in terms of providing a barrier to education and not in terms of challenging behaviour.

Both participant groups attributed challenging behaviour predominantly to stable causes (> 80%). Parents of children with ADHD (Chen et al., 2008; Johnston et al., 2009), ID (Alevriadou & Pavlidou, 2016) and autism (Hartley et al., 2013) have also been found to be more likely to attribute challenging behaviour to stable causes. This is perhaps to be expected given the notion of correspondence bias, the tendency to over-attribute behaviours in others to stable personality traits (Hogg & Vaughan, 2011). It is not entirely clear whether participants viewed the wider explanations generated as part of the ITA as stable or unstable. However, *previous experiences* and associated factors (*survival behaviours*, *triggers*, *a need for safety and security*) could be considered to be stable factors given that participants view the effects to have persisted for a period of time. Interestingly, despite the high level of stability attributed to the causes of the behaviour, both participant groups talked about seeing *improvements over time* in the children's behaviour. In this case, demonstrating that stable causes do not necessarily equate to stable patterns of behaviour.

Both participant groups made more attributions to uncontrollable than controllable causes. Of note is that this is the only attributional dimension measured as part of this research where the findings contrast with previous research, which instead finds that parents tend to make controllable attributions (children with: ADHD, Chen et al., 2008; Johnston et al., 2009; ID, Alevriadou & Pavlidou, 2016; and autism, Hartley et al., 2013). Controllability attributions appear to be influenced by a number of factors, all of which could be possible explanations for this difference in findings. These include: the type of behaviours shown (Armstrong & Dagnan, 2011), the degree of challenging behaviour shown (Johnston et al., 2009), and whether or not the child has SEN or is typically developing (Johnston et al., 2009). Each of these considerations would warrant further research before they could be conclusively credited with explaining this difference in the research findings.

Whilst the majority of both groups' attributions were uncontrollable, teachers did appear to make more controllable attributions than foster carers (41.4% versus 29.7%, respectively), however this difference was not analysed for statistical significance. One reason for attributing behaviour as controllable by the child could be that it functions as a self-serving bias, absolving the adult of responsibility and decreasing feelings of failure (Hogg & Vaughan, 2011). It is possible that controllable attributions were less prevalent for foster carers than teachers due to foster

carers' relatively high rates of self-efficacy regarding managing challenging behaviour (Morgan & Baron, 2011), and therefore may not need to employ self-serving biases to the same extent.

In summary, this research has found that teachers and foster carers are more likely to make attributions to internal, stable and uncontrollable causes. These findings differ compared to previous research only in that foster carers and teachers were found to make more uncontrollable attributions, whilst parents of children with SEN were found to make more controllable attributions.

2.4.3 Explanations as Mitigating Circumstances?

In order for an individual to judge another as responsible for their behaviour, Weiner (1995) proposed that first, internal and controllable attributions must be made. In the present study, 27.7% (foster carers) and 36.2% (teachers) of attributional statements were both internal and controllable. This suggests that only in a quarter to a third of incidents of challenging behaviour the child could be deemed responsible.

Even when internal and controllable attributions are made, the child may not be judged as responsible if the adult considers there to be mitigating circumstances; Figure 8 provides a visual representation of the process involved in making a judgement of responsibility (JoR).

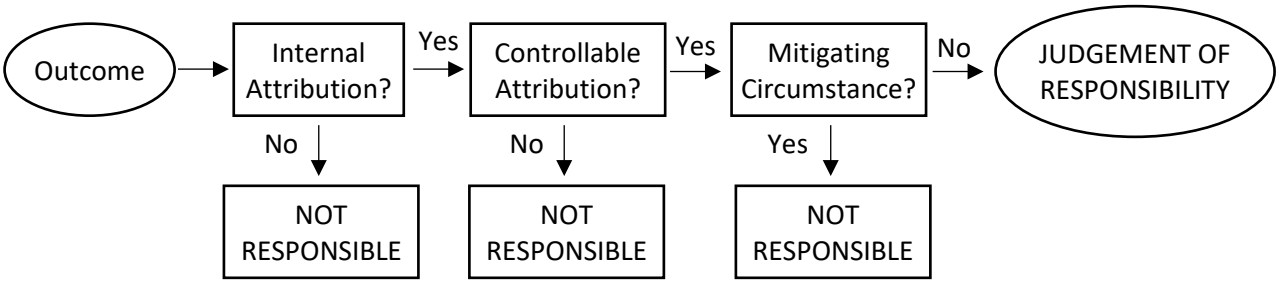

Figure 8. Visual representation of Weiner's (1995) theoretical proposal for the judgement of responsibility process. Adapted from "Judgments of responsibility: A foundation for a theory of social conduct." By B. Weiner, 1995, p. 12. Copyright 1995 by The Guildford Press.

One mitigating circumstance suggested by Weiner (1995) is a child's age. Foster carers, but not teachers, did mention children's age as a factor when discussing challenging behaviour and would subsequently suggest that children's age absolved them of responsibility: "Oh it wouldn't be him, he's 7. It won't be him" (Participant F2).

Weiner (1995) also considered learning needs and circumstances which render an individual unable to comprehend the 'wrongness' of their actions as mitigating circumstances.

The high proportion of looked after children reported to access a level of SEN provision (Sebba et al., 2015) suggests that SEN may be a relevant additional mitigating circumstance. In this research, only six children were identified by participants as having SEN, but where they were, this was often presented as a possible explanation for the child's behaviour by foster carers: "he's now six and he's been diagnosed with ASD. So, his behaviour is more challenging because of his condition" (Participant F10); and teachers:

> He would often find that hard if he perceived that there was a wrongdoing or an injustice. So very much ASD traits, I think there was a diagnosis towards the end, but we didn't have that at the start of the process. (Participant T2)

These findings build on previous research that SEN can influence the attributional process (Gifford & Knott, 2016; Jacobs, et al., 2017; Johnston et al., 2009) and provide support for the notion that SEN is considered a mitigating circumstance within this population (see sections 1.3.3.1 and 1.4.1.1 for further commentary on the influence of SEN on attributions).

The final consideration is whether foster carers or teachers provided any indication that factors other than age and SEN were considered as mitigating circumstances. Weiner's (1995) theory suggests that if a child is judged responsible, the adult would experience feelings of blame or anger toward the child and be more likely to use punishment (Armstrong & Dagnan, 2011; Butcher & Niec, 2017; Jacobs, et al., 2017), whereas if the child is not judged as responsible, the adult is more likely to feel sympathy and provide support (Armstrong & Dagnan, 2011; Jacobs et al., 2016). One way, therefore, to assess whether foster carers and teachers consider mitigating circumstances (and thereby reducing the incidences with which children are judged responsible) is to look for signs of participants feeling blame or sympathy and utilising either punitive or supportive strategies.

In the present research there was no direct indication that punishment was used as a behaviour management strategy for either participant group. Instead strategies were generally aimed at supporting the child. One exception to this was that encapsulated in the subtheme *1:1 support* was the view that this strategy was sometimes needed in order to prevent permanent exclusion, which would be a form of punishment: "a 1:1, for the whole year we paid for because he was going to get excluded otherwise and long term that wasn't going to help him at all" (Participant T1). So, whilst strategies were aimed at trying to avoid use of punishment, the use of punishment (i.e., permanent exclusion) was still discussed as a possibility by teachers.

Additionally, as the interviewer, I did not feel that either participant group expressed blame or anger towards the children they were discussing. Both groups did, however, seem sympathetic to the children's experiences. Teachers seemed to feel this sympathy from more of a distance compared to foster carers who expressed a deeper level of sympathy. This may stem from the fact that foster carers were sometimes the first people to care for the child after their parents, as reflected in the '*then' descriptions* theme. Foster carers also share their homes with the children and are more likely to experience more of a personal connection than teachers: "When he left, he could get cuddles and y'know he actually did say "I love you" once. And yeah, we just loved him, put a lot of love and time" (Participant F8). Indeed, some emotional distance may be necessary for the role of the teacher, as evidenced in the following quote:

> He built a very, his relationship with me was very personal, but of course I had to keep, it had to be a very professional thing of, I can't do this all the time for you for [child's name], you are you are a student and that's the way it has to be, whereas he would have, he longed in my impression of him to have a much more personal relationship with myself. (Participant T7)

In summary, foster carers and teachers only made attributions that could lead to a JoR in 27.7% and 36.2% of cases, respectively. Additionally, findings suggest that foster carers and teachers consider a range of mitigating circumstances – including age and SEN – when understanding the challenging behaviour they encounter.

2.4.4 Strengths and Limitations

The present study has a number of strengths. Firstly, to the author's knowledge, there is currently no pre-existing literature that explores causal attributions for both foster carers and teachers to enable a comparison between the two. The mixed method approach of the current study combined the identification of causal attributions along Weiner's three dimensions with the richer context provided by the ITA. This allowed for specific findings relating to attributional dimensions to be more readily compared to previous research, whilst still capturing the broader inter-relating and complex factors that are at play in regard to challenging behaviour of looked after children.

Secondly, the semi-structured interview drew upon the participants' lived experiences rather than vignettes, as is frequently used in previous research (Bradshaw, 2001; Park et al.,

2018). Whilst vignettes can be a helpful prompt for thinking about challenging behaviour, Jacobs et al. (2016) highlights that this approach is not always appropriate, as parents of children with ID did not feel that all the prompts reflected their experiences. Drawing on participants' own experiences is therefore seen as a strength, increasing the ecological validity of the findings.

Thirdly, the present study employed reflexivity throughout; an important component of good qualitative research (Blair, 2015; Cohen & Crabtree, 2008). Throughout the research process a journal was kept which enabled the lead author to be more consciously aware of the thoughts and feelings that were occurring in relation to the thesis process. Importantly, this allowed the author to discuss these reflections within supervision, further considering how these thoughts and feelings might impact on the research progress. Additionally, it supported the acknowledgement of pre-existing biases. See Appendix E for reflective comments.

Fourthly, ITA used an analysis approach in which codes from each transcript were accommodated and assimilated one at a time, in order to assess for data saturation. For both participant groups each additional transcript resulted in changes to the thematic map, suggesting a very rich data set. The development of the thematic maps can be seen in Appendices O and P. Following the creation of the 'final' thematic map for each participant group, there were several more revisions to ensure that the themes that were created were indeed themes and not in fact domain-summaries (Braun & Clarke, 2019); and that the maps had good face validity, as identified through the use of peer supervision.

An associated limitation to the point above, is that the changing nature of the themes – including with the introduction of the final transcript – suggests that data saturation had not necessarily been reached. This is particularly true for the teacher group, perhaps to be expected due to lower participant numbers. In addition, I was unable to carry out member-checking of the themes with the participants which could have served as an additional check on the validity and reliability of the ITA findings.

Another important limitation concerns the coding of attributional statements using the LACS. Whilst the lead author, who conducted the analysis, made use of the available instructional and training material and met the reliability criterion set out as part of the practice materials (Munton et al., 1999), the authors state that "it will also take time and possibly training before the newcomer feels entirely confident with the method and able to achieve adequate levels of reliability" (p. 65). Unfortunately, time constraints related to this being a trainee thesis did not permit for additional training to take place. Similarly, it was not possible to carry out an inter-rater reliability check on the LACS coding. In addition, inferring other people's thoughts from their speech for coding of attributions is arguably subjective in nature.

Other limitations of this research include the small sample size – although this did allow for a rich exploration of data – and difficulties with generalisability. Additionally, the semi-structured interview schedule did not include questions which explicitly asked participants about their consideration of mitigating circumstances and their views on the children's responsibility for their behaviour. Doing so could have served to better inform the discussion in this paper. Finally, due to the nature of the content being discussed in the interviews and the fact that they took place face-to-face it is likely that social desirability bias played a part in the answers provided by the participants, potentially skewing the results to present a more positive picture of how participants attribute and explain the challenging behaviour they encounter.

2.4.5 Implications for Practice

There are a number of practical implications that stem from this research. Firstly, several findings from the present study suggested that teachers would benefit from additional training. For example, teachers identified few behaviour management approaches that indicated they felt a sense of responsibility or control for children's behaviour. For example, *1:1 support* takes responsibility away from the teacher and places it with a teaching assistant. Similarly, teachers talked about the use of *external support services* suggesting that they did not necessarily feel equipped to manage the behaviour themselves. In contrast, foster carers identified *pre-empting issues* as a key behaviour management strategy. Notably, whilst teachers identified children as having an *absence of skills,* foster carers talked about *teaching new skills* as part of behaviour management. This may reflect a higher level of self-efficacy that foster carers' have in managing children's behaviour, as has been seen in previous research (Morgan & Baron, 2011), and may reflect the additional training they receive (Whenan, Oxlad, & Lushington, 2009):

> Training within foster care is brilliant really, for our local authority the training programme is extensive, really, really good, and if it's not on the programme you can request, say look I've got this problem, is there somewhere you can send me that can help me with this? And they're very good at trying to find things to help people keep their placements together really. (Participant F6)

Importantly, it has previously been identified that teachers do not receive sufficient training for supporting looked after children (Geddes, 2006; Underdown, 2016). Training should be for the whole school to ensure consistency in approaches between staff (Bomber, 2008) and

should aim to promote staff's self-efficacy in relation to support looked after children. Training should highlight the prevalence of SEN amongst looked after children and educate about the complex interplay between SEN, possible attachment and trauma related difficulties, and on-going challenges that children can experience as a result of being looked after.

Secondly, teachers identified *contact* and *changes of placement* as explanations for children's challenging behaviour, consistent with previous research (McKillop, 2015; Triseliotis, 2010). It seems important to highlight that during these times in particular an adaptive and sympathetic approach might be needed. Notably, both teachers and foster carers identified the importance of *being adaptive*.

Thirdly, foster carers and, to a greater extent, teachers referred to *contact*, the relationships with the children's parents, and children moving from – or back to live with – their parents. It is important that good relationships continue to exist between all parties involved (parents, foster carers, teachers). One potential risk to this is that foster carers and teachers identify *previous experiences* (i.e. when children were living with their parents) as an explanation for on-going challenging behaviour. It is important that foster carers and teachers take steps to ensure that this potential bias does not negatively affect their working relationship with birth parents.

Similarly, foster carers reported experiencing a level of intensity in relation to the challenging behaviour which was not reported by teachers. It is important for teachers to be mindful of this and not assume that the behaviour displayed at school is the same as at home. This will serve to support on-going home-school relationships, something which has previously been highlighted by foster carers as a challenge (Comfort, 2007).

2.4.6 Future Research

One unanswered question raised by this paper is the reason why foster carers and teachers make majority uncontrollable attributions compared to parents of children with SEN who make controllable attributions. Given the relevance of self-serving biases, future research could explore whether factors such as knowledge and self-efficacy relate to the attributions made and could serve to explain this key difference.

While the present study considered teachers' and foster carers' JoR for children's challenging behaviour inferred from the results, future research should assess JoR directly, together with measures of causal attributions, perhaps using a quantitative approach as in Jacobs et al. (2017) and Park et al. (2018). Using an experimental design (e.g., Gifford & Knott, 2016),

where information about children's background is experimentally manipulated (e.g. (1) no commentary on their looked-after status; (2) stating that the child is looked after; (3) stating that the child is looked after and providing background information on the child's previous experiences) and attributions are assessed in response to the same behaviours described in vignettes, would contribute to a clearer understanding of the role of 'past experience' in terms of teachers' and foster carers' consideration of mitigating circumstances and JoR.

It was not the aim of the present research to include pairs of foster carers and teachers commenting on the same child. However, including this methodology in future research would allow for a commentary on the similarities and differences in experiences between foster carers and teachers regarding the same child. This would contribute to an understanding of why there are certain differences in the themes that arose from the foster carer and teacher data.

Finally, future research should honour the child's voice. The importance of this is highlighted in reports such as the TACT document (Ortiz & TACT, 2019) in which young people demonstrated that they felt a range of other terms would be better descriptors of challenging behaviour, all of which reflected psychological processes perhaps explaining the behaviour that was shown.

2.5 Conclusion

This paper explored the causal attributions and explanations given by foster carers and teachers regarding the challenging behaviour they experienced from primary-school-aged children. A mixed method design utilised semi-structured interviews which were initially thematically analysed using an inductive approach and later coded for causal attributions using the LACS method (Munton et al., 1999).

Both foster carers and teachers reported experiencing a variety of challenging behaviours, with aggression a theme for both participant groups. Analyses revealed that the majority of attributions made by teachers and foster carers regarding the causes of children's behaviour were internal, stable and uncontrollable. This differs from previous research only in that parents of children with SEN make more controllable attributions. Additionally, whilst the majority of attributions were to uncontrollable causes, teachers made controllable attributions more frequently than foster carers.

Findings from the LACS analysis also indicate that teachers and foster carers do not view themselves as the cause of the children's behaviour, however, findings from the ITA suggest that they do view themselves as having a responsibility for the children's behaviour. The accounts by

teachers and foster carers suggest that they view children's age, SEN, previous experiences and on-going care-related contexts as mitigating circumstances reducing JoR.

Implications for practice include teacher training with a view to increasing self-efficacy regarding management of challenging behaviour from looked after children. Additionally, increasing awareness for teachers and foster carers of the impact of changes of placement and contact; and the importance of foster carers and teachers maintaining a conscious awareness of their perceptions in order to support the maintenance of effective relationships between teachers, foster carers and birth parents.

Future research would benefit from exploring factors related to the dimension of controllability, explicitly measuring JoR, and exploring the child's voice and their perceptions of, and attributions, for their challenging behaviour.

