Participant: F7

Title: How do foster carers and teachers attribute the challenging behaviour of Looked after children?

Date: 13/12/2019

Length: 36:48

Location: Participant’s house

Interview: CFB (I)

Interviewee: Participant F7 (P)

Age: 53

Sex: Female

Foster Carer Years: 4

I: Thank you so much, I really appreciate your time. If I could ask you to start off with – generally we’ll just have an informal conversation, but to start off with I just have a couple of key demographic questions to get out of the way, if that’s ok? So, if you could let me know your age, gender, and years’ experience as a foster carer.

P: Ok, so I am 53, and I’m female, we’ve been foster caring for 4 years as a foster carer.

I: Ok, yes, and I know you were telling me a little bit before about your background and you experience, so do you mind just telling me a little bit about that.

P: Yes, so I was a primary school teacher for, I dunno, 30 years and also a gestalt family therapist, and then worked as a learning mentor for six years before we became, just before we became foster carers, in a primary school with a lot of looked after children and children who were in need, so involved with social services and a lot of families, and I worked with their parents as well. A lot of families like that.

I: Ok, lovely, thank you. And so, the purpose of the conversation really today is to think about a primary school aged child that you’ve experienced challenging behaviour from, you said that there was perhaps one that was more in mind.

P: Oh yes, absolutely, yes.

I: So, could I ask you just to start off by describing that child for me?

P: yes, so can I use his, I’m going to use his name...

I: You can use his name; I will take that out

P: Yes, it will be easier to talk about him

I: yes, it can be quite hard to not.

P: So [child], I mean if I give you, so [child] came to us in March 2017, he had been, he was taken into care in November ’16, so just before, 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. 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 to to, that’s how he was when he arrived.

I: Gosh, and what was, how did he develop in terms of, because I imagine at first it was hard to see him and his personality, what his likes and things?

P: He, I mean apart from that y’know, he is sweet, and actually I spent a lot of time, we very much parented him as if he was a baby. So, there was, 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. And then, so we, when he would, if he wanted something he would just go “ahh ahh” or if something wasn’t quite right he’d go like that, so we tended to him like a baby, so if a baby did that you would go to them, and you would say “what’s the matter?” If a six-year-old did that you say y’know, “no don’t speak like that”. So we tended to him like that, and he calmed quite quickly and he is, he was actually extremely interested in the world, really wanted to know what was going on around him, loved the dog, loved being outside, we did lots of outside walks in the countryside just here we can walk from here just into the countryside. Loved being outdoors just in his own, at his own pace, touching the leaves, you could talk to him about the birds in the trees and just being outside, he just loved little creatures, animals. Absolutely loved it. Had quite obsessive behaviours about things, he could get very obsessed about very, y’know he had very obsessive behaviours about things. He would talk the same sentence over and over again, had the same concept about, if we were looking at a book, he liked looking at books, “is that a boy or a girl?, is that a boy or a girl?, is that a boy or a girl?” on every page – it might be a car y’know but, “is that a boy or a girl?, is that a boy or a girl?”, he would be obsessed with it. Very, *became* very affectionate, he realised that I would hold him and so I spent I would say about a year, daily, sitting on that chair and I would rock him like – he would come on to my knee and he would say hold me, and he’d come into me, so his head was here, like a baby, and I would just rock him and that would really calm him, and we did that for a long time. Until he didn’t need it anymore. And he became – fairly quickly actually – very attached to us, became able to be outside in playgrounds and not run off with anybody, he knew who we were, he knew he was with us, he didn’t, he learnt how to respond appropriately to other adults. He was always friendly, chatty, smiley, loved going out, once he was able to calm himself, he was able to enjoy the world and loved to go out places, and I mean y’know you had to watch him, because he could be a bit, yes a bit inpredictable at times. I mean “oh my goodness what are you doing?”. But he would never run off he would never be in the same, another really key feature actually remembering is that he, he would need to know where we were at all times, he wouldn’t leave the room from us for a long time and then eventually he could get that he could be in the living room and we could be in here for short periods of time. But even so he’d check out all the time. If I was cooking of something he would go “[foster carer name], [foster carer name], [foster carer name]” and actually what he wanted was just to know that I was here, a lot of that. Never, I mean never go upstairs on his own, actually all the time he was here, right at the end he would be able to do that, but “no, I’m too scared, I’m too scared, come up with me I’m too scared”. He could never be on a different floor from us. So, I mean you know we thought it was good if I was able to be here and he could be in another room playing. actually, we did, because these conservatory doors are open in the summer, most of the year really, and we have them open and he would play he’d be playing in there and we could be in here, and that was ok, but after a long time.