Appendix A – PRISMA Flow Chart

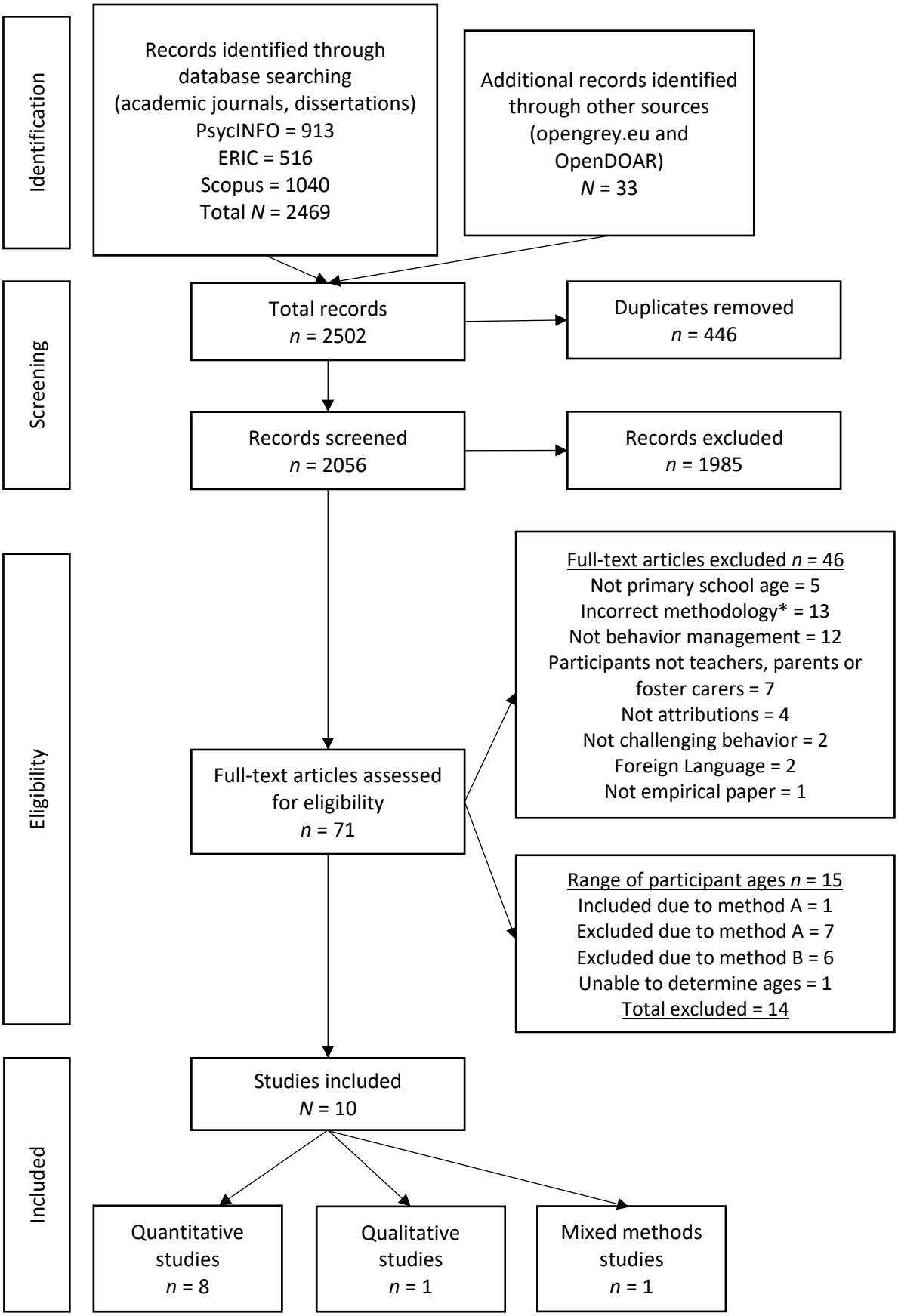

Figure A1. PRISMA flow diagram. *incorrect methodology refers to papers whose methodology did not allow for drawing conclusions as to the relationship between attributions and behaviour management.

Appendix B – Inclusion/Exclusion Determination for Studies with a Range of Target Child Ages.

Of the 71 papers that were identified for full-text eligibility assessment, 15 included target children whose range of ages spanned both the inclusion and exclusion criteria (i.e., ages 3-18 years old which includes pre-school, primary school and secondary school aged pupils, and not only primary-school-aged pupils as specified by the inclusion criteria). Therefore, it was not immediately clear whether these papers should be included or not. In order to ensure that all relevant papers were taken forward as part of the literature review two further criteria were determined. These were:

A. The average age range of the participants should fall within the inclusion criteria (e.g., elementary or primary-school-age). This was determined by assessing the mean age ±1SD.
B. Where descriptive statistics are not available, 68% of the participants should be within elementary or primary-school-age. This is a less accurate measure and therefore Criteria A was utilised where the data allowed.

This resulted in one paper being taken forward and 14 rejected. See table B1 for details of how the criteria were applied to the each of these 15 studies.

Table B1.

Papers Whose Focus Children's Ages Fall Within Both the Inclusion and Exclusion Criteria; Method for Determining Whether Paper Should Be Included and Final Decision

Author	Range/initial information	Method for deciding	Decision
Armstrong and Dagnan (2011)	3-18 years old	A) M (SD) = 10.7 (3.2); ±1SD = 7.5 - 13.9 years old	Excluded
Butcher and Niec (2017)	33-71 months	A) M (SD) = 54.58 months (12.16 months); ±1SD = 42.42-66.64 months / 3.5-5.5 years old	Excluded
Chavira et al. (2000)	3-19 years old	A) M (SD) = 11.5 (4.5); ±1SD = 7-16 years old	Excluded
Collins (1994)	4-6 years old	B) assumption made that 50% of children aged 4-5 years and 50% aged 5-6 years	Excluded
Edwards (2004)	atleast one child <18 years old	unable to determine specific details regarding age of children	Excluded

Gray (2019)	elementary and secondary teachers	B) elementary teachers n (%) = 18 (33%), secondary teachers n (%) = 37 (77%)	Excluded
Hartley et al. (2013)	3-10 years old	A) M (SD) = 11.70 (5); ±1SD = 6.7 - 16.7 years old	Excluded
Kulinna (2007)	Kindergarten - Grade 12	B) elementary teachers n (%) = 203 (53%), secondary teachers n(%) = 92 (47%)	Excluded
Leung and Slep (2006)	2.9-8 years	A) M (SD) = 5.45 (1.46); ±1SD = 3.99 - 6.91 years old	Excluded
Maniadaki, Sonuga-Barke, Kakouros, amd Karaba (2006)	4-6 years old	B) assumption made that 50% of children aged 4-5 years and 50% aged 5-6 years	Excluded
Scott amd Dembo (1993)	3-4 years old AND 6.5-8 years old	B) equal split of participants between age groups	Excluded
Simms (2015)	Kindergarten - Grade 12	B) elementary teachers n (%) = 29 (35%), secondary teachers n(%) = 55 (65%)	Excluded
Smith, Adelman, Nelson, and Taylor (1988)	9-19 years old	A) M (SD) = 14.4 (2.3); ±1SD = 12.1 - 16.7 years old	Excluded
Snarr (2006)	4-8 years old	A) M (SD) = 6.2 (1.4); ±1SD = 4.8 - 7.6 years old	Included
Svenson (2005)	3 years 4 months - 5 years 6 months	A) M (SD) = 4.40 (0.71); ±1SD = 3.7 - 5.1 years old	Excluded

Appendix C - Quality Assessment Findings

Table C1.

CASP Cohort Checklist for Quantitative Papers (Critical Skills Appraisal Programme, 2018a)

Paper	Q1. Validity of Aims	Q2. Participant Recruitment	Q3. Valid Exposure Measures	Q4. Valid Outcome Measures	Q5a. Confounding Factors Identified?	Q5b. Confounds Taken into Account?	Q6a. Follow up Complete Enough?	Q6b. Follow up Long Enough?	Q8. How precise are the results?	Q9. Do you believe the results?	Q10. Generalisable?	% Yes responses
Bradshaw (2001)	Yes	Yes	N/A	Yes	No	No	N/A	N/A	Unable to determine	Yes	Unable to determine	50
Geller and Johnston (1995)	Yes	Yes	Yes	Unable to determine	No	No	N/A	N/A	No	Yes	Unable to determine	44
Jacobs et al. (2017)	Yes	Yes	No	Yes	No	Unable to determine	N/A	N/A	Unable to determine	Yes	Unable to determine	44
Johnston et al. (2009)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	100
Nix et al. (1999)	Yes	Yes	N/A	Yes	Yes	Unable to determine	Yes	Yes	No	Yes	Unable to determine	70
Park et al. (2018)	Yes	Yes	N/A	Yes	Yes	Yes	N/A	N/A	Yes	Yes	Unable to determine	88

Snarr (2006)	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	Yes	Yes	Unable to determine	89
Snyder et al. (2005)	Yes	Yes	N/A	Yes	No	No	Yes	Yes	Yes	Yes	Yes	80

Questions 7, 11 and 12 were removed from this quality assessment as they did not contribute to the current researcher's knowledge of the quality of the research.

Table C2.

CASP Checklist for Qualitative Papers (Critical Skills Appraisal Programme, 2018b; Jacobs et al., 2016)

1. Aims	**Q2. Is qualitative methodology appropriate?**	**Q3. Research design appropriate?**	**Q4. Recruitment strategy appropriate?**	**Q5. Data collection addresses research issues?**	**Q6. Consideration of relationship between researcher and participants?**	**Q7. Ethical issues considered?**	**Q8. Data analysis sufficiently rigorous?**	**Q9. Clear statement of findings?**	**Q10. Is the research valuable?**	**% Yes responses**
Yes	Yes	Yes	Unable to determine	Unable to determine	No	Yes	Unable to determine	Yes	Yes	60%

Table C3.

Mixed Methods Appraisal Tool, version 2018 (Hong et al., 2018; Petrenko et al., 2016)

Q1.1. Qualitative approach appropriate?	Q1.2 Data collection methods adequate?	Q1.3 Findings adequately derived from data?	Q1.4 Results supported by data?	Q1.5 Coherence between sources, collection, analysis and interpretation?	Q3.1 Participants representative?	Q3.2 Measurements appropriate?	Q3.3 Complete outcome data?	Q3.4 Confounders accounted for?	Q3.5 Intervention/ exposure occurred as intended?	Q5.1 Adequate rationale for mixed methods design?	Q5.2 Study components integrated to answer research	Q4.3 Outputs of integration adequately interpreted?	Q5.4 Divergences and inconsistencies adequately addressed?	Q5.5 Do different components adhere to quality criteria?	% Yes responses
Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	Yes	Yes	Yes	Yes	Yes	100%

Appendix D – Data Extraction Table

Table D1.

Data Extraction Table for Final Ten Papers Included in Literature Review.

Authors and Country	Participant Characteristics	Study Aims, Methods, Design and Measures			Findings and Conclusions
1. Bradshaw (2001) U.S.A.,	**Adults:** ***N*** **=** 73 (parents) **Gender:** 81% female **Age:** M (SD) = 34 (6.6) years **Ethnicity:** African American = 70%, Caucasian = 26%, Hispanic = 4% **SES:** M = 2.96 (Hollingshead, 1975) **Children** **Gender:** not given **Age:** 5-8 years **SEN:** none	**Study Aim** Is the relationship between attributions and behaviour management mediated by emotional stress. **Study Design** Quantitative, cross sectional, regression.			• The possible range of attribution scores was 18-162; the Mean attribution score was 40.47 (range: 19-85). Attributions were relatively positive, indicating that parents viewed the behaviour as more accidental than intentional. • Negative (intentional) attributions were significantly related to demanding/restrictive parenting. • Negative attributions accounted for approximately 9% of the variation in parent behaviour.
		Attribution Measures and Variables **Measure(s):** Cognitive Vignettes (developed by Plotkin, 1983 and Azar, 1991) and single item likert scale.	**Behaviour Management Measures and Variables** **Measure(s):** coded observations of parent-child interactions (Haskett et al., 1995) **Variable(s):** Demanding/ Restrictive Parenting Behaviour	**Other Measures** **Measure(s):** Parent emotional stress: Symptom Checklist 90 Revised (Derogatis', 1983). **Variable(s):** Depression, Hostility.	

<table>
<tr><th>Authors and Country</th><th>Participant Characteristics</th><th colspan="3">Study Aims, Methods, Design and Measures</th><th>Findings and Conclusions</th></tr>
<tr><td></td><td></td><td colspan="3">Variable(s): Attribution (scale from intentional to accidental)</td><td>• Hostility scale was significantly positively correlated with attribution scale.</td></tr>
<tr><td>2.
Geller and Johnston (1995)

Canada</td><td><u>Adults:</u>
N = 82 (mothers)
Gender: 100% female
Age: M = 35.83 years
Ethnicity: not given
SES: M = 2.34 (Hollingshead, 1975)

<u>Children</u>
Gender: 52% female
Age: M = 8.04 years
SEN: none</td><td colspan="3"><u>Study Aim</u>
Explore the relationship between maternal depressed mood, attributions and behaviour management.

<u>Study Design</u>
Quantitative, cross-sectional, correlational

<u>Attribution Measures and Variables</u>
Measure(s): Novel vignettes and associated likert scales.

Variable(s): globality, stability, internality and controllability, combined to create to factors following principal component analysis:

<u>Behaviour Management Measures and Variables</u>
Measure(s): parental response to vignettes.

Variable(s): positive/non-active strategies, negative/blaming strategies.

<u>Other Measures</u>
Measure(s): Conners' Parent Rating Scale (Goyette, Conners & Ulrich, 1978); Maternal depressed mood: Symptom Checklist 90 Revised (Derogatis, 1983);</td><td>• All four types of attributions scored below the midpoint of the scale indicating attributions that were more positive than negative.
• When combined to form two factors, the two factors accounted for 83.6% of the variance in attribution scores.
• Internal/controllable attributions significantly predict use of negative/blaming responses
• Globality/stability was not related to negative/blaming responses.</td></tr>
</table>

Authors and Country	Participant Characteristics	Study Aims, Methods, Design and Measures		Findings and Conclusions
		internality/controllability, globality/stability		• Positive/non-active strategies were not predicted by any type of attribution.
3. Jacobs et al. (2016) **U.K.**	**Adults:** ***N* =** 10 **Gender:** 9 female, 1 male **Age:** not given **Ethnicity:** White Scottish **SES:** not given **Children** **Gender:** 4 female, 6 male **Age:** *M* = 8.8 years **SEN:** 5 = autism, 2 = Down syndrome, 1 = intellectual disability, 1 = Cornelia de Lange syndrome, 1 =	**Study Aims** How do parents of children with developmental disorders view the causes of their children's behaviour. **Study Design** Qualitative interviews, used 6 vignettes from The Written Analogue Questionnaire as prompts.	**N/A**	• some behaviours seen as caused by the DD and others were due to them being children. Whether behaviour was attributed to their DD or to them as a child affected behaviour management decisions • Behaviour sometimes attributed to environmental components • Types of attributions made appears to lead to different strategy use.

<table>
<tr><th>Authors and Country</th><th>Participant Characteristics</th><th>Study Aims, Methods, Design and Measures</th><th>Findings and Conclusions</th></tr>
<tr><td></td><td>microencephaly, global delays</td><td></td><td></td></tr>
<tr><td>4.
Jacobs et al. (2017)

U.K.</td><td><u>Adults:</u>
DD group; TD group
<i>n</i> = 51; 69
Role: mother = 42, 58; father = 6, 2; carer = 3, 9.
Age: not given
Ethnicity: White British = 88.2%, 97.1%; Asian/Asian British = 7.8%, 0%; Black (British)/ African/ Caribbean = 2%, 0%; mixed/multiple groups = 2%, 2.9%
SES*: <£15000 = 37.3%, 30.3%; <£30,000 = 27.5%, 26.1%; <£45,000 = 21.6%, 21.7%;</td><td><u>Study Aim</u>
Assess the relationship between attributions and behaviour management for parents of children with or without developmental disorders.

<u>Study Design</u>
Quantitative, cross-sectional, regression

<u>Attribution Measures and Variables</u>
Measure(s): Written Analogue Questionnaire (Jacobs et al., 2015) vignettes

Variable(s): child control, parent responsibility, parent control, child responsibility, intent, blame

<u>Behaviour Management Measures and Variables</u>
Measure(s): Parenting Scale (Arnold et al., 1993)

Variable(s): dysfunctional discipline, perceived control

<u>Other Measures</u>
N/A</td><td>• An absence of descriptive statistics makes it impossible to interpret whether parents made overly positive or negative attributions.
• Parents in DD group made significantly more positive child control, child responsibility, blame and intent attributions than TD parents.
• No significant differences between groups for parent control and parent responsibility.
• Child responsibility, blame, intent and the interaction between child control and group were significant predictors of discipline strategies.</td></tr>
</table>

Authors and Country	Participant Characteristics	Study Aims, Methods, Design and Measures	Findings and Conclusions
	£45,000+ = 7.8%, 24.6% missing = 5.9%, 7.2%. **<u>Children</u>** DD; TD **Gender*:** female: 21.6%, 47.8% **Age:** DD: *M* (SD) = 8.7 (1.62), range = 5.5 - 12.5; *M* (SD) = 8.4 (1.66), range = 5.9 - 11.7 **SEN:** DD (autism = 17, Down syndrome = 12, cerebral palsy = 4, Angelman syndrome = 1, chromosomal disorders = 4, developmental delay = 13)		• Higher child responsibility was linked with lower dysfunctional discipline. • Higher ratings of blame and intent linked to higher dysfunctional discipline. • Child control was a predictor of dysfunctional discipline only in the TD group, with higher control linked to lower discipline.

<table>
<tr><th>Authors and Country</th><th>Participant Characteristics</th><th>Study Aims, Methods, Design and Measures</th><th>Findings and Conclusions</th></tr>
<tr><td></td><td>*significant difference between groups</td><td></td><td></td></tr>
<tr><td>5.
Johnston et al. (2009)

Canada</td><td><u>Adults:</u>
ADHD group; TD group
n = 54 (mothers); 53 (mothers)
Gender: 100% female
Age: M (SD) = 37.82 (5.70) years; M (SD) = 38.34 (4.35)
Ethnicity: European Canadian: 95%, Other 5%; European Canadian: 79%, Other 21%
SES: M (SD) = 2.27 (1.02); M (SD) = 2.06 (0.99) (Hollingshead, 1975)

<u>Children</u>
Gender: 100% male</td><td><u>Study Aims</u>
Relationship between attributions and oppositional behaviour over a 1-year period in mothers of boys with and without ADHD.

<u>Study Design</u>
Quantitative, longitudinal (1 year)
• Regression
• ANOVAs

<u>Attribution Measures and Variables</u>
Measure(s): The Written Analogue Questionnaire followed by likert scales to measure: locus, control, globality, stability.

Variable(s): composite score of attributions for: inattentive-impulsive

<u>Behaviour Management Measures and Variables</u>
Measure(s): observations of mother-child interactions coded using Maternal Responsiveness Coding System (Seipp & Johnston, 2005); Parenting scale (over-reactivity subscale; Harvey, Danforth, Ulaszek, & Eberhardt, 2001)

<u>Other Measures</u>
Measure(s): Oppositional Defiant Disorder Rating Scale (Hommersen, Murray, Ohan, & Johnston, 2006); Observations of mothers and children interacting.

Variable(s): Child oppositional behaviour</td><td>• Attribution scores for TD group were near the mid-point of the scale and therefore neither positive nor negative.
• Attribution scores for the ADHD group was below the mean of the scale indicating attributions that are more internal, global and stable.
• Significant difference in attributions made between ADHD and TD mothers, with ADHD mothers making more negative attributions that TD mothers.
• 3 out of four correlations for attributions and over-reactivity (attributions made about two different behaviours at two</td></tr>
</table>

Authors and Country	Participant Characteristics	Study Aims, Methods, Design and Measures			Findings and Conclusions
	Age: *M* = 8.04 years **SEN:** none	(ADHD) behaviours, oppositional (ODD) behaviours, prosocial behaviours,	**Variable(s):** responsiveness; over-reactivity		different time points) were significantly correlated with more negative attributions linked to more over-reactivity. • Attributions only correlated with responsiveness on one out of the four possible correlations. • ADHD mothers had significantly lower responsiveness than TD mothers with no significant different for over-reactivity.
6. Nix et al. (1999) **U.S.A.**	**Adults:** ***N* =** 277 **Gender:** 100% female **Age:** not given **Ethnicity:** European American: 81%; African American: 17%; Asian American/ Latino American or American Indian: 2%	**Study Aims** Relationship between attribution and child behaviour; is it mediated by behaviour management. **Study Design** Quantitative, longitudinal (4 years) • Attribution and Behaviour Management variables only measured at Time 1.			• No affect-no control and no affect-control scenarios elicited relatively benign attributions, whilst negative affect-control attributions elicited slightly hostile attributions. • Six possible correlations created from three behaviour scenarios and two behaviour management variables:
		Attribution Measures and Variables	**Behaviour Management Measures and Variables**	**Other Measures** **Measure(s):** mothers likert scale ratings of pre-	

Authors and Country	Participant Characteristics	Study Aims, Methods, Design and Measures			Findings and Conclusions
	SES: *Mdn*: 39 (range 8-66) (Hollingshead, 1975) **<u>Children</u>** **Gender:** 48% female, 52% male **Age:** 4, 5 or 6 yeas old (starting kindergarten at the start of the study) **SEN:** none	**Measure(s):** Parenting Possibilities Questionnaire (Pettit et al., 1988), 9 vignettes (3 types of scenarios), mothers rated confidence in a benign or hostile explanation. **Variable(s):** 3 types of scenarios: no affect – no control, no affect – control, negative affect – control.	**Measure(s):** semi-structured interviews, then rated for: harsh physical punishment and restrictive discipline; Spouses reports of mothers' behaviours using revised version of Conflict Tactics Scales (Straus, 1979) - mothers own reports used if single-parent. **Variable(s):** mother's self-reported harsh discipline practices; spouses reports of mother's discipline practices	kindergarten externalising behaviours; Fathers ratings on externalising subscale of Child Behaviour Checklist (Achenbach, 1991); Revised externalising subscale of Teacher Report Form (Achenbach, 1991) of the Child Behaviour Profile; sociometric nominations. **Variable(s):** children's externalising behaviour at home; children's externalising behaviour at school	○ No affect-control linked to both measures of discipline. ○ No affect-no control attributions not linked to either discipline variables. ○ Negative affect-control linked to husbands repots of discipline.
7.	**<u>Adults:</u>**	**<u>Study Aims</u>**			

<table>
<tr><th>Authors and Country</th><th>Participant Characteristics</th><th colspan="3">Study Aims, Methods, Design and Measures</th><th>Findings and Conclusions</th></tr>
<tr><td>Park et al. (2018)

Canada</td><td>N = 148 mother-father pairs
Age: mother: M (SD) = 42.64 (4.51); father: M (SD) = 44.64 (4.39)
Ethnicity:
European/North American: n=68, 45.9%
East Asian: n=32, 21.6%
Mixed/Other: n=41, 27.7%
SES: M (SD) = 1.64 (0.87) (Hollingshead, 1975)

<u>Children</u>
Gender: 50% female
Age: M (SD) = 10.81 (1.15) range 9-12 years
SEN: none</td><td colspan="3">Relationship between attributions and child’s behaviour, is this mediated by behaviour management.

<u>Study Design</u>
Quantitative, cross-sectional

<u>Attribution Measures and Variables</u>
Measure(s): Attribution Rating Scale following four negative and two positive behaviour scenarios, attributions made in relation to: locus, stability, globality, intent, blame, responsibility.

Variable(s): attributions (composite of all 6 scales)

<u>Behaviour Management Measures and Variables</u>
Measure(s): Parent-Child Relationship Questionnaire (Furman & Giberson, 1995); Alabama Parenting Questionnaire (Shelton, Frick & Wootton, 1996).

Variable(s): Harsh parenting, lax parenting, positive parenting.

<u>Other Measures</u>
Measure(s): Child Behaviour Checklist (Achenbach & Rescorla, 2001); Children’s Depression Inventory Short Form (Kovacs, 1992); observational coding of parent-child interactions.

Variable(s): Child behaviour problems; child depression</td><td>• Attributions made are at approximately the mid-point of the scale indicating not particularly positive or negative attributions.
• No significant different between mothers and fathers’ attributions.
• Mothers’ attributions were significantly correlated with harsh parenting and lax parenting, but not positive parenting.
• Fathers attributions were significantly correlated with harsh, lax and positive parenting.</td></tr>
<tr><td>8.</td><td><u>Adults:</u></td><td colspan="3"><u>Study Aims</u></td><td></td></tr>
</table>

<table>
<tr><th>Authors and Country</th><th>Participant Characteristics</th><th>Study Aims, Methods, Design and Measures</th><th>Findings and Conclusions</th></tr>
<tr><td>Petrenko et al. (2016)

U.S.A.</td><td>N = 31
Gender: 87.1% female
Role: related foster carer: 25.8%, adoptive parent: 67.7&, non-relative foster carer: 6.5%
Age: M (SD) = 46.87 (8.38)
Ethnicity: Caucasian/White: 90.3%; African American/ Black: 6.5%; Hispanic/ Latino: 3.2%; Native American: 6.5%;
SES: M (SD) = $77,574 ($41,849), range: $17,000 - $220,000

<u>Children</u>
Gender: 25.7% female</td><td>Relationship between attributions and behaviour management in caregivers of children with FASD.

<u>Study Design</u>
Mixed Methods – cross sectional
• Qualitative: deductive thematic analysis
• Quantitative: development of coding system; correlational and regression analyses.

<u>Attribution Measures and Variables</u>
Measure(s): Parenting Practices Interview (novel measure)

Variable(s): Wilful disobedience, neurodevelopmental reasoning

<u>Behaviour Management Measures and Variables</u>
Measure(s): Parenting Practices Interview (novel measure)

Variable(s): Antecedent strategies, punishment strategies

<u>Other Measures</u>
Measure(s): Eyberg Child Behaviour Inventory (Eyberg & Pincus, 1999); Knowledge and Advocacy Scale (Olson et al., 2009); Parenting sense of competence (Johnston & Mash, 1989).

Variable(s): Satisfaction; efficacy, ECBI intensity, FASD knowledge</td><td>• Relatively more caregivers attributed behaviours more to willful disobedience or a mixture of attributions rather than specifically neurodevelopmental reasoning.
• Those who made neurodevelopmental attributions tended to utilise a range of positive strategies and didn’t utilise punishment, whilst those who made willful attributions tended to use consequences rather than antecedent strategies.
• Caregiver attributions accounted for 31.4% of the variance in antecedent strategy use.</td></tr>
</table>

Authors and Country	Participant Characteristics	Study Aims, Methods, Design and Measures			Findings and Conclusions
	Age: *M* (SD) = 6.58 (1.31) **SEN:** Foetal Alcohol Spectrum Disorders				
9. Snarr (2006) **U.S.A.**	**Adults:** ***N* =** 86 **Gender:** 100% female **Age:** *M* (SD) = 37.6 (5.1), range 25-48. **Ethnicity:** 20.9% ethnic minority **SES:** *M* (SD) = $80,000 ($53,965), range: $0 - $350,000 **Children** **Gender:** 43% female **Age:** *M* (SD) = 6.2 (1.4), range 3.5- 8.8 **SEN:** none	**Study Aims** Relationship between the size, quality and accessibility of maternal attributions and behaviour management. **Study Design** Quantitative: cross sectional, correlational, regression analyses. **Attribution Measures and Variables** **Measure(s):** Attributional Repertoire Interview, vignettes with additional open-ended questions. **Variable(s):** Dysfunctionality Score, Initial Score, Initial Set	**Behaviour Management Measures and Variables** **Measure(s):** Parenting Scale (Arnold, O'Leary, Wolff, & Acker, 1993); **Variable(s):** over-reactivity	**Other Measures** **Measure(s):** Eyberg Child Behaviour Inventory (Eyberg & Pincus, 1999); Beck Depression Inventory – 2nd Edition (Beck, Steer, & Brown, 1996); Weschler Adult Intelligence Scale – 3rd Edition, vocabulary subtest.	• Attributions were generally low in hostility. • The initial set score had the highest dysfunctionality score with a mean of 1.6 dysfunctional attributions made before a benign attribution was given. • Higher over-reactivity score were associated with higher dysfunctional attributions.

<table>
<tr><th>Authors and Country</th><th>Participant Characteristics</th><th colspan="3">Study Aims, Methods, Design and Measures</th><th>Findings and Conclusions</th></tr>
<tr><td></td><td></td><td colspan="3"></td><td></td></tr>
<tr><td></td><td></td><td colspan="3">Variable(s): Maternal depression; Expressive Language</td><td></td></tr>
<tr><td>10.
Snyder et al. (2005)

U.S.A.</td><td><u>Adults:</u>
N = 266
Gender: 97% female
Age: not given
Ethnicity: not given
SES: Median income per family member: $8300

<u>Children</u>
Gender: 49.6% female
Age: M = 6.58, range: 5.2-6.1
Ethnicity: European American: 71%; African American: 19%; Hispanic/Latino: 5%; Native American: 3%; Asian American: 2%</td><td colspan="3"><u>Study Aims</u>
Impact of attributions on and behaviour management on challenging behaviour.

<u>Study Design</u>
Quantitative longitudinal (attributions and behaviour management only measured at Time 1)
• Correlational
• Growth models.

<u>Attribution Measures and Variables</u>
Measure(s): Parent Social Information Processing structured interview (Snyder et al., 2003).

Variable(s): Parent Hostile Attributions

<u>Behaviour Management Measures and Variables</u>
Measure(s): Observation of parent-child interaction

Variable(s): Ineffective/irritable discipline

<u>Other Measures</u>
Measure(s): Child Behaviour Checklist (Achenbach, 1991); Teacher Report Form (Achenbach, 1991); playground observation

Variable(s): Child conduct problems at home; Child</td><td>• 37% of attributions provided in response to vignettes were coded as hostile
• Ineffective discipline and hostile attributions were not significantly correlated.</td></tr>
</table>

Authors and Country	Participant Characteristics	Study Aims, Methods, Design and Measures	Findings and Conclusions
	SEN: none	conduct problems at school.	

Appendix E – Reflective Comments

In line with the epistemological position of this paper, it is not believed that the biases that the researcher brings with them to the research should be controlled for or removed. Having said this, it is important to acknowledge what these biases are in order to allow for transparency. The purpose of this section is to outline some of these biases from prior to data collection and also reflections that occurred throughout the process of data collection.

A reflective journal and thesis supervision were the two main ways in which I ensured that I had the opportunity to explicitly acknowledge and reflect on my thought processes and biases.

Acknowledged biases prior to starting interviews.

I have experience of working with children who were looked after either by foster carers or under special guardianship orders in my previous school-based roles. The majority of my experience with children who are looked after is through my volunteer and family life experiences. In particular, my parents have been foster carers for approximately four years at the time of writing. Despite not living at home during this experience, I was close with the children and would look after them overnight as part of providing respite. This experience has greatly informed my understanding of what foster carers experience.

In addition, through my church's family support group, myself and my family have supported several families who have either experienced short-term foster carer placements, emergency care orders, or have been taken into care long-term. Some of these experiences have had a significant impact on myself.

I have also worked with primary-school-aged children who show a high level of challenging behaviour when I worked as a learning support assistant and an unqualified teacher at a special needs school for children with communication and interaction needs and also social, emotional, mental health needs. A lot of the children that I taught had experienced being excluded by their previous schools and demonstrated a high level of challenging behaviour. I therefore felt that I was able to relate to the experiences that the participants were describing.

I hold the view that all behaviour is generally communicating something, whether that is what the child has experienced previously, something about the parenting, or that the child is

experiencing distress for some reason. Whilst I believe that all children tend to, naturally, push the boundaries, I believe that this is part of their learning and development. I also do not believe that it is helpful to label children or their behaviour as "naughty" given the negative connotations associated with that term.

Themes and reflections from interview phase

There were certain topics that came up during early interviews that I felt were interesting, and whilst it was tempting to explore these further in a more explicit way, I was keen to ensure that I did not let additional interests bias or direct the conversations over and above the interview schedule. Such topics included: The concept of nature vs nurture and the impact of contact (in particular the researcher had considered this as a topic for thesis research and therefore it was particularly important not to let this interest particularly skew what was discussed by the participants).

I found that when I was listening to foster carers or teachers provide the initial description of the children they were talking about, sometimes the characteristics were similar to children that I knew who were looked after by foster carers. This meant that I sometimes spent time during the start of the interview trying to work out whether it was or was not a child that I knew that they were talking about, and the ethical ramifications if I felt it was a child that I knew. I could not have determined this beforehand because I do not know all the schools and foster carers of the children I have known in care.

Another example of the link between what the participants were discussing and my personal life was when in one of the early interviews, change of placements was discussed, and this made me reflect on whether the new placement for my parent's foster children was going ok. In addition, I think this also made the stories feel more real to me, as I felt I could picture the children, or that the children being described could so easily have been children that I knew.

I noticed that the teacher interviews seemed to have less of an emotional impact on me afterwards. I wondered at the time if this was because the teachers themselves were perhaps more emotionally distanced than the foster carers were. I also wonder if this impacted on the connection that I felt later on with the data and the analysis. I still think I feel more of a connection with the foster carers' data, I feel more drawn to it than I do the teachers' data.

Some of the interviews had a significant emotional impact. There are specific images that I have in mind from some of the interviews that I think will stay with me for a very long time.

Interestingly, this is most often the case for the foster carers' descriptions than the teachers' descriptions. I wonder if this is in part because the behaviour described by foster carers was more significant, or 'intense'. I also carried out the foster carer interviews in their homes, and there were times when they would be describing an incident that had happened and they would literally be able to point to where it happened, further supporting the visualisation of the stories they were telling.

Appendix F – Interview Schedule

Demographic Details:

- Age
- Sex
- Role (years and months in role)

Main interview Schedule

- How would you describe X?
- (Tell me about a typical day with X.)
- What is X's behaviour like? Tell me about times when X's behaviour is good. Tell me what happened….
- What about more challenging behaviour; tell me about times when X's behaviour was more challenging and difficult. What happened?
    - What about another time, can you tell me about another time when X's behaviour was challenging? What happened then?
- Thinking about the time/example you just talked about, what were you thinking about X's behaviour?
- What about when you were reflecting on the situation later, what were you thinking about X's behaviour then?
- Why do you think X might behave in such a way (still relating to the example(s) of challenging behaviour)?
- Thinking about one of the examples you we have talked about, what are normally the next steps when an incident or some challenging behaviour occurs? What do you normally say or do? What did you do in that situation you described earlier? What happened?

(If it's hard to elicit from the participant examples of challenging behaviour then I would move on to the following prompt and questions)

Sometimes children looked after show some challenging behaviours. By challenging behaviour, I mean times when the child has caused harm to either themselves or others, behaviour that might be destructive, behaviours that cause disruption to the daily routine, or defiant behaviours.

- What are your thoughts upon hearing those examples?

- Do they resonate with the looked after children that you have known and worked with?
- What are some ways of managing challenging behaviour displayed by a child who is looked after?
- Now, can you think of a time when a child who was looked after displayed such behaviour? What happened? Tell me about it? (this may then lead into the questions above)

END QUESTION

Do you have a favourite memory of your time with X? Tell me about it?

Appendix G – Information Sheet: Foster Carers

Participant Information Sheet

Study Title: How do teachers and foster carers attribute the challenging behaviour of primary school-aged looked-after children?

Researcher: Caroline Bird, Jana Kreppner, Tim Cooke
ERGO number: 47107

You are being invited to take part in the above research study. To help you decide whether you would like to take part or not, it is important that you understand why the research is being done and what it will involve. Please read the information below carefully and ask questions if anything is not clear or you would like more information before you decide to take part in this research. You may like to discuss it with others but it is up to you to decide whether or not to take part. If you are happy to participate you will be asked to sign a consent form.

What is the research about?

This research project is being completed as part of the lead researcher's thesis for their Educational Psychology Doctorate Training at the University of Southampton. The research is aiming to explore foster carers' and teachers' experiences of challenging behaviour from looked after children. In particular, we are interested in the explanations that foster carers' and teachers' give and how this contributes to the management of the challenging behaviour.

Why have I been asked to participate?

You have been approached and asked to participate as a foster carer who has cared for a looked after child. In particular, we are looking for individuals to participate only if:

- You have experience with a looked after child who was between the ages of 4 and 11 years old at the time
- You have looked after a particular looked after child for atleast 6 consecutive months
- Any part of the 6-month period has occurred within the last 12 months.

The above criteria are to ensure that participants taking part in the research have had a prolonged and recent experience caring for a looked after child.

If you are unsure as to whether you meet the criteria, please feel free to contact the lead researcher (c.f.bird@soton.ac.uk) and they would be happy to discuss this with you further.

What will happen to me if I take part?

If you have expressed an interest in taking part in the research, the lead researcher will contact you to arrange a time and date that is mutually convenient to meet. We would ask that this research takes place either at your home, or at the University of Southampton.

When we meet the researcher will obtain informed and written consent from yourself before starting the interview. The type of interview that will take place is semi-structured. This means that the researcher has a list of questions that they would like to ask, but the interview with adapt to the conversation that is happening.

The interview should last approximately 30 minutes, but may take longer. Interviews will be audio-recorded so that the interview can be transcribed at a later date – this is a requirement of the research, if you do not wish to be audio-recorded then unfortunately you will be unable to take part in the research.

Are there any benefits in my taking part?

All participants will receive a £5 amazon voucher for taking part in this research as a token of appreciation. This is the only direct benefit of taking part in this research. However, the aim of the research is to be able to provide an exploration and understanding of foster carers' and teachers' experiences of challenging behaviour from looked after children, particularly from a psychological perspective. This research will help improve our understanding of this area which may lead to indirect benefits for foster carers' and teachers' working with looked after children in the future.

Are there any risks involved?

There are very few, if any, risks to taking part in the research. One possible risk is that the discussion of the challenging behaviour of looked after children may cause some psychological discomfort or distress. If any participant were to experience psychological distress during the course of the interview, both the researcher and the participant are at liberty to stop the interview or take a break. If distress persists following the interview, foster carers would be directed to speak to their social worker and/or the Virtual School.

What data will be collected?

We will collect certain demographic data, such as age and sex. We will also collect information regarding your length of experience with looked after children. This is to provide background information to the main data that we will collect.

The majority of the data that we will collect will be the audio-recordings of the interview which will later be transcribed and anonymised.

Contact details for participants whilst arranging interview dates will be kept on a password protected computer.

Will my participation be confidential?

Your participation and the information we collect about you during the course of the research will be kept strictly confidential.

Only members of the research team and responsible members of the University of Southampton may be given access to data about you for monitoring purposes and/or to carry out an audit of the study to ensure that the research is complying with applicable regulations. Individuals from regulatory authorities (people who check that we are carrying out the study correctly) may require access to your data. All of these people have a duty to keep your information, as a research participant, strictly confidential.

Consent forms containing identifiable information will be kept in a locked cabinet within the Psychology building at the University of Southampton.

Audio-recordings will be kept on a password protected computer. Once transcriptions of the audio-recordings have been made, the audio-recordings will be deleted.