I: Gosh, ok. So, talk to me a little bit about some of the particularly challenging behaviours that you saw.

P: 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. He could get, he would be yes, he was unable to regulate himself so if something went slightly wrong, something in the wrong place, he would just scream. He wasn’t violent, I would not say he was violent or aggressive, there was at first actually, he would “grrr” and do that face, and do that, he never hit us, he never physically hit, he’d be mortified if he hurt us, he would not want to do that, but his reaction was “grrr”. Y’know. For 6, for about 6 months really. That’s yes, so that was sort of all the time, you never quite know what would happen, and he would just sort of burst into tears because something hadn’t quite happen and he would “[crying noises]”. And then the sexualised behaviours, which manifested itself, there were doing things like he would pull his trousers down, and show his willy and say “look at that, do you like that” and laugh “ha ha ha”, his play with his sister was very sexualised, sort of sitting on faces, we play mums and dads we’ll sit on faces, he would, he went through a long period of trying to squeeze my breasts, quite hard, and with a real “ugghhh” look on his face, y’know, quite frightening look on his face, and do that all the time when I was close. So he’s a child who needs a lot of care, he couldn’t dress himself, he had no idea which way clothes went on, so we were starting from y’know we had to be quite close at first, and he would, and getting out the bath, getting out the thing y’know he would do that for quite a long time. And, a lot of, yeah y’know, and then a lot of disclosures. So, all the time, which were always done quite calmly. He was disclosing things that had happened, so that is challenging, hearing that from a small child.

I: Yeah, absolutely. So, lets, taking some of the examples that you gave of the sexualised behaviours, what was your, at the time when those kind of, I guess he’s first come to you and your first seeing these behaviours, what’s your understanding of what’s going on?

P: Well, he, our understanding was that, we knew his, I mean he’d been known to social services, the family had been known to social services since he was, before he was born. And they had been particularly involved with the family for the last year before they came into care, this was when he started school, and school absolutely flagged it up. And he was actually taken into care from a disclosure that he made at school and his father was arrested, released on bail, and there’s no criminal charge because there’s no, it’s his word against the child. Father denies everything, so we knew that there had, and he, that there had been a lot of sexualised stuff at home, and the parents admitted in, once they were in care, admitted in meetings about that they had watched pornography with the children and we knew from the set up in the home, we knew that the, [child] had obviously been witness to a lot of sexualised behaviour, had been not kept apart from that. 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. Now it’s easy to say that, actually that’s hard when it’s in your own home and its 11 o’clock at night and your exhausted and he’s still doing it, and actually I found the hardest was when he was going through his few months of trying to grab me and grab my breasts, because that’s quite physical. And your natural reaction is to bat it off, is to hit it away isn’t it? that’s just anybody coming at you you would

I: Protect yourself.

P: protect yourself, and I can’t do that because I don’t want to hit him, and actually and his face would tun, and I would see his father’s face, so actually the way of dealing with it was to think this isn’t [child] this is his father. Which actually made it worse because I would whack his father, y’know his father does not scare me in the slightest, but I can’t be like that with [child] because he is just a little boy. So, what you have to do is you walk away. And that’s actually I found very hard because I would not do that naturally I would hit right back. So, y’know I totally attribute it to his past experiences. It’s not him, he’s just a little boy, poor little boy. But it’s difficult because it’s like his father is in your house at 11 at night, when your exhausted and he’s attacking you, and you have to to really be on top of that all the time. So that’s hard, so that, so y’know, I totally attribute that to what he has seen, and having to separate this little boy from what he’s doing is hard. And to believe that actually y’know what we’re doing is we are helping him, actually and actually you have to believe that otherwise you just “I can’t I can’t do this”, actually y’know you have to see through it to this little boy, really needs me to not react like that to just walk away and help him see what’s normal.

I: Sounds like it’s really challenging.

P: Its extremely challenging.

I: and as you said, that kind of what you were saying leads onto that other point you made about it was being it was very 24/7 in terms, of...

P: Yeah, yeah

I: And how, you talked about him kind of needing to be in the same room, what was your understanding of why that was so important to him?

P: I think he was very scared, he’d, because everything in his life up until then had been chaotic and unpredictable a lot where he’d been shut in rooms in the dark with his sister, there’d been a lot of domestic violence around, he was really scared. And actually, he needed the presence of somebody who was not going to hurt him, and actually what actually and I also think even if, he just needed to know where we were even if, because he knows that he needs an adult. Y’know whoever we were he could, being on his own was too terrifying he was, he needed to see what was going on and to know that somebody was there.