Do I have to take part?

No, it is entirely up to you to decide whether or not to take part. If you decide you want to take part, you will need to sign a consent form to show you have agreed to take part.

If you are interested in taking part, please contact the lead researcher to indicate this if you have not already done so (contact details at the bottom of this sheet).

What happens if I change my mind?

You have the right to change your mind and withdraw at any time during the interview and up until four weeks following your interview date without giving a reason and without your participant rights being affected. You will be unable to withdraw your data at this point as data analysis will have commenced and it will no longer be possible to remove your data.

If you wish to withdraw part way through the interview you can do so by stating your intention to the lead researcher (interviewer). You can then confirm whether you are happy for the data already collected to be included in the research or not.

If you wish to withdraw once the interview has finished, or up until four weeks after your interview date, you can express your wish to withdraw by contacting the lead researcher.

If you wish to withdraw from the study after the four weeks has ended, we will keep the information about you that we have already obtained for the purposes of achieving the objectives of the study only.

What will happen to the results of the research?

Your personal details will remain strictly confidential. Research findings made available in any reports or publications will not include information that can directly identify you without your specific consent.

The project will be written up and published as part of the lead researcher's thesis research for their Doctoral studies. Participants will have the opportunity to indicate on the consent form whether they would like to receive a link to the published research, in addition to a summary of the findings.

Where can I get more information?

You can contact any of the researchers for further information (contact details at the bottom of the page.

What happens if there is a problem?

If you have a concern about any aspect of this study, you should speak to the researchers who will do their best to answer your questions.

If you remain unhappy or have a complaint about any aspect of this study, please contact the University of Southampton Research Integrity and Governance Manager (023 8059 5058, rgoinfo@soton.ac.uk).

Data Protection Privacy Notice

The University of Southampton conducts research to the highest standards of research integrity. As a publicly-funded organisation, the University has to ensure that it is in the public interest when we use personally-identifiable information about people who have agreed to take part in research. This means that when you agree to take part in a research study, we will use information about you in the ways needed, and for the purposes specified, to conduct and complete the research project. Under data protection law, 'Personal data' means any information that relates to and is capable of identifying a living individual. The University's data protection policy governing the use of personal data by the University can be found on its website (https://www.southampton.ac.uk/legalservices/what-we-do/data-protection-and-foi.page).

This Participant Information Sheet tells you what data will be collected for this project and whether this includes any personal data. Please ask the research team if you have any questions or are unclear what data is being collected about you.

Our privacy notice for research participants provides more information on how the University of Southampton collects and uses your personal data when you take part in one of our research projects and

can be found at
http://www.southampton.ac.uk/assets/sharepoint/intranet/ls/Public/Research%20and%20Integrity%20Privacy%20Notice/Privacy%20Notice%20for%20Research%20Participants.pdf

Any personal data we collect in this study will be used only for the purposes of carrying out our research and will be handled according to the University's policies in line with data protection law. If any personal data is used from which you can be identified directly, it will not be disclosed to anyone else without your consent unless the University of Southampton is required by law to disclose it.

Data protection law requires us to have a valid legal reason ('lawful basis') to process and use your Personal data. The lawful basis for processing personal information in this research study is for the performance of a task carried out in the public interest. Personal data collected for research will not be used for any other purpose.

For the purposes of data protection law, the University of Southampton is the 'Data Controller' for this study, which means that we are responsible for looking after your information and using it properly. The University of Southampton will keep identifiable information about you for 10 years after the study has finished after which time any link between you and your information will be removed.

To safeguard your rights, we will use the minimum personal data necessary to achieve our research study objectives. Your data protection rights – such as to access, change, or transfer such information - may be limited, however, in order for the research output to be reliable and accurate. The University will not do anything with your personal data that you would not reasonably expect.

Data will be anonymised, this is when all personal data is deleted and is no longer accessible and therefore the research data cannot be traced back to an individual.

If you have any questions about how your personal data is used, or wish to exercise any of your rights, please consult the University's data protection webpage (https://www.southampton.ac.uk/legalservices/what-we-do/data-protection-and-foi.page) where you can make a request using our online form. If you need further assistance, please contact the University's Data Protection Officer (data.protection@soton.ac.uk).

Thank you

Thank you for taking the time to read this information sheet and considering taking part in the research.

Contact Detaila

Caroline Bird: c.f.bird@soton.ac.uk

Jana Kreppner: j.kreppner@soton.ac.uk

Tim Cooke: t.cooke@soton.ac.uk

Appendix H – Information Sheet: Teachers

Participant Information Sheet

Study Title: How do teachers and foster carers attribute the challenging behaviour of primary school-aged looked-after children?

Researcher: Caroline Bird, Jana Kreppner, Tim Cooke

ERGO number: 47107

You are being invited to take part in the above research study. To help you decide whether you would like to take part or not, it is important that you understand why the research is being done and what it will involve. Please read the information below carefully and ask questions if anything is not clear or you would like more information before you decide to take part in this research. You may like to discuss it with others but it is up to you to decide whether or not to take part. If you are happy to participate you will be asked to sign a consent form.

What is the research about?

This research project is being completed as part of the lead researcher's thesis for their Educational Psychology Doctorate Training at the University of Southampton. The research is aiming to explore foster carers' and teachers' experiences of challenging behaviour from looked after children. In particular, we are interested in the explanations that foster carers' and teachers' give and how this contributes to the management of the challenging behaviour.

Why have I been asked to participate?

You have been approached and asked to participate as a teacher who has worked with a looked after child. In particular, we are looking for individuals to participate only if:

- You have experience with a looked after child who was between the ages of 4 and 11 years old at the time
- You have worked with a particular looked after child for atleast 6 consecutive months
- Any part of the 6-month period has occurred within the last 12 months.

The above criteria are to ensure that participants taking part in the research have had a prolonged and recent experience working with a looked after child.

If you are unsure as to whether you meet the criteria, please feel free to contact the lead researcher (c.f.bird@soton.ac.uk) and they would be happy to discuss this with you further.

What will happen to me if I take part?

If you have expressed an interest in taking part in the research, the lead researcher will contact you to arrange a time and date that is mutually convenient to meet. The lead researcher will also contact the headteacher of the school you work at to obtain their consent for the research to take place. This is because the interview will take place on school grounds and therefore a room will be required, as well as the releasing of yourself from teaching duties for the period of the interview.

When we meet the researcher will obtain informed and written consent from yourself before starting the interview. The type of interview that will take place is semi-structured. This means that the researcher has a list of questions that they would like to ask, but the interview with adapt to the conversation that is happening.

The interview should last approximately 30 minutes, but may take longer. Interviews will be audio-recorded so that the interview can be transcribed at a later date – this is a requirement of the research, if you do not wish to be audio-recorded then unfortunately you will be unable to take part in the research.

Are there any benefits in my taking part?

All participants will receive a £5 amazon voucher for taking part in this research as a token of appreciation. This is the only direct benefit of taking part in this research. However, the aim of the research is to be able to provide an exploration and understanding of foster carers' and teachers' experiences of challenging behaviour from looked after children, particularly from a psychological perspective. This research will help improve our understanding of this area which may lead to indirect benefits for foster carers' and teachers' working with looked after children in the future.

Are there any risks involved?

There are very few, if any, risks to taking part in the research. One possible risk is that the discussion of the challenging behaviour of looked after children may cause some psychological discomfort or distress. If any participant were to experience psychological distress during the course of the interview, both the researcher and the participant are at liberty to stop the interview or take a break. If distress persists following the interview, teachers would be directed to speak to either their designated teacher or the virtual school.

What data will be collected?

We will collect certain demographic data, such as age and sex. We will also collect information regarding your length of experience working with looked after children. This is to provide background information to the main data that we will collect.

The majority of the data that we will collect will be the audio-recordings of the interview which will later be transcribed and anonymised.

Contact details for participants whilst arranging interview dates will be kept on a password protected computer.

Will my participation be confidential?

Your participation and the information we collect about you during the course of the research will be kept strictly confidential.

Only members of the research team and responsible members of the University of Southampton may be given access to data about you for monitoring purposes and/or to carry out an audit of the study to ensure that the research is complying with applicable regulations. Individuals from regulatory authorities (people who check that we are carrying out the study correctly) may require access to your data. All of these people have a duty to keep your information, as a research participant, strictly confidential.

Consent forms containing identifiable information will be kept in a locked cabinet within the Psychology building at the University of Southampton.

Audio-recordings will be kept on a password protected computer. Once transcriptions of the audio-recordings have been made, the audio-recordings will be deleted.

Do I have to take part?

No, it is entirely up to you to decide whether or not to take part. If you decide you want to take part, you will need to sign a consent form to show you have agreed to take part.

If you are interested in taking part, please contact the lead researcher to indicate this if you have not already done so (contact details at the bottom of this sheet).

What happens if I change my mind?

You have the right to change your mind and withdraw at any time during the interview and up until four weeks following your interview date without giving a reason and without your participant rights being affected. You will be unable to withdraw your data at this point as data analysis will have commenced and it will no longer be possible to remove your data.

If you wish to withdraw part way through the interview you can do so by stating your intention to the lead researcher (interviewer). You can then confirm whether you are happy for the data already collected to be included in the research or not.

If you wish to withdraw once the interview has finished, or up until four weeks after your interview date, you can express your wish to withdraw by contacting the lead researcher.

If you wish to withdraw from the study after the four weeks has ended, we will keep the information about you that we have already obtained for the purposes of achieving the objectives of the study only.

What will happen to the results of the research?

Your personal details will remain strictly confidential. Research findings made available in any reports or publications will not include information that can directly identify you without your specific consent.

The project will be written up and published as part of the lead researcher's thesis research for their Doctoral studies. Participants will have the opportunity to indicate on the consent form whether they would like to receive a link to the published research, in addition to a summary of the findings.

Where can I get more information?

You can contact any of the researchers for further information (contact details at the bottom of the page.

What happens if there is a problem?

If you have a concern about any aspect of this study, you should speak to the researchers who will do their best to answer your questions.

If you remain unhappy or have a complaint about any aspect of this study, please contact the University of Southampton Research Integrity and Governance Manager (023 8059 5058, rgoinfo@soton.ac.uk).

Data Protection Privacy Notice

The University of Southampton conducts research to the highest standards of research integrity. As a publicly-funded organisation, the University has to ensure that it is in the public interest when we use personally-identifiable information about people who have agreed to take part in research. This means that when you agree to take part in a research study, we will use information about you in the ways needed, and for the purposes specified, to conduct and complete the research project. Under data protection law, 'Personal data' means any information that relates to and is capable of identifying a living individual. The University's data protection policy governing the use of personal data by the University can be found on its website (https://www.southampton.ac.uk/legalservices/what-we-do/data-protection-and-foi.page).

This Participant Information Sheet tells you what data will be collected for this project and whether this includes any personal data. Please ask the research team if you have any questions or are unclear what data is being collected about you.

Our privacy notice for research participants provides more information on how the University of Southampton collects and uses your personal data when you take part in one of our research projects and can be found at http://www.southampton.ac.uk/assets/sharepoint/intranet/ls/Public/Research%20and%20Integrity%20Privacy%20Notice/Privacy%20Notice%20for%20Research%20Participants.pdf

Any personal data we collect in this study will be used only for the purposes of carrying out our research and will be handled according to the University's policies in line with data protection law. If any personal data is used from which you can be identified directly, it will not be disclosed to anyone else without your consent unless the University of Southampton is required by law to disclose it.

Data protection law requires us to have a valid legal reason ('lawful basis') to process and use your Personal data. The lawful basis for processing personal information in this research study is for the performance of a task carried out in the public interest. Personal data collected for research will not be used for any other purpose.

For the purposes of data protection law, the University of Southampton is the 'Data Controller' for this study, which means that we are responsible for looking after your information and using it properly. The University of Southampton will keep identifiable information about you for 10 years after the study has finished after which time any link between you and your information will be removed.

To safeguard your rights, we will use the minimum personal data necessary to achieve our research study objectives. Your data protection rights – such as to access, change, or transfer such information - may be limited, however, in order for the research output to be reliable and accurate. The University will not do anything with your personal data that you would not reasonably expect.

Data will be anonymised, this is when all personal data is deleted and is no longer accessible and therefore the research data cannot be traced back to an individual.

If you have any questions about how your personal data is used, or wish to exercise any of your rights, please consult the University's data protection webpage (https://www.southampton.ac.uk/legalservices/what-we-do/data-protection-and-foi.page) where you can make a request using our online form. If you need further assistance, please contact the University's Data Protection Officer (data.protection@soton.ac.uk).

Thank you

Thank you for taking the time to read this information sheet and considering taking part in the research.

Contact Detaila

Caroline Bird: c.f.bird@soton.ac.uk

Jana Kreppner: j.kreppner@soton.ac.uk

Tim Cooke: t.cooke@soton.ac.uk

Appendix I – Consent Form

CONSENT FORM

Study title: How do teachers and foster carers attribute the challenging behaviour of primary school-aged looked-after children?

Researcher name: Caroline Bird, Jana Kreppner, Tim Cooke

ERGO number: 47107

Participant Identification Number (if applicable):

Please initial the box(es) if you agree with the statement(s):

I have read and understood the information sheet (20.01.2019, version1) and have had the opportunity to ask questions about the study.	
I agree to take part in this research project and agree for my data to be used for the purpose of this study.	
I understand my participation is voluntary and I may withdraw at any time up until four weeks from the date of the interview for any reason without my participation rights being affected.	
I understand that my interview will be audio recorded.	
I understand my responses will be anonymised in reports of the research.	
I understand that I may be quoted directly in reports of the research but that my name will not be used.	
Data Protection	

I understand that information collected about me during my participation in this study will be stored on a password protected computer and that this information will only be used for the purpose of ethically approved research studies.	

Name of participant (print name)……

Signature of participant……..

Date…….. ……..

Name of researcher (print name)……

Signature of researcher ……

Date……..

Optional - please only initial the box(es) you wish to agree to:

I wish to receive via email a research summary upon the completion of this research. I understand that this is unlikely to be before July 2020.	

Appendix J – Debrief Sheet: Foster Carers

UNIVERSITY OF Southampton

Study Title: How do teachers and foster carers attribute the challenging behaviour of primary school-aged looked-after children?

Debriefing Statement (Version 1, 20.01.2019)

ERGO ID: 47107

The aim of this research was to explore the explanations given by foster carers' and teachers' about their experiences of challenging behaviour from looked after children. It is expected that there will be differences and similarities in the explanations given by foster carers and teachers and that these may in turn impact on the management of the challenging behaviour. Your data will help our understanding of this. Once again results of this study will not include your name or any other identifying characteristics. The research did not use deception. You may have a copy of this summary if you wish and have been given the opportunity to indicate on your consent form whether you would like to receive a summary of the research findings once completed.

If you have any further questions, please contact me Caroline Bird at c.f.bird@soton.ac.uk.

Thank you for your participation in this research.

Signature _____ Date _____

Name: Caroline Bird

If you have questions about your rights as a participant in this research, or if you feel that you have been placed at risk, you may contact the University of Southampton Research Integrity and Governance Manager (023 8059 5058, rgoinfo@soton.ac.uk).

If you have experienced any psychological distress of discomfort as a result of taking part in this research, you may find it beneficial to contact either your social worker or the virtual school.

Appendix K – Debrief Sheet: Teachers

UNIVERSITY OF Southampton

Study Title: How do teachers and foster carers attribute the challenging behaviour of primary school-aged looked-after children?

Debriefing Statement (Version 1, 20.01.2019)

ERGO ID: 47107

The aim of this research was to explore the explanations given by foster carers' and teachers' about their experiences of challenging behaviour from looked after children. It is expected that there will be differences and similarities in the explanations given by foster carers and teachers and that these may in turn impact on the management of the challenging behaviour. Your data will help our understanding of this. Once again results of this study will not include your name or any other identifying characteristics. The research did not use deception. You may have a copy of this summary if you wish and have been given the opportunity to indicate on your consent form whether you would like to receive a summary of the research findings once completed.

If you have any further questions, please contact me Caroline Bird at c.f.bird@soton.ac.uk.

Thank you for your participation in this research.

Signature _____ Date _____

Name: Caroline Bird

If you have questions about your rights as a participant in this research, or if you feel that you have been placed at risk, you may contact the University of Southampton Research Integrity and Governance Manager (023 8059 5058, rgoinfo@soton.ac.uk).

If you have experienced any psychological distress of discomfort as a result of taking part in this research, you may find it beneficial to contact either your Designated Teacher for looked after children or the Virtual School.

Appendix L – Ethical Approval

Approved by Faculty Ethics Committee - ERGO II 47107.A3

UNIVERSITY OF Southampton

ERGO II – Ethics and Research Governance Online https://www.ergo2.soton.ac.uk

Submission ID: 47107.A3

Submission Title: Thesis - Attributions of LAC challenging behaviour (Amendment 3)

Submitter Name: Caroline Bird

Your submission has now been approved by the Faculty Ethics Committee. You can begin your research unless you are still awaiting any other reviews or conditions of your approval.

Comments:

-

Click here to view the submission

Appendix M – Foster Carer Inductive Thematic Analysis Coding Manual

Theme	Subtheme	Description	Quotes
Challenging Behaviour	N/A	As might be expected given the nature of the questions included in the semi-structured interview, challenging behaviour was talked about throughout the course of the interview and influenced most of the conversations had with participants. The key themes that came through in the conversation about the challenging behaviour was that the behaviours were intense, but that there was also a huge variety in behaviours discussed.	"And a meltdown for X looks like screaming, throwing things, she bites herself, she pulls out her own hair, hits herself with things, she'll hit the dogs, she'll throw things at the baby, she's full on out of control. There's a lot of screaming, a lot of stomping, she can't stomp very well on this floor because it's quite solid so she'll go upstairs to her room which is over here and she'll jump two feet off the floor to shake, to make, that real like point that she's upset about something" *Participant F3* "In the house she would pick things up throw them no matter what, she'd turn tables up she'd kick and hit and whatever she wanted to do, if she was really angry with herself she would probably, she'd get a duvet and stuff it in her mouth and pull it so hard that her teeth would bleed. She was so sort of angry with everything. Pull her hair, sort of self-harm. And this is at five." *Participant F6*
Challenging Behaviour	Intense	The type of challenging behaviour described by the foster carers was relatively varied and included self-harm, sleeping difficulties, violence, and sexualised behaviours. However,	"So, the challenging behaviours was the intensity that he required, it was like a baby who needed to be with you all the time, but he is six. So that's hard work, that's all through the night, and evenings as well." *Participant F7*

		one common theme across the behaviours was the intensity of them, either in terms of time (the persistence of a low-level behaviour), or explosive meltdowns.	"it would last for hours, I've had other children where it would last for half an hour/an hour, but this one would be, anything from kind of four o'clock in the afternoon until ten/eleven o'clock at night..." *Participant F4* "It is, but it's not uncommon which I think makes it harder, because of the consistency of it, I think if that sort of thing happened once a month it would be like woah ok, this is, I've done something here that's not working. Today was a bad day kind of thing, but its, it can happen 3 or 4 times in a day she's like that, she's so over-stimulated and over-aroused all the time." *Participant F3*
Challenging Behaviour	Aggression	One of the most common types of behaviours that came through was that of aggressive behaviours. This aggression could be physical or verbal and was sometimes aimed at themselves, other siblings, or the foster carers.	"And he said "no" and I said "[child's name] you've got to get in the bath" and basically adamant he wasn't going to take his clothes of and wasn't going to get in the bath, so I then took his clothes off and he started getting quite aggressive with me and he goes "I can't do it, I can't do it" and I said, "well I've asked you to do it, it's getting late now, it's nearly bed time", and he just basically screamed at me, and then started punching at me like that. So, I moved away from him and I said to him, [partner] do you want to come and take over here because he's got quite aggressive" *Participant F10* "And there was one time, boxing day, she was crying and she was saying "I'm just so tired" – this was after a five hour violent episode – and she

			was crying "I'm just so tired, but I just want to hurt you", and then she'd slap me or scratch me or punch me and then she'd kind of go to sleep, and then she'd get back up again and hit me again, and it, bizarre, bizarre. Poor little sausage. So yeah." *Participant F4* "very verbal, which we knew exactly the way he was feeling. If he didn't like summin, he was very vocal..." *Participant F9*
Challenging Behaviour	Jekyll and Hyde	Foster carers often described the behaviour as unpredictable, like flipping a switch, or exploding. It wasn't necessarily that they were unaware of what had triggered the behaviour or what was underpinning it, just that the child often changed quickly.	"she's quite a complex child, and she's lovely with it, she really lights up a room, she walks in if she's in a good mood, she walks in and it's just like someone's switched a light on. It's amazing, she's such a lovely person, and yet when she's in a bad mood or she's struggling with something, she's quite the opposite. She walks in and it's like someone's shut the curtains. Like a sink hole. So, yeah, she's quite difficult to balance and judge in that way, but she's adorable." *Participant F3* "She loved you but hated you if that makes sense, she just, she really wanted to be with you but also she didn't want to get close, frightened of getting close to you so she'd actually be horrible as well. Really sort of Jekyll and Hyde personality" *Participant F6* "And then she would flip, often without an obvious trigger and we'd be like, "oh my goodness, where's this come from?"" *Participant F4*

Challenging Behaviour	Varied	There was a huge variety in the types of challenging behaviours that were discussed by foster carers. These ranged from physical and verbal aggression (which was the most prevalent) to self-harm, defiance and sleep difficulties.	"when he was defiant. I found that very, very challenging." *Participant F8* *"*she did a lot of self-harm on herself and threatening self-harm, so she got, oh she got plastic carrier bags and put them over her head and tried suffocating and strangling and "you're just going to sit there and you're gonna watch me dieeeee"." *Participant F4* "we found that really challenging, part of that was maybe sleep, he wasn't sleeping, he was waking up at 1 o'clock 2 o'clock in the morning, every morning, that's when your day started, so we used to change it about a little bit, so I would get up or [partner] would get up," *Participant F9* "we told [child] that he had to go and take all his stuff upstairs now because it was getting late, and he just took something and he just threw it and it missed [partner]'s face. It was something hard and heavy and he just threw it at us. It missed [partner]'s face, sliced past his face, landed on the sofa and he sort of like. You could see the aggression in him" *Participant F10*
Aetiology of Behaviour	N/A	This theme is focused on the explanations and reasons given by	"Interviewer: What's your understanding of where some of those behaviours have come from...

		foster carers for the challenging behaviour that they are describing.	Participant: There is a multitude of ideas, it's all nature/ nurture" *Participant F3* "Interviewer: What was your thinking about what was driving those behaviours when they were occurring? Where did you think that was coming from? Participant: Well I felt that was coming from his lack of self-esteem originally, and erm, I dunno maybe it was – I don't know – because we never ever, you never really get any answers in foster caring really" *Participant F8* "Interviewer: those kinds of behaviours, where do you think that kind of came from [...] Participant: Oh it wouldn't be him, he's 7. It won't be him" *Participant F2*
Aetiology of Behaviour	Behaviour not chosen	Foster carers often made reference to the fact that the behaviour isn't a choice, and that the child is not naughty. There were also references made to children's diagnoses and whether this might be a reason for the behaviours.	"I knew that there was going to be a reason to it, there's always like logic in the chaos" *Participant F3* "he settles in quicker now than he did before, but I still think his challenging behaviour is more to do with his ASD than being naughty, being a naughty child, because when he's yeah. He's incredibly good. He wants to help" *Participant F10*

			"It's not a case of the child being naughty, it's the child expressing an issue" *Participant F6*
Aetiology of Behaviour	Reason for Behaviour unknown	This refers to the notion that foster carers were sometimes unable to work out what was underpinning the specific behaviour. However, alongside this was also the sentiment expressed in the other sub-themes that the child is not responsible for their behaviour and that it is often underpinned by something bigger from their early experiences.	"these things will still happen and you think, well is it them, part of what they learnt, was it some sort of device they had to gain attention, or a hundred and one different things, a hundred and one different things why these things, sometimes there is a reason, sometimes there is no reason" *Participant F1* "but actually he's not great with shoes, quite often, anytime he's home shoes will be off, socks will be off, he needs to feel that grounding, but um, also when he first came to us, we then went and got his feet measured and his shoes were completely the wrong size, so his shoes probably were uncomfortable, so he's still got some bits from the past and some bits from neglect" *Participant F5*
Aetiology of Behaviour	Previous Experiences	This subtheme encapsulates the idea that a lot of the behaviours seen by foster carers were attributed to the children's previous experiences. This ranged from the emotional impact of abuse or neglect, through to behaviours that had been learnt or copied when living with their parents.	"Obviously I think in her early years I don't think there was any control, she had any control of her life, it was done and lots of wicked things happened in that household that she was able to tell me about and they were beyond – the fear and everything else that she did experience – were way beyond anything that she could comprehend or take control of" *Participant F6*

			"my impression was he was downed a lot as a child and therefore didn't think he was up to any good. He would say y'know "I'm not any good, I can't do anything". Really really quick "I can't do it" would come really quickly." *Participant F8* "She doesn't feel safe around people, she is testing, so she'll be testing me to see if I'll still be the one of those adults in the whole shop that will be there for her unconditionally." *Participant F4* "So, when he's doing that to us, at home, I think, actually he is just a little boy and he is just living out this awful stuff that he has seen." *Participant F7* "she has several difficulties with learning and social interaction that mostly stems from early neglect." *Participant F3*
Aetiology of Behaviour	Survival Behaviours	This refers to behaviours that were considered challenging in the current environment but would previously have served the function of ensuring safety and survival.	"if she felt that she might be in a vulnerable position or she might be about to be abused in some way, which is why I said about bath time. Y'know you haven't got your clothes on therefore something bad's gonna happen. There's a man coming in your house, something bad's gonna happen. So, then she would, she'd go one or the other way, one way would be very sexualised behaviour and flirting with the man and sitting

			on his lap, and the other way would be angry and shouting and fighting and throwing things" *Participant F4* "he was hyper, he was hypervigilant – "what's that?", and he would notice everything, absolutely everything. Even to the extent he would say, oh you've put nail polish on. And I just thought, kids at that age do not notice things like that" *Participant F8* "so, I think that's the difference that the survival instinct initially was to grow up for her whereas for the other one was to not." *Participant F3*
Aetiology of Behaviour	Triggers	The notion that behaviour was triggered was often given as an explanation for the behaviour. Specifically, that it was things that they had experienced in their previous home life that contributed to the triggers.	"Y'know all the nice things we'd do y'know she would always wanna wreck them at some point. I think, take the example of Christmas dinner, y'know, you spend hours doing your Christmas dinner, then you all sit at the table. Just for no reason at all she puts her hands in her dinner, puts her dinner in to my plate – here into here – and then smashed the whole lot across the floor here, just chucked everything y'know" *Participant F6* "When she's really really struggling, she finds transitions hard, and that's any transition from, she's reading a book and you say "it's going to be tea time in 5 minutes you need to come and set the table please while I plate up" that means that she has to leave the book, move rooms, change

			activity, that's too much for her to process, on a bad day that will result in a meltdown." *Participant F3*
Providing safety, security and love	N/A	The foster carers often made reference to the impact that being in a different environment had on the children's behaviour – for the better. The sense that being in a home in which their psychological needs was a reason why they saw less behaviours over time.	"But yeah, we just kind of went with it and answered his questions because we felt that was the best way to help him to feel more secure." *Participant F8* "removal from the abuse and the neglect. And giving him, nurturing, clear, consistent, warm, caring, very very controlled environment, safety, warmth, predictable" *Participant F7* "Because at home I get lulled into a false sense of security because I've just this absolutely gorgeous young man who's really thoughtful and caring of everybody's needs and then you suddenly, and y'know you say to him its bedtime he goes and gets changed and goes to bed y'know we don't have any, we don't have any massive dramas at home anymore, but I think because at home he feels so safe and he feels so secure that he doesn't need to have the dramas." *Participant F5*
Providing safety, security and love	Being Consistent	This was often a pre-emptive approach that consisted of structure, stability, consistency in responses from the foster carers and the foster	"She always knew that she could rely on me. She knew I'd be there at the school gate." *Participant F6*

		carers being a reliable and available adult for the children.	"we sort of regulated his day first of all, so we had very very clear routines, food, of eating of mealtimes of what happened in the day, to try and regulate his body really." *Participant F7*
Providing safety, security and love	Being Adaptive	Alongside a need for consistency in response, was also the notion that different children needed different things from the adults around them, and therefore you had to adapt your response according to the specific child, and/or the specific situation.	"we have very different parenting skills depending on the children in our care, so we're very adaptive, it's not a one shoe fits all kind of household and I think you have to be like that to be a good foster carer" *Participant F3* "you had to try and gauge the situation very quickly and then temper it with how you would deal with it" *Participant F1* "So that's mostly how I dealt with her, but, she was my first tricky foster child, and for the first few days I would give her time out and I'd say well if you don't have the time out I'm going to add another minute, and then on the second day, my daughter went, "mum you can't give her 20 minutes time out she can't sit still for 30 seconds". And that's when I realised, I needed to change my parenting style according to what their needs are. And time out for most of these children just doesn't work, they need time in, they need the attention the love the being held the unconditional love without harming them." *Participant F4*

Providing safety, security and love	Pre-empting issues	This referred to foster carers getting to know their children, learn their triggers and what behaviours indicated that they were escalating, this meant they were able to put strategies in place before there was a bigger meltdown.	"and even with his behaviour if he was y'know playing with his toys and things like that, if he was getting fed up with one or starting to get, y'know starting to run around and you could just see that the energy levels were getting too high, it would be a case of "right we're going to play with two toys, which two is it going to be" and the rest would get put away and then." *Participant F8* "it was trying really before it gets to that point, start to learn really when that triggers going to start, how are you going to do it before it actually gets to that stage" *Participant F6* "But I had also spoken to the coach, id spoken to them about his special needs and about the triggers he has and what you might see displayed in his behaviour and I spoke to them about how if he has an episode, how you need to deal with him. And I said really the best way to deal with him is if he's not endangering himself or anybody else, leave him" *Participant F5*
Providing safety, security and love	Teaching new skills	Often the foster carers mentioned new skills that they were teaching the children that they cared for which contributed to a reduction in the challenging behaviours they were	"He's got table manners now, when he came to us he'd just scoff his food like that, he'd just sit on the chair like this with his leg hanging down and just...I had to teach him to sit at the table, had to teach him to eat with a knife and fork, y'know, going back to basics when you have a child, and it

		seeing. The types of skills taught ranged from emotional literacy to table manners.	was about, when you ask for something please and thank you, not I want or give me" *Participant F10* "Never be cross, just say to him, we really understand that he's got some really big feelings going on about that, and that's his body trying to tell us because he can't use his words to tell us what's gone on so his body is telling us and it would be lovely if he could use his words or he could write it down that would be great, but if he can't that's ok because his body's doing the job, but as he gets older he might be able to do that, and we just clear it up and it's no big deal." *Participant F2* "we spent hours with him just playing games, helping him to win helping him to lose, showing him how to lose gracefully, and that sort of thing I mean these things are not over night, they don't happen overnight." *Participant F8*
Providing safety, security and love	Drawing on knowledge and training	Foster carers often made reference to the training that they had received to support them as foster carers. In addition to this, foster carers also made reference to specific concepts or parenting approaches (such as PACE or therapeutic parenting) that	"I think it's been taught really going to see people that actually understood. Training within foster care is brilliant really, for our local authority the training programme is extensive, really really good, and if it's not on the programme you can request, say look I've got this problem, is there somewhere you can send me that can help me with this? And they're very good at trying to find things to help people keep their placements together really." *Participant F6*

		they would only be aware of through additional research and training into supporting looked after children, and therefore the notion that they were drawing on training was inferred.	"My parenting with her is still that consistent sort of pace parenting" *Participant F3* "If, and the other thing, the other thing that I was very much aware of was as a parent I always used to feel that and it was reinforced in some of the training that we got is, especially with therapeutic parenting, they need to know that you know exactly what's going on and you're in control." *Participant F8* "very sort of therapeutic parenting, of understanding that this is a traumatised child, that you cannot, it's not the way of parenting another 9 year old, you have to parent differently." *Participant F7*
Consequences of child's early experiences	N/A	This theme encapsulates a range of consequences that are either directly or indirectly as a result of their early experiences. For example, the child's early experiences were described as indirectly impacting on their access to education or resources, whilst a direct consequence might be the re-living of	"He was really clever, really clever young lad, but had never been in an emotional place to learn, so he was quite behind at school, and as he settled, you could see the educational side of him catching up. Actually, the news we've had from his foster, his adoptive parents is that he now is working at his age level" *Participant F8* "but so extreme behaviour, and this lad in the end, he wasn't with us long, he had to go to not even another family he had to go to one of

		experiences such as birthdays or key anniversaries.	these units for very damaged children, which I think he's still at" *Participant F1* "he went back to his family for a bit which didn't last too long unfortunately that went really bad again, so he came back to us in a worse condition, worse behavioural problem, with like, we had to start again" *Participant F9* "She'd love to come out and say "mummy, mummy, mummy" and I sort of said to her, y'know, I'm foster mummy, but you have got a mummy, y'know, rather than knowing the fact that she's moving on somewhere and then she'll probably want to call them mummy and then all these mummies they're not her mummy, she has a mummy that couldn't look after her so it's really getting that into her as well." *Participant F6*
Consequences of child's early experiences	Impact on Education	The child's educational progress was often commented mostly in reference to the child not having previously been in an emotional state conducive to learning and were therefore not working at their age level.	"unfortunately, because of all the environmental reasons he was very behind he's erm, he's had a cognitive assessment and everything is bang where it should be but he really is struggling at school catching up." *Participant F2* "he is not stupid, he's he's learnt, so any sort of academic stuff had stopped though so school was pfff, y'know, but, and it took a year and half for him to be able to start to learn, and this last year he has started

			to read. So, he's 9, so he's way behind, and I don't know if he'll ever catch up" *Participant F7*
Consequences of child's early experiences	Negative consequences of challenging behaviour for child	There were many comments made in relation to consequences of the challenging behaviour of the child, including access to activities and longevity or breakdown of placements.	"so, I put his name down and then he didn't have a place and you think oh well maybe next year, put his name down again, got a place, lovely. When it came to filing in all the paperwork and they realised that he had additional needs, all of a sudden his place disappeared and he didn't have a place." *Participant F2* "but the carers that he was with although they were experienced carers, found his behaviour very difficult and too challenging, and then he came to us" *Participant F7*
Consequences of child's early experiences	Re-living experiences	This sub theme encompasses all the factors associated with being a looked after child that lead to you reliving your past experiences. For example, ongoing disclosures, contact, unanswered questions.	"this time of year he always has a wobble. This is the time of year he was taken away from mum, this is the time of year he then had a year with his foster carers so this time of year he left his foster carers. It was this time of year he was split up from his brother. It was this time of year he came to join us originally when his placement broke down with his great aunt and uncle. It was this time of year that he was moved to a special school. So, it's always a difficult time for him." *Participant F5* "One of the hard things – at that particular point we were able to be more specific, but one of the hard things in fostering is there are no definites, so you can't make any promises to the kids and say that, oh this

			will happen or that will happen, because half the time, you don't know yourself, and that as an adult is really frustrating and difficult to work with, so as a child, I really get how they must be totally freaked out by it." *Participant F8* "she still had a lot of unanswered questions, she'd just lost everything she knew. All family that she did know and then come somewhere else, and then she knew that she probably wasn't gonna to stay with me forever, didn't want that to happen, she would always say "because I've been with you a long time that means long-term, so that means I'll stay with you" so all those confusing sort of little triggers in her mind" *Participant F6*
Consequences of child's early experiences	Changes of placement	By the nature of talking to foster carers, all the children they had worked with had experienced at least one move from home to a foster placement. However, one sub theme was the ongoing changes of placement between carers and family members that many children experienced.	"Was initially taken into care when he was 20 months old and spent a year with foster carers, then he went to live with great aunt on a special guardianship order and lived with her for four years until that placement broke down. And then he came with his brother to live with us" *Participant F5* *"*But then actually what happened was, his sister went for adoption, about this time last year, well September last, September '18, because she was going for adoption, she went for adoption and that adoption

			placement failed, she came back to us in February with [foster child] still here." *Participant F7*
Impact for foster carers	N/A	One theme that came through was the impact that the experience of fostering had on foster carers. This included both positive reflections, but also negative elements such as: the isolation, emotional impact and frustration with care services.	"But it actually, he was very challenging the first six months, and we really struggled a lot. And I found it really exhausting" *Participant F10* "yeah that struck me just how, how isolated you can become, I mean we didn't go that many places, and I remember saying all throughout that placement, which was over a year, y'know how isolated we were." *Participant F8*
Impact for foster carers	Emotional Impact	There were many different elements of the fostering process that created an emotional impact on the foster carers, ranging from the emotional impact of the challenging behaviour, to the emotions associated with the child's background and being in the care system.	"And I mean y'know being a, the foster caring it is difficult because we're dealing with all this y'know for the first year he was having contact with his parents, and I would y'know I knew them and I saw them, and that's hard, that's hard" *Participant F7* "And she went "I DON'T CARE I HATE YOU" and then moved her arm out and started biting her hand, erm, and then, ran out of the room and upstairs and was jumping in her room and throwing things around and banging about, erm. Yeah and I just sort of cleared a space on this sofa and sat down and felt very defeated by the whole thing" *Participant F3*
Impact for foster carers	Isolation	Foster carers talked about feeling isolated, often because of others' perceptions of the child's challenging	"because with that level of behaviour we couldn't just get any a babysitter in or a friend because I wouldn't want them exposed to that