I: Yeah, and how did you kind of, what was your approach to that?

P: Well, I think at very first, we just sort of took it, I mean even his sister now, who presents as being completely fine, actually she doesn’t she won’t play on her own, she won’t be in a different room now, she needs to be with us, 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, but all the time “[foster carer name], [foster carer name]” “I’m here”, so we , I would always respond with a “I’m here, I’m just cooking”, I would always let him know what was happening, so if I was in the room with him watching TV or something or playing I would say “I need to go to the toilet, I will be back very soon”. Y’know I would never just walk out. Or, if the doorbell went “I’m going to answer the door” so that he knew, if I shut him in, y’know if I strap him in the car, I would say to him, I’m going to shut the door now and I’m going to walk around to the front and I’m going to get in the car, so that he would know, because y’know if I just shut him in the car “well, what’s going on?”, and then he’d learn, I mean I didn’t do that by the end at all, but y’know at first, he needed to know exactly where the adults were and what they were doing and what would happen, and then actually he soon responded to that. Because we were predictable and we did what we said and its quite normal, he got that and so, y’know, but that’s how we did it right at the start: “I’m going into the kitchen now, because I need to get my cup of tea” or something y’know. And he would take that, so, so we did a lot of that for a long time, and then, encourage, did try slowly, I mean not at first because he needed our presence and he needed that, but after a while to encourage him, y’know saying you stay here and you carry on, I’m going to go and make dinner, and actually then he was fine, he was “ok ok” and y’know he slowly got that. 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. The other thing, the other challenging behaviour for him I’ve just remembered was actually because he’d also been exposed to all sorts of horrific horror movies nothing was off limits for this child so he was terrified of anything, so even things that for little kids would normally be fine, of course would trigger him because he’s seen everything so it would trigger him, and that was quite difficult you had to be really careful, because even, and Halloween was enormous for them, absolutely enormous, so y’know you’d just see little things that normal kids would just be completely fine, he would freak out at. Because he had seen so much, so you had to be really vigilant and keep him really safe, and we we did that and then what he learnt was, we learnt that, he learnt really about what was real and what was not real, and we were very clear about that and we had to be very clear about the tooth fairy and everything like that, they are not real because he needs to know, because if those things are real then all this other horrific stuff could be real, so you had to be very very clear and straight forward with him. And that’s quite challenging within our culture, and even at school y’know they’ll talk about all sorts of things. So, like they pretended a dragon had come to school with footprints and things, and other kids can get that and think “ahh that’s exciting”, he just completely freaked out. So, they had, so you need to tell him it’s not real, you need to tell him that you did that, but he gets it, “we’re just playing a game” and then “oh ok” He’ll get that. So all the time you had to be really aware of that, because, and that’s totally because he has seen absolutely horrific stuff, that he would talk about things, and our response was to any disclosure was always, we would just listen to him and say “oh [child’s name], that sounds that sounds horrible”, because he would say it and “I didn’t like it” and I would say “oh no that sounds horrible, poor you, little children shouldn’t see those things it’s not your fault”.

I: Yeah, yeah, gosh, that’s hard.

P: Really hard, really hard. And distressing y’know, little boy.

I: Yeah absolutely.

P: 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. And talking y’know it’s funny talking about how he was and you think “gosh yeah that was hard” and it makes me feel very sad for him, but he is he is, you meet him now and he is just gorgeous, I mean he’s still hard work, don’t get me wrong [laughs], but, he is gorgeous, he is just lovely y’know and he is not stupid, he’s he’s learnt, so any sort of academic stuff had stopped though so school was prfff, 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, but actually if you can read, you can do anything, y’know and he can write to a certain extent, so he’s about like a sort of a 6 year old reading and writing, but actually he started and he can get on and we were at a farm park recently, he was reading the signs, y’know it was amazing because when we first took him there he could barely be in the place, y’know, he could barely sort of deal with it and he could just about look at the animals, but no he was reading the signs, I mean that’s just enormous, that’s huge. Y’know. He’ll get there.

I: What do you think led to that kind of, that transformation?

P: Well, removal from the abuse and the neglect. And giving him, nurturing, clear, consistent, warm, caring, very very controlled environment, safety, warmth, predictable, 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. You have to remember that he’s, pfff, but you could see his brain growing, y’know his brain was in fear mode, trauma mode and it’s not anymore which is lovely.