		behaviour, or family and friends not understanding the behaviour management approaches undertaken by the foster carers.	level of aggression, so you become a bit isolated with it. So that's how it was with that one." *Participant F6* "and he'll throw things or he'll break things which is funny because if you sat and met him nobody would believe that, nobody would believe that they would say oh he's really sweet. And he is, but he's got this, he's got an inner rage, they've both got an inner rage." *Participant F2*
Impact for foster carers	Not Knowing	One element in particular that was highlighted was the limited information given to foster carers about the children that they are looking after, and the challenges that come with a system where sometimes there are no answers.	"And they had come from chaos, and they'd come from really bad neglect and abuse, but we didn't know about the abuse until a few weeks in; and then it came out over the next two years and it's still coming out now, but I knew because within a few days of them arriving, that there had been some kind of sexual abuse as well as the neglect and the violence" *Participant F4* "again because of the court process she came to me straight from a family member so came straight to my house then with very little information about her really" *Participant F6* "One of the hard things – at that particular point we were able to be more specific, but one of the hard things in fostering is there are no definites, so you can't make any promises to the kids and say that, oh this

			will happen or that will happen, because half the time, you don't know yourself, and that as an adult is really frustrating and difficult to work with, so as a child, I really get how they must be totally freaked out by it." *Participant F8*
Impact for foster carers/ Improvements over time	Positive reflections	Despite all the challenges and the emotional impact of being a foster carer, there were many positive reflections made. These included noting the positive characteristics of the children that they were talking about, delighting in the progress that they had made, and describing the hopes they had for the child's future.	"And all that, when you see that that's when you realise, "cor you did an amazing job"" *Participant F6* "He's a lovely character, he's bubbly, he's got a lot of energy, very friendly, very interested in certain things" *Participant F1* "To the point where yes, we rejoiced when he would sometimes just run upstairs to get something on his own, y'know being able to do that was a huge step for him, huge step for him" *Participant F7* "And you think actually, from, this is taking hours, to where you are has been an absolutely incredible journey" *Participant F5* "I mean we're not perfect there were times where we got it wrong but within a framework of this is just fine consistent normal caring stuff, and helping him to regulate himself, the difference that this made to his childhood and you could almost see his brain growing and the pathways coming, it was just amazing to watch really, and seeing who he is now

			and where, I mean he has a chance now, he has a chance now to live a life." *Participant F7* "So, he's extremely resourceful, extremely productive, he will survive in life, because he's got the personality, he's got the characteristics and he's quite an entrepreneur, so he will thrive" *Participant F5*
Improvements over Time	N/A	Almost all foster carers made reference at some point to the changes that they had seen over time in the child. These changes were often in their behaviours, but also in relation to their building of attachments. The changes described were also often caveated with the notion that they were still challenging.	"And you think actually, from, this is taking hours, to where you are has been an absolutely incredible journey." *Participant F5* "so it its exhausting, and actually what we did notice though, was as he settled and as he became more regulated and more attached to us actually he would be able to separate a bit, because he became more aware of who he was and actually he could see us as separate people and he could just be on his own for a bit" *Participant F7* "But he was, he was transformed, absolutely transformed, I mean he's still challenging and he's still a long way to go, but actually, y'know he is totally transformed from that." *Participant F7* "he's massively improved. Still room for improvement, but we're getting there." *Participant F10*

Improvements over Time	'Then' Descriptions	Almost all foster carers at some point made reference to how the child was when they first arrived. For some this was as detailed as the physical description of the child, and their response upon arriving at the foster carer's house. Whilst for others it referred more to the traits and behaviours seen shortly after they arrived.	"His head was down, he used to look at you through sort of eyes that were almost closed, and he seemed to be in like a bit of a rage. You could tell he wasn't well looked after, his skin was in a terrible state very rough, very cracked. He was itching all over, bleeding in fact where he was scratching." *Participant F1* "they came in, and obviously the younger one totally nonverbal needs all of this support and structure and is going to be very very challenging and the older one came in and did a full reccy on the house. She literally walked through the door and said "oh hi, we're going to be staying at your house now", that was the whole of the eye contact "oh hi'" and then started scanning "have you got dogs, I can hear dogs, how many dogs have you got, where are they can I let them out are they allowed out of the kitchen, are they in the kitchen, is this the kitchen this way I'm just going to go in here". "where are the bedrooms, do you have an upstairs, I'm going up stairs I'm just going to have a look, wow this is a nice room who's room is this, do you sleep in here, where are we going to sleep" Full on. Completely, she literally did a reccy of the house, top to bottom, everything. "oh, you've got a cat" she was out at the time but she'd seen the cat food..." *Participant F3*

			"When he came, he was six, but it was like looking after an 18-month year old. He was, he could speak but it was very difficult to understand what he was saying, he had very little, he was very volatile, very, very unable to regulate his emotion. He was a hypervigilant, he was scared the whole time, and would run about touching the walls, everything, very very little eye contact, very little sort of engagement really. Would go off with anybody, very little idea that there was any, who he was. And a high level of sexualised behaviour. He was exhibiting a high level of sexualised behaviour, and, verbally and in his actions, mostly towards towards me, not towards my husband towards me. That was how he was when he came. He needed absolutely 24 hours almost, he was awake a lot of the night, he had a lot of bad dreams, he was awake a lot. Found it very difficult to go to sleep wouldn't sleep 'til about 10 11 at night, was screaming around upstairs, awake several times in the night scared. And so, it was extremely intense to and that's how he was when he arrived." *Participant F7*
Reference to a 'normal'	N/A	Throughout the interviews there were often references made to their being a 'normal'. This was often in relation to their new home set up being 'normal', or that the child's behaviour deviated from the 'norm', or finally that they	"whether or not he'll ever get back to so-called normal I don't know." *Participant F1* "parenting her in a totally different way in a therapeutic way rather than just a normal kind of parenting way." *Participant F4*

	needed to be parented differently to how one might 'normally' parent.	"So we did the whole bedtime routine, of y'know like normal, you have dinner, you then go up and you have a bath, you have stories" *Participant F7*

Appendix N – Teacher Inductive Thematic Analysis Coding Manual

Theme	Subtheme	Description	Quotes
Challenging Behaviour	N/A	This theme is focused on the types of challenging behaviours that were discussed by teachers. There was a huge variety in the behaviours discussed, but refusal behaviours and aggression came through in particular.	"so the behaviour he's presented with physical behaviour like from day one really from being here, it's funny he sort of makes up things, so things aren't, his reality is different to what is actually happening. He would hide under tables, doesn't naturally form relationships with adults." *Participant T6* "so behaviours start with sort of the low-level stuff, he gets, he is very much a shouting out sort of child, wants a lot of attention, so that is, he will come and show you his work all of the time, he wants you to take pride in his work, he wants to show off his, the things that he has done. He wants you to notice him, whether it is positive or negative, so you get the calling out you get the poking and prodding of other children so that he is, he is focused upon by not only myself or by others, you get wandering around the classroom as lot of the time he likes to have a purpose, he's quite fidgety, moving up, he has been known to have outbursts, so quite emotional outbursts, of both directed towards himself and his work, so that becomes, again scrunching up his work, and it'll just get chucked, or he'll take himself off in a temper tantrum, or he'll he will or he has lashed out in children in rage, and that has got himself into

			trouble. He's one to find the places that he doesn't need to be in, if that makes sense, so in certain spots in the playground that he didn't need to be in, he will go to those spots to go to and hide away basically, so he has been known to hide away. Yeah, there's, as we'll talk probably more of the little behaviours will come out, but yeah he has been known to be quite disruptive from very low level stuff to very high-level" Participant T7
Challenging Behaviour	Refusal Behaviours	Whilst there were a range of challenging behaviours discussed by the teachers, refusal behaviour was one common area. This included demand avoidant behaviours, as well as more passive refusal to engage with work or follow instructions.	"if you say ok we're doing French - "I don't wanna do French" so he'll be out on the stairwell and he'll be, sit on the window sill and just and he won't actually engage at all if you say "come on [child's name], y'know let's go and find out what's going on in class" he's like, he just doesn't even engage he doesn't even speak to you" *Participant T6* "I'll say to him "oh look, let's see if we can sit for, if you can sit for 5 minutes you can have another dojo" and he will y'know respond to that sometimes, but other times he's like "I don't care, I don't wanna dojo, I don't want a sticker" I'm just going to be on my own agenda." *Participant T5*
Challenging Behaviour	Aggression	The other common challenging behaviours described were types of aggression, be that physical or verbal.	"On one particular occasion it was because she'd had a fall out with a friend in the playground and she'd, I think she'd gone out onto the playground and she'd basically got in an argument with this girl and she'd just basically punched her in the face." *Participant T4*

			"yeah, very high-level attacking other, going to physical attack other children, verbal aggression, use of extreme language, swearing, the most extreme forms of swearing you can imagine." *Participant T2* "there was an incident a few weeks ago where just happened to look out the window and he was he was very violent towards his brother. Very violent, I mean you don't see that level of violence towards others in school with him, he might give them a whack or whatever but not in the same way" *Participant T6*
Challenging Behaviour	Varied	Although aggression and refusal behaviours came through most strongly, there were a wide range of other behaviours highlighted by teachers. This ranged from: difficulties with concentration, attention seeking, disruptive behaviours and difficulties with truth-telling	"but we have had other children in the school who have presented it in other ways. We have a lot of looked after children in our school and they're like a rainbow of emotions." *Participant T4* "He really struggles to sit as well, he really struggles to sit and focus on the carpet, it's like literally two minutes and then he wants to get up and walk about or go to the writing area or he'll fidget or he'll play with things that are next to him, he's not got that concentration span at all. So the days he's got a 1:1, I tell him what we're doing, he does a little bit of carpet time and then he goes and does that. So I think no more than, 3 minutes maximum for him." *Participant T5*

			*"*because I couldn't spend every time with him and me and him together, then his behaviours then became exacerbated if there were then other things that had happened. So that's the calling out the showing of work, the up and moving around, he wants the adult interaction, and if you don't give the adult interaction then there's the behaviour." *Participant T7* *"*we had a few occasions where she would not necessarily tell us the truth, straight away. So we'd have to kind of dig a bit and say well actually these pencils were they really yours? No ok." *Participant T3*
Aetiology of Behaviour	N/A	This theme refers to the explanations given for the challenging behaviour discussed.	"Interviewer: Ok, so what are your kinda thoughts about why, I guess yeah why he's showing those behaviours. Participant: I think because they're out of routine as well. And I feel myself he may have been y'know taken out of his parents who he really loves and his siblings and then going to [foster carer], who he then became attached to, and then he's come to me who then he's become attached to so it's kind of, I feel it's, I just feel he wants some security. And I think that and that behaviour that he's displaying is probably like a bit of separation anxiety, y'know he's not sure where he's secure, and he's not sure [foster carer]'s coming back and that sort of thing, even though she always does, and maybe that's because of what he's had in the past." *Participant T5*

			"Interviewer: when those behaviours were occurring, what was the understanding I guess, either from yourself or from the school as to why... Participant: Ok so a little bit of background family information was that" *Participant T1* "we're very aware at the PRU that all behaviour is a form of communication, so he just need to tell people and he was testing our boundaries and seeing where we were. He needed to know he was in a safe and secure environment." Participant T2
Aetiology of Behaviour	Absence of Skills	This refers to the children showing challenging behaviours due to not having the skills necessary to engage in more socially appropriate behaviours.	"I think that she, she wants to heal the bond, she doesn't know how to do it, and rather than her feel sad in herself, I think a part of her wants to make other people feel sad as well." *Participant T4* "all those kind of behaviour things instilled about y'know listening and respect and things, because he can be quite "I don't care", y'know he's a bit like he'll kind of stick his tongue out sometimes at you." *Participant T5* "he didn't have the language to talk about why he felt angry or why he felt sad about things and so it became erm, and then that's when you get the blame side of things, he couldn't communicate things and it'd

			become a, I feel angry why because I can't tie my shoe laces, well that's not something that's happened before, there's clearly something else that's bothering you but you just don't know why yet, and so that was very interesting." *Participant T7*
Aetiology of Behaviour	Previous Experiences	A range of references were made to the child's earlier experiences contributing to the presenting challenging behaviour. The behaviours were sometimes considered to be due to something they had learnt, or not learnt, from the early home environment. Additionally, references were made to what the child had been exposed to and the associated trauma and damage that had done.	"and a lot of this has come from the home that she's come from and where she's imitating that behaviour, but yeah" *Participant T4* "I just think the experiences that the eldest child had seen were extremely damaging in terms of the relationship that he had with his parents and also long term with anybody really" *Participant T1* "I think I understand as well within the foster home, there were instances of items that had gone missing and they were found in her room, kind of thing so was hoarding that, I've got these things I don't want them to be taken away again if that makes sense." *Participant T3*
Aetiology of Behaviour	Need for Safety and Security	Specifically, within the early experiences, it was identified that the behaviour came from a need for safety and security, due to an absence of this in their earlier home life.	"he was testing our boundaries and seeing where we were. He needed to know he was in a safe and secure environment" *Participant T2* "because he needed that attachment with us, he needed that security" *Participant T1*
Aetiology of Behaviour/	Contact	Going to attend contact was often described as reason for the	"And then mum, I think she went to rehab for quite a while, like over 3 months I think, and then came back and she was able to have like visiting

Challenges Associated with the Care System		challenging behaviour that was shown but was also viewed as a challenge of being 'in the care system'.	and things and that would really really disrupt the children would upset them, they didn't understand, the behaviour would deteriorate from before the visit and then afterwards it would take them a little while to settle down" *Participant T8* "like because he goes to contact like once or twice a week, sometimes if they've let him down, if he goes out of routine then he gets really upset." *Participant T5* "there were four children, his two younger siblings, sisters, were taken into care separately so he did see them but very irregular, he had limited contact with mum and dad initially when he was taken into foster care" *Participant T1*
Aetiology of Behaviour/ Challenges Associated with the Care System	Changes of Placement	Almost all interviews included reference to children moving placements. Whilst behaviour was often seen to improve whilst they were in foster care (as can be seen in the "improvements over time" subtheme), when children initially moved placements, or had an upcoming placement move, teachers	"I think the only sort of times that we had in terms of challenging behaviour sort of with the move from birth mum to foster carers" *Participant T3* "I will say that he, we did notice the last half term the summer half term his anxiety went through the roof in the anticipation of the summer holidays, and he was almost back to square one by the last day of the summer holidays because he knew that he wasn't going into school, so we found that very tricky with him, very sad really, because he knew that

	described a worsening in behaviour in anticipation of the move. The discussions around placement changes went beyond explaining challenging behaviour, and also highlighted children's confusion at what was going to be happening, or that placement changes already taken place were due to the child's level of challenging behaviour.	he was going back to he was going back his parent at that time, but he didn't know when or why, the trauma of all that, definitely shifted it. So I thought that was very interesting in terms of him processing stuff." *Participant T7* "P: So he's gone back to his family now, but now he's gone back to the volatile behaviours. And we're seeing again, the looking at the floor. It's really hard, because it's almost like he's been given this glimpse of this life, where people go on holiday, and people have new clothes and people have a clean home... I: ... you're given experiences... P: Yes, and he's had all that and he was really torn because I think like, he really wants to be with his mum, and he's back with his older siblings as well, because obviously when he was with the foster family he was only with the younger ones, who are like foundation and year 2, and he's year 6. I: So quite a gap P: Yeah little baby ones, and he wants to be with his teenage siblings. So, they're all back together again and he likes that, and he's back in the local area because he was on the other side of [place name] but travelling to our school still. But now he's suddenly finding it really hard" *Participant T4*

			"I think, erm, he's just really confused about what's happening. He really is, he when you're doing a timeline y'know of going back to dad and stuff because we've been doing that time to talk with him as well and erm, well even the oldest one he was confused as well about, he thought he was going to be going into - I can't remember what year group it was - but it certainly wasn't into the next year group, when he goes to his new school, and they all, y'know they've both said "oh I'm going back tomorrow" or "I'm going back to dads this weekend" and the timeline and the understanding about who's who as well and where mum is and brothers and I think it's just so confusing for both of them, to rationalise that and to understand that at that age is...yeah.." *Participant T6* *"*In my class at the moment I have one girl who's looked after as well but she's not with a foster family, because her, her foster family situation broke down because her behaviour was quite volatile so she's currently in a foster care home, in [location] and she travels to us every day, I think there's like seven children in her home so she has like 9 or 10 carers and there's not really like a stable family relationship so, but yeah, she's been in my class since January." *Participant T4*
Challenges Associated with	N/A	This theme refers to the consequences and the impact of being	"when he first started because his whole life turned upside basically, a new place to live, you know, being taken away from his adoptive parents

the Care System		in the care system specifically. For example, by becoming looked after, this meant that the notion of contact with parents is introduced, that there are sometimes changes of placement as well. Additionally, this often introduced complex sibling dynamics either because siblings were placed separately, or that they were placed together but there were on-going emotional issues related to each other.	who had been through a large process to get to where they were. He had also been separated from his brother, so he was adopted with his natural brother, his brother stayed with his adoptive parents, and he had been moved." *Participant T2* *"*because she doesn't really know what's gone on, and she doesn't know what's happening, she doesn't know what's happening in the future, and it's that uncertainty and she's presenting it as sadness" *Participant T4*
Challenges Associated with the Care System	Sibling Dynamics	The relationships between siblings was often mentioned in passing. For example, that siblings had been separated as part of their care placements, that there had been abuse between siblings, or that siblings missed each other when placed apart.	"He hates his brother, he says he hates his brother, he says he wants to kill him, quite literally and there was an incident a few weeks ago where just happened to look out the window and he was he was very violent towards his brother. Very violent, I mean you don't see that level of violence towards others in school with him, he might give them a whack or whatever but not in the same way, he, I think he probably did wanna kill him." *Participant T6*

			"she'd gone into foster care and then she'd been sexually abused in foster care by her sibling, her older sibling, yeah so then they had to be separated and she got moved again" *Participant T4* "I mean she also had a baby brother, who she only ever saw a couple of times, he has since been adopted, but not with them, although I understand as part of the arrangements she will get to see him, that's part of the arrangements that the two sisters will get to see him, but for her, you know knowing that she had this baby brother who she really never got to see I think was really quite quite a blow, because as I say she's so caring towards her younger sister, she's got that real sort of protective instinct." *Participant T3*
Wide variety in Behaviour Management Approaches	N/A	This theme picks out some of the approaches that were discussed in relation to managing the challenging behaviour they were seeing. The one element that came through most strongly, however, was the wide variety in approaches and strategies between and within the different interviews. Giving time and space, and being adaptive were two themes of	"he went to the pupil referral unit, we call it the oaks behavioural unit. He was going once a week and he went for two terms to support his emotions, virtual schools funded play therapy, he went to forest school, so he was out for a day at forest school. And then we funded a bit more play therapy and support for him. Family resilience were involved with the parents initially but they didn't engage, then we had lots of we had some ed psych support put in for him here, and a 1:1 For the whole year we paid for because he was going to get excluded otherwise and long term that wasn't going to help him at all. So, we also provided before and after school club for him funded by the school which gave him some, well

		the approaches, but even then the strategies used to achieve these goals varied. Providing 1:1 support was the single strategy discussed most frequently.	he was being fed and he had some social engagement with his peers so, that's basically what we tried to do for him for that year." *Participant T1* "I would say he gets extra which also some other children get is the 1:1, y'know. And he's also, he's also had a few extra interventions in place as well, so he's had like the virtual school come in to work with him, a bit of play therapy and I think he's going over to the centre over there where they do a bit of work as well, so he's had extra interventions to kind of help him to y'know get those emotions out*." Participant T5*
Wide variety in Behaviour Management Approaches	Being adaptive	Often, reference was made to adapting the response or the approach from the teacher, given the child's needs. This was mainly in relation to adjusting expectations, rather than necessarily managing the behaviour in a different way, with several teachers also stating that they wouldn't manage the behaviour any differently for the looked after child.	"and make his carpet sessions a bit shorter so he's not sitting, because I think it's a big expectation for him to sit for 15 minutes, so like 4 minutes is maximum for him" *Participant T5* "So as he got more and more used to the routine, it was less about him putting pencil to paper, because that was what it was initially, he just didn't want to do it, because he just couldn't he just couldn't physically process what was going on around him, so we get him to do other things, we get him to go and do some jobs, we get him to go and make sure the book corner was sorted or pencil pots or things like that just to keep him busy keep him moving" *Participant T7*
Wide variety in Behaviour	Giving time and space	Lots of teachers talked about their initial response to a challenging	"But yeah I think, I think, we just, we always make sure that we give her time, because you can't hurry her if she's feeling too emotionally

Management Approaches		behaviour being to give the child time and/or space to calm down.	distressed, she just needs space. And she needs just to be moved away, until she's ready to fix it." *Participant T4* *"*yeah I mean, giving him space actually that if he needs to then that's fine, but as long as he's safe." *Participant T6* "We used to use this room for, it was his room, so if he needed time out, he had his own laptop and he had his books, and everything was up here so he could just be alone and let off steam and talk about whatever he needed to talk about." *Participant T1*
Wide variety in Behaviour Management Approaches	External support services	Lots of references were made to a range of external support services that schools drew upon for support with management challenging behaviour. This included alternative provisions, CAMHS and CAHBS, Virtual School and most commonly Play Therapy.	"he went to the pupil referral unit, we call it the oaks behavioural unit. He was going once a week and he went for two terms to support his emotions, virtual schools funded play therapy, he went to forest school, so he was out for a day at forest school. And then we funded a bit more play therapy and support for him. Family resilience were involved with the parents initially, but they didn't engage, then we had lots of we had some ed psych support put in for him here" *Participant T1* "And he's also, he's also had a few extra interventions in place as well, so he's had like the virtual school come in to work with him, a bit of play therapy and I think he's going over to the centre over there where they

			do a bit of work as well, so he's had extra interventions to kind of help him to y'know get those emotions out." *Participant T5*
Wide variety in Behaviour Management Approaches/ School Specific Factors	1:1 support	1:1 support was a common strategy described by teachers, often in reference to keeping the child or others safe. Comments were also made in regard to the financial implication of providing 1:1 support, but also the belief that 1:1 was necessary in order to prevent exclusions.	"but his behaviour, we are just trying to keep him safe, keep others safe. So, he's got a 1:1 at minute because he can't be allowed to go to the toilet on his own or any of that sort of thing either." "if you think that we've been trying to be really careful with having 1:1 so somebody knows where he is all the time, I mean that's challenging in itself just having the staff to do that. But he disappeared the other day" *Participant T6* "He's quite, he's got a 1:1 two days a week now because his behaviours quite demanding." *Participant T5* "and a 1:1, for the whole year we paid for because he was going to get excluded otherwise and long term that wasn't going to help him at all." *Participant T1*
School Specific Factors	N/A	This theme referred to a range of factors such as issues around funding support for children, wanting to support the looked after child whilst needing to manage risk to other pupils and references to wanting to avoid permanent exclusions.	"He had a one to one TA that we the school have funded, he hadn't got an education health care plan at that point, purely to keep himself and other people safe, and because we didn't want him to be excluded because he needed that attachment with us he needed that security." *Participant T1*

			"Participant: I mean it's difficult isn't it they'll say things like, they'll openly tell the other children that you get taken away if your mum or dad shout, or the police might come and take you or, yeah, it's difficult... Interviewer: ...because that's been their experience... Participant: Yeah, and then for the other children they think well what does that mean? If my mum and dad shout I'll get taken away but obviously that's the most simplistic view for them isn't it?" *Participant T8*
School Specific Factors	Seeing child with birth parents and foster carers	Half of the participants described children where they had seen them with their birth parents, and then also with their foster carers, and were able to comment on the differences.	"It was really interesting actually because when I first met her she was actually with her birth mother, so we've actually witnessed the whole process of her going from being with her birth mother to being with her foster carers, which was very very interesting to see that transition because for her, there were so many positives in it, but you could also see the emotional struggle for her to actually make that adjustment to be with people who were not mum" *Participant T3* "In year 2, a little boy and he had a baby brother, yeah a baby brother and his mum really struggled, she was taking drugs and drinking and basically just not looking after them. And they'd had lots and lots of help and in the end social services placed them with foster carers and they were like completely different children, completely different, they had a proper family situation, they were clean, looked after, had presents, started making progress at school, the little baby started talking and

			actually meeting the milestones and things. And then mum, I think she went to rehab for quite a while, like over 3 months I think, and then came back and she was able to have like visiting and things and that would really really disrupt the children would upset them, they didn't understand, the behaviour would deteriorate from before the visit and then afterwards it would take them a little while to settle own, and then eventually they did go back to mum, but she was ok in the end. And she managed to maintain it" *Participant T8*
Positive Reflections	N/A	This theme refers to the positive comments and reflections that were made by teachers. These reflections were sometimes made about the child and describing positive characteristics of the child, whilst sometimes they reflected the personal emotions and feelings of the teachers. There was also a sense that teachers were able to see changes in behaviour over time and that this was a positive experience for them.	"So she's now, she's really come out of her shell. She's the most sassy little confident girl, you'll ever met. She's gonna be, she was the lead last year in one of our productions, and she's going to be the lead this year as well. And she just is absolutely this little ray of sunshine. Every adult in the school adores her, because she's just so chatty and confident." *Participant T4* "Yeah I guess absolutely the difference between them from when they were first taken into care to when they left and the relationship they had with their foster carers was massive, and the change in their life from I mean right – admittedly it all went slightly wrong in the middle, but, sort of took a few steps back – but when they left us they were in a far better place" *Participant T1*

	Improvements over time	For most children that were discussed their behaviour improved during the time that they were in foster care. The times in which it deteriorated in care were often in anticipation of a move back to parents.	"he's always been like one of the cool kids, but I think he always felt a bit down, so when he went into the foster care, his entire attitude changed. He went from a child, so always, he's quite small for his age – I think he's a little malnourished - he was a child who always looked at his feet when he's walking around. You say like hi to him in the corridor and he's like "hi" [in low mood tone of voice]. Suddenly, he's holding his head up high and he's smiling all of the time, literally ear to ear all day every day. Like he's listening in every lesson, he managed to go on our residential least year and we had not a single incident, he was just loving it. He went out and played football in the sun with his friends, he was like going to the park at the weekend, they got him a bike they taught him how to ride a bike. He went to Spain in the holidays and had a lovely time and it was amazing" *Participant T4* "And they'd had lots and lots of help and in the end social services placed them with foster carers and they were like completely different children, completely different, they had a proper family situation, they were clean, looked after, had presents, started making progress at school, the little baby started talking and actually meeting the milestones and things." *Participant T8*
	About the child	There were a range of positive comments made about the child,	"she's actually a really lovely girl, she's very warm and loving and nurturing, and she's built really strong bonds with some of the women in

		including that they were 'lovely' and academically able.	our school, and she's quite like huggy and very sweet, very affectionate" *Participant T4* *"*she's very very lively bright chatty girl" *Participant T3*
	For the adults	Positive comments were also made in regard to the impact that these looked after children had on the teachers. There were also a range of positive comments made regarding the foster carers.	"I do remember him with a lot of fondness, he was never one of those children that I'll remember as being a bit more infamous in my teaching experience, definitely a positive experience for me." *Participant T7* "but just on this on this occasion I would say that the foster carers that they found, it was an absolutely life saver for those girls, and absolute life saver it was the first time that they'd been foster carers, so they've got grown up children of their own, and actually just the positive impact of that, that has had on those girls, has been incredible, so yeah." *Participant T3* "Yeah, she's just a little success story, and she's so bright as well, and she's one where sometimes when you work with these children you think, what are they going to be doing when they're 18, where are they going to be are they going to have a home are they gonna y'know be educated and have a good job. And she's one where we can say now, yeah, she's gonna be fine. She'll be ok. So that's nice." *Participant T4*

Appendix O – Foster Carer Thematic Map Development for Data Saturation Purposes

Figure O1. Key for foster carer thematic map development.

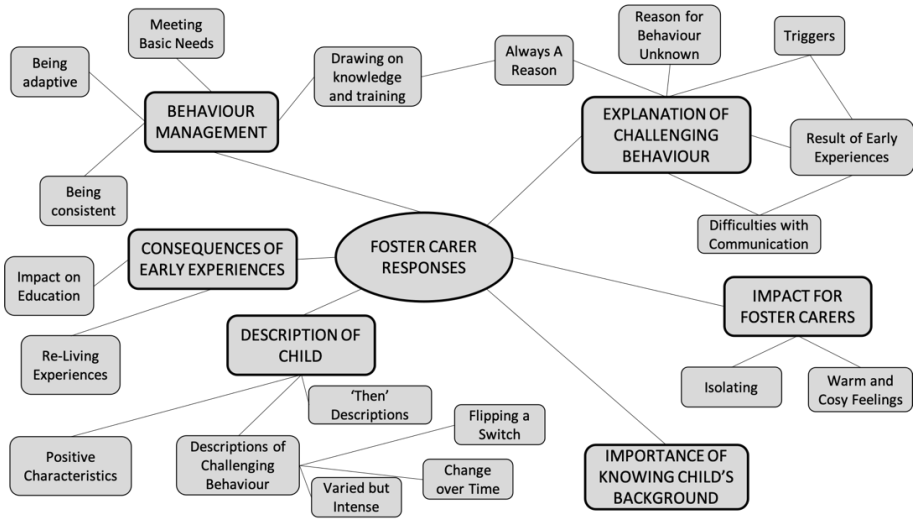

Figure O2. Foster carer thematic map for first five transcripts.

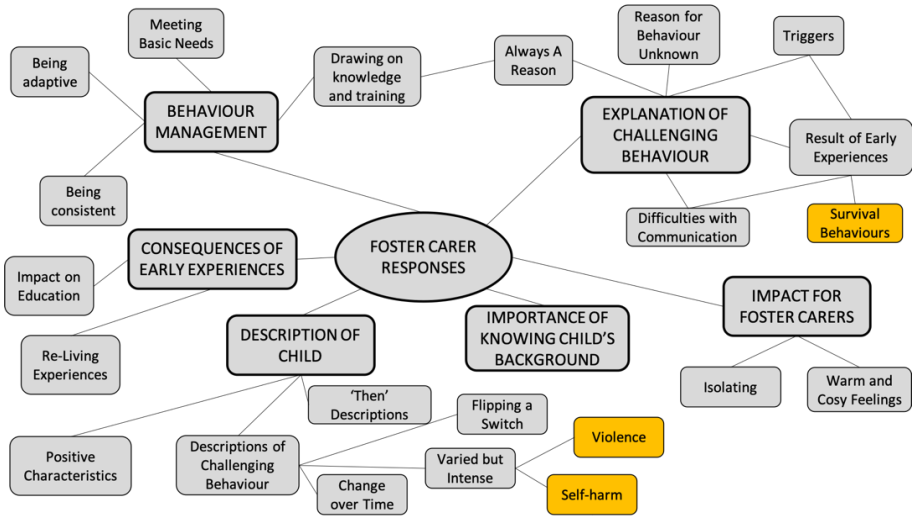

Figure O3. Foster carer thematic map for first six transcripts.

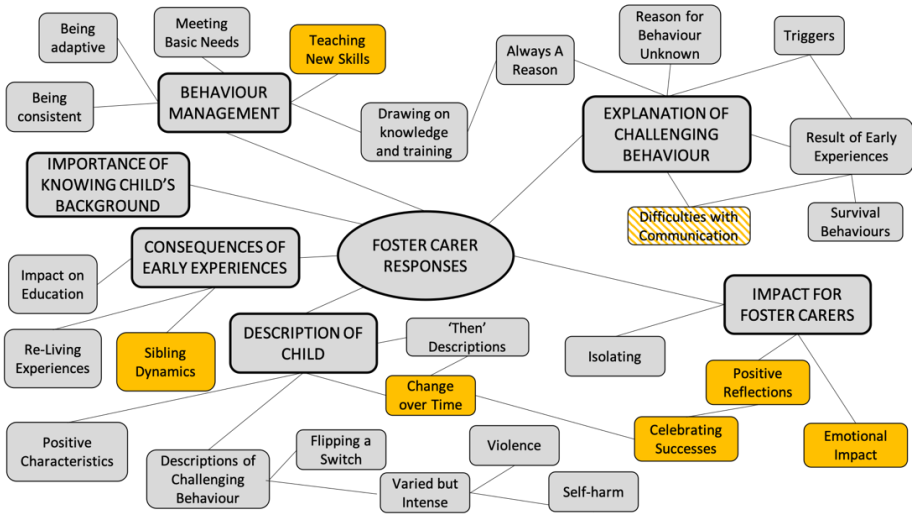

Figure O4. Foster carer thematic map for first seven transcripts.

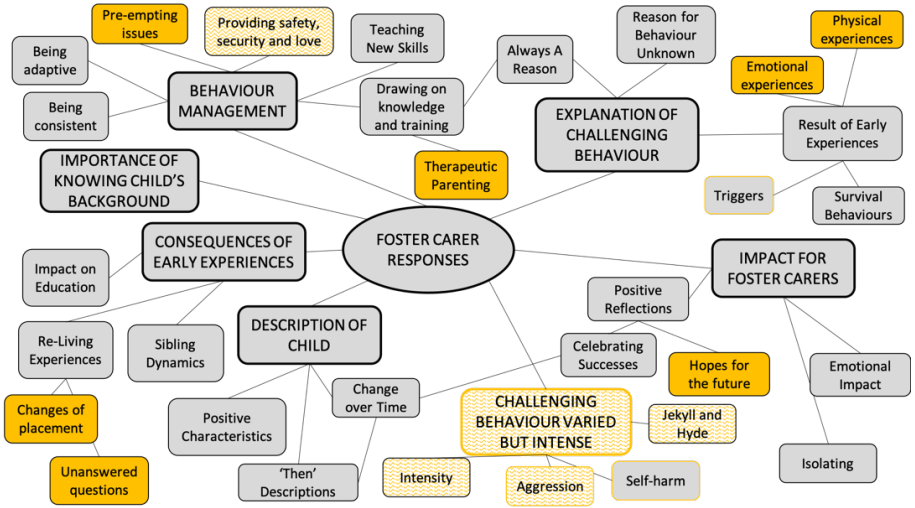

Figure O5. Foster carer thematic map for first eight transcripts.

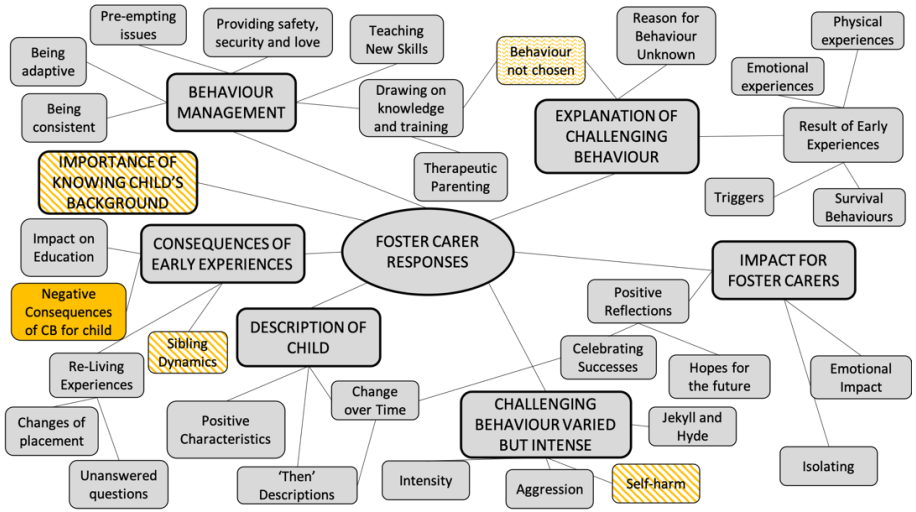

Figure O6. Foster carer thematic map for first nine transcripts.

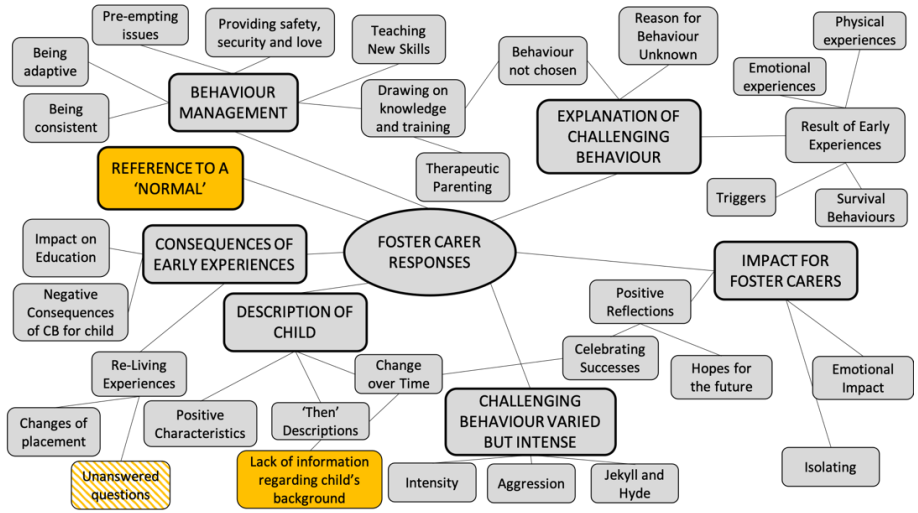

Figure O7. Foster carer thematic map for all ten transcripts.

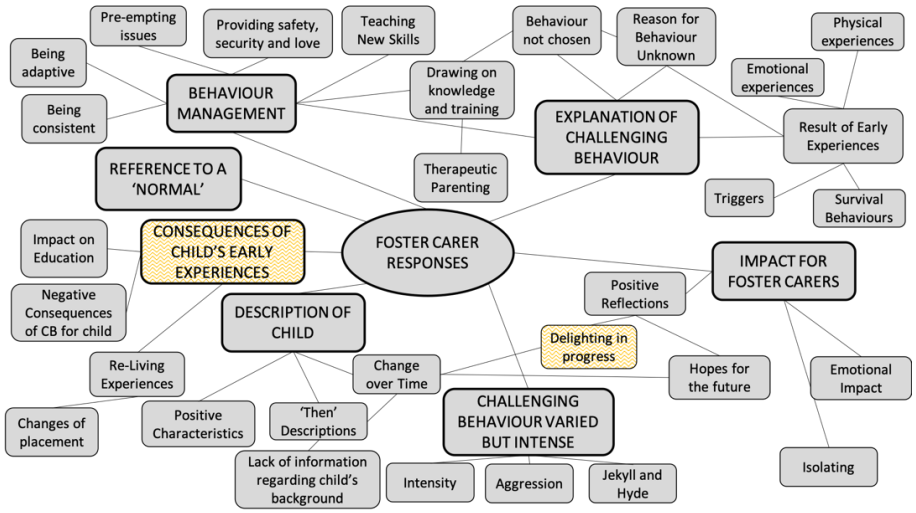

Figure O8. Foster carer thematic map for all ten transcripts, version 2.

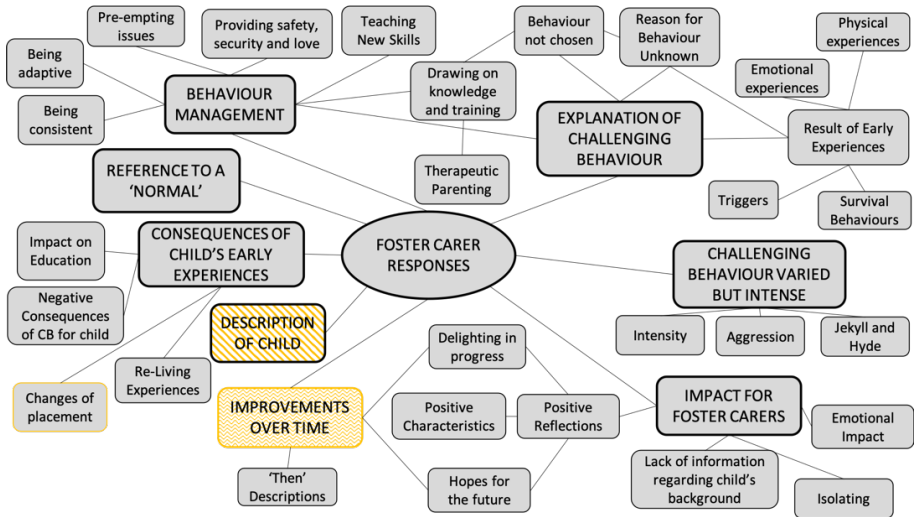

Figure O9. Foster carer thematic map for all ten transcripts, version 3.

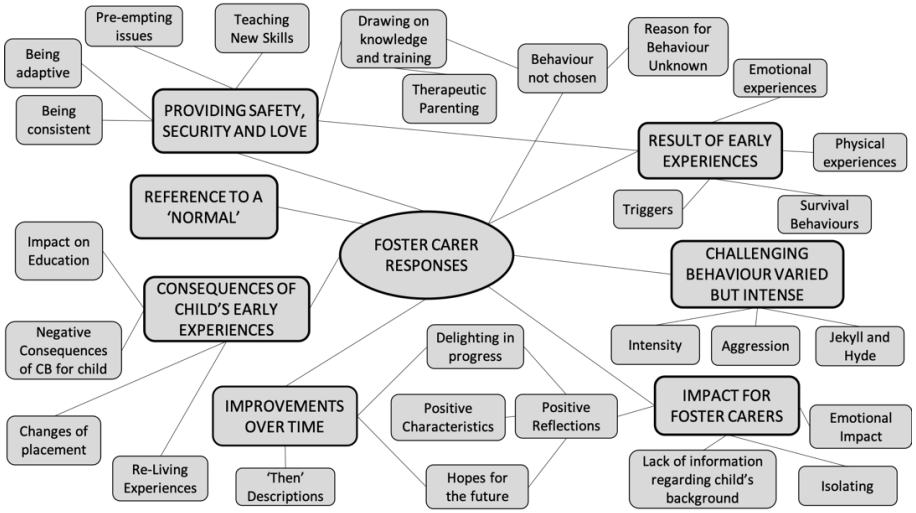

Figure O10. Foster carer thematic map for all ten transcripts, version 4 (following consideration of whether themes were domain summaries).

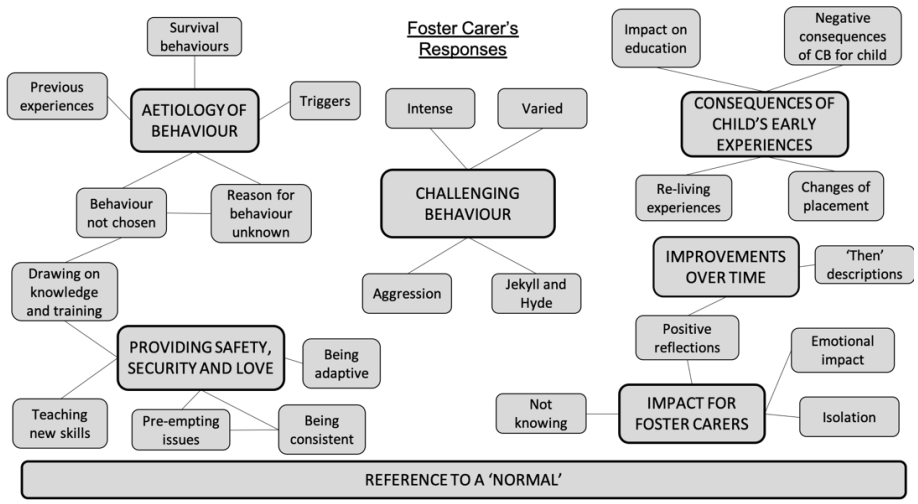

Figure O11. Foster carer thematic map for all ten transcripts, version 5 (following peer supervision).

Appendix P – Teacher Thematic Map Development for Data Saturation Purposes

Figure P1. Key for teacher thematic map development.

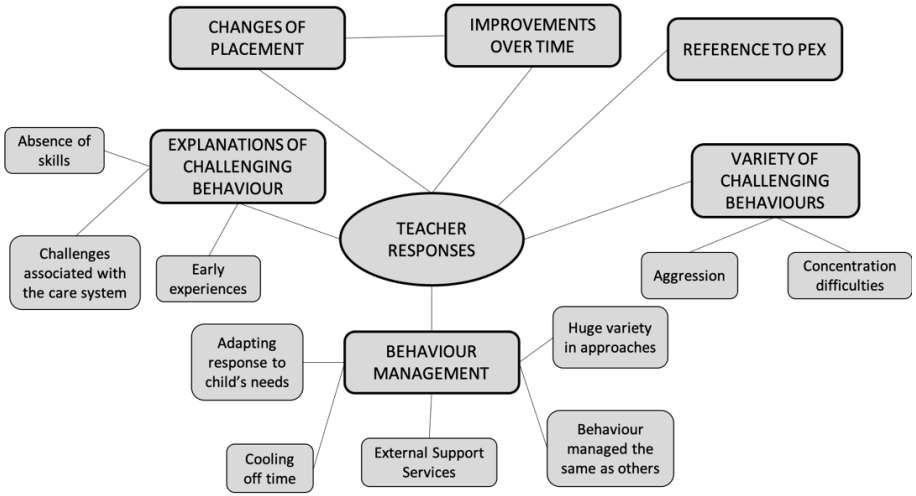

Figure P2. Teacher thematic map for first five transcripts.

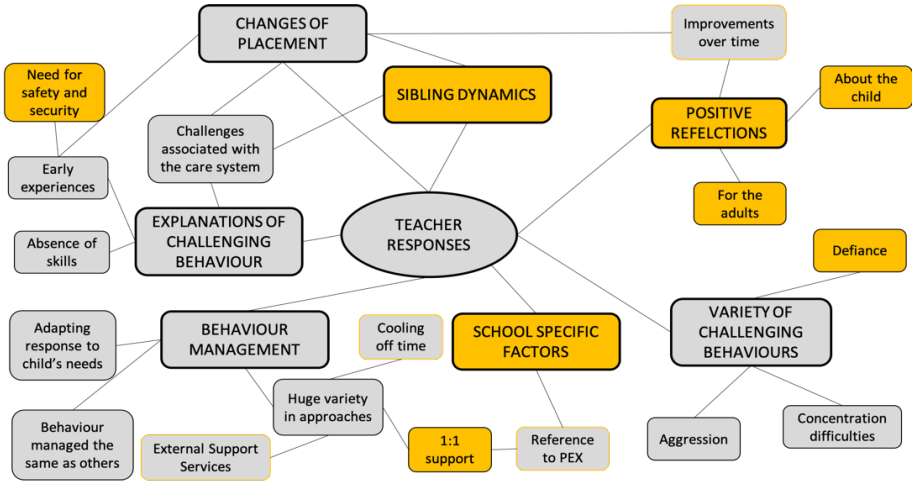

Figure P3. Teacher thematic map for first six transcripts.

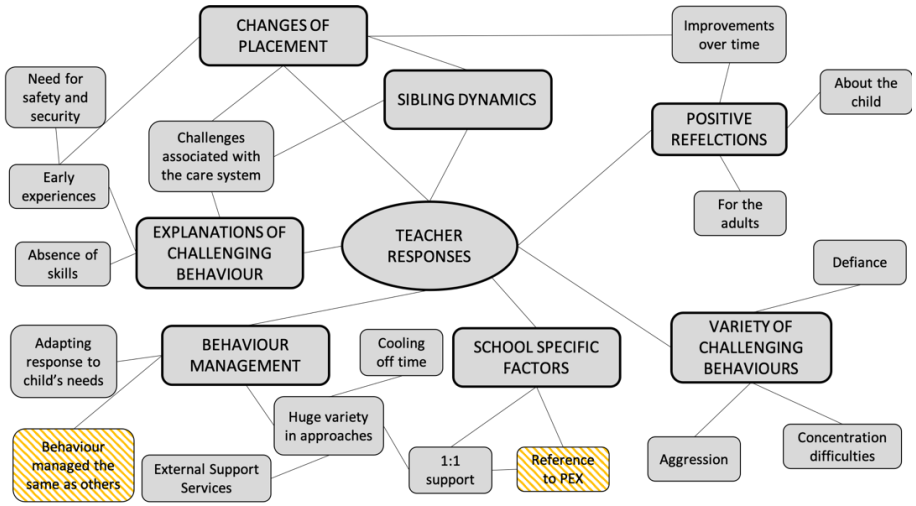

Figure P4. Teacher thematic map for first seven transcripts.

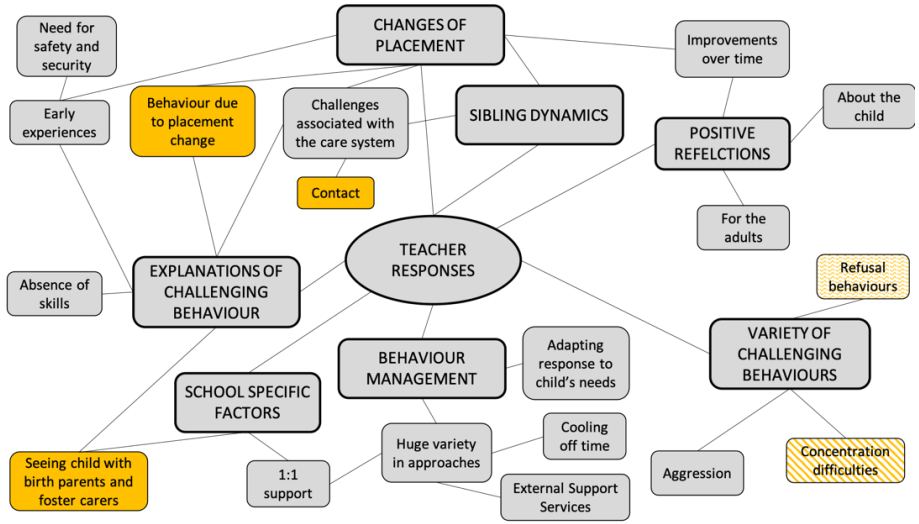

Figure P5. Teacher thematic map for all eight transcripts.

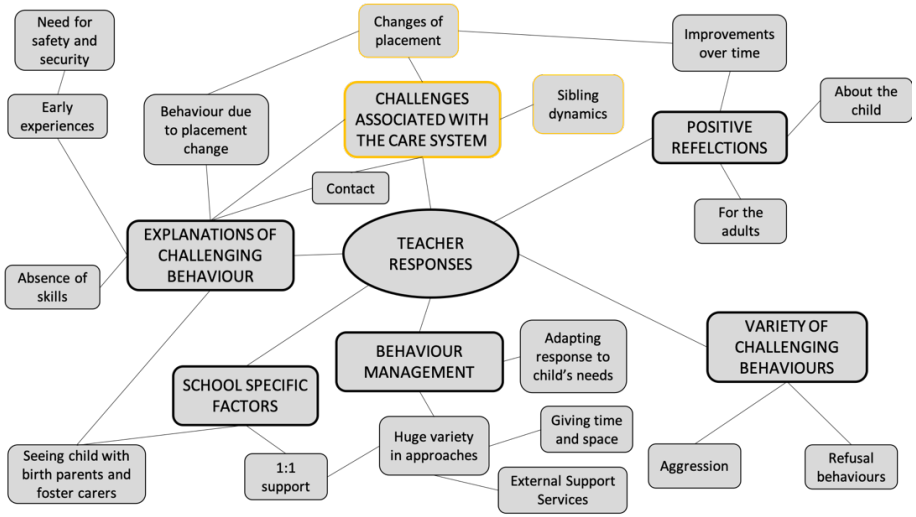

Figure P6. Teacher thematic map for all eight transcripts, version 2.

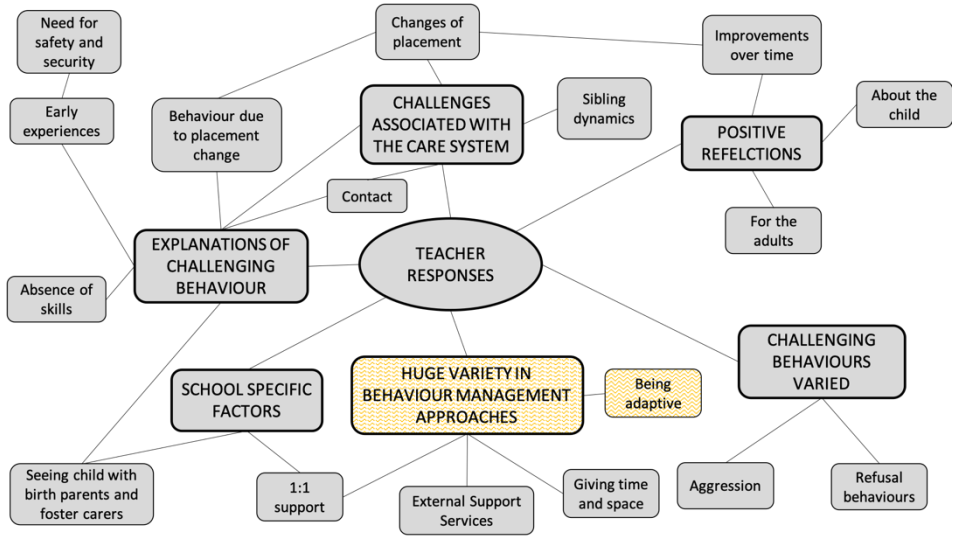

Figure P7. Teacher thematic map for all eight transcripts, version 3.

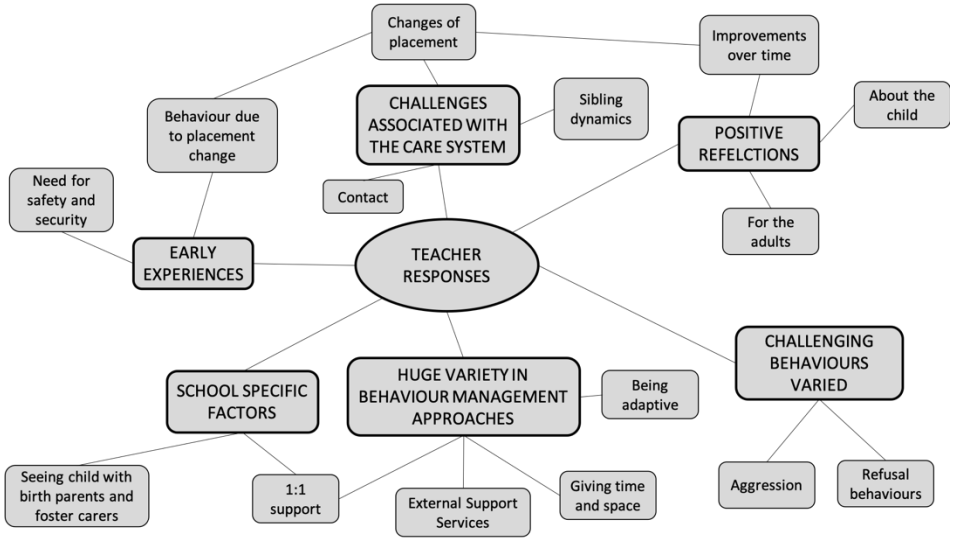

Figure P8. Teacher thematic map for all eight transcripts, version 4 (following consideration of whether themes were domain summaries).

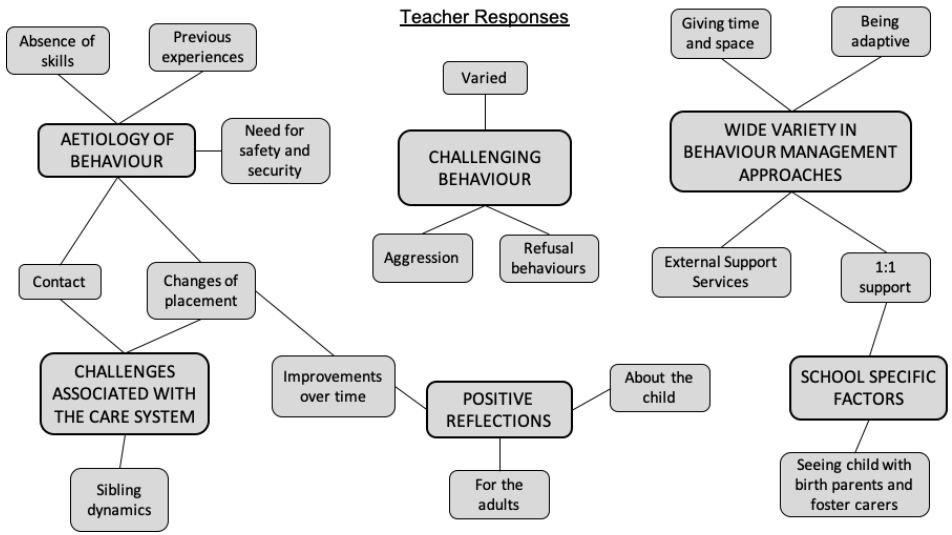

Figure P9. Teacher thematic map for all eight transcripts, version 5 (following peer supervision).

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