I: that is lovely. Can I just ask taking us back to, about needing to be in the same spaces the same rooms for reassurance, how did that translate to kind of bedtime and sleeping and room arrangements and that ....

P: Well he is in his own room, and it was very clear that he and his sister were in separate rooms to keep his sister safe, they found that quite hard because that was not the...they had come from a place of you just fall asleep, his parents would say, “oh he never went to sleep, he never nodded off so we just kept him up”, which was part of the problem. So we kind of think, from what he says, he did have a bed, but he normally just slept wherever he feel asleep and then he would go and sleep – there were mattresses all over the floor and he would go with his mum or his dad or just on the floor – we just don’t know. So, to have his own room, he liked it, he liked that that was his room, but he found it extremely difficult to go to sleep. 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 – he loved that and y’know stories was, because all the time we had his little sister, so remember there’s this, and then there’s also his sister who we’re caring for – so he would, he would y’know, it took me persistence to get, I mean he didn’t know what books were but he worked out that books were stories, but I wanted to read to [sister] so y’know he would sort of be around. But we got it so that he would come and sit and read and that was fine, eventually. And then actually fortunately [sister] would actually go to sleep so she would sort of go to sleep and then it was incredibly difficult at first and he found it very difficult. So we would go in. there were lights on y’know, the lights were dimmed, but the lights were on, and I would say y’know, if I was in the room he wouldn’t settle, he couldn’t settle if I was in the room, that was too much, so I would say I’m going to sit outside and I’d sit outside the room and he’d keep coming and looking at me, and actually, y’know just a lot of reassurance and then it got to he point of saying “ok, I’m going to go downstairs now, and you’re going to stay upstairs, and that’s it” and for a long time he would just run about upstairs, me going up didn’t really stop that, but for a long time we did that and he would just run about. And then he got cross, sometimes, and eventually he would get cross and he would scream. He never, interestingly, he’d never come down the stairs he’d stay at the top screaming and throw things down the stairs, and at that point I would go up and get him back in to bed “this is why you’re going”, and it took months, and I really felt it was actually the sheer force of my will [laughs] you’re a little child, you need to go to sleep, y’know, this is what is happening, and it took a very long time. But he did it, and actually we got to the point of, he, he would go up, we’d do all that, no he’d go to bed, he liked, he got to the point of what he loved doing, he ended up loving books, absolutely adoring books and he loves encyclopaedias with lots of pictures in y’know, and he would sit and he’d have his reading time so I would read to him, then he’d sit on his bed, *on his own*, and I’d come downstairs and he’d would look, he’d pour for hours, I mean he could do it for hours but I gave him about half an hour just looking at the pictures, and he’d create stories, it was his thinking time. And I’d go up take the stories off, give him a kiss and go downstairs and he’d go to sleep. That y’know, but that took months and months and months of making him realise I meant it, by just sheer persistence, just sheer, this is what we’re going to do, you are safe, nothing is going to happen, nothing is going to change, y’know, nothing is going to hurt you, and just, y’know he has to experience that I think, y’know. And then of course he felt better because he was sleeping, he felt much better and he’d stopped having the bad dreams and he would sleep through. Once he was asleep that was it! And he’d sleep through till, at the weekends, half past 8, 9 in the morning – it was lovely, his sister would not, but there we are. 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. So, we’d done the goodbyes, and it was a long way away and we’d done the goodbyes and then it fell apart, it was awful. So we said, well she has to come back here, because we are, she can’t go somewhere else, y’know, so she came back here and actually that altered his sleep, he found it, it was interesting he found it quite hard after that point to nod off. He would still do the, he’d go for hours reading his books. And then actually y’know I’d take his books off him at sort of half past 8 and say night now you need to ... and he’d still lie awake there, not distressed, but awake, but actually because he knew where we were, and he could hear, he liked to hear us around, he liked that.

I: what do you think it was specifically that led to that change?

P: I think he was triggered by [sister] coming back and that triggers all sorts of past stuff for them and they both regressed being back together, and as I say their plan is to not to grow up, to have separate families, so he has now moved on, so actually fortunately not very far away, but with and they can still see each other, they can still see each other regularly which is really important, but actually their needs are so great, and they just trigger each other all the time. And he particularly really needs to be the only child with just everything for him.

I: yeah, no, that’s one of the tricky parts that isn’t it.

P: Really hard, it’s a really hard call to make but that.... y’know he is, as these things go, he has come from an exceptionally traumatised background, for 6 years he was there at home, it’s a long time, it’s a long time, and it takes a long time to recover from that, if you ever do, but he is, he is, because of the work that we put in for the years that he was with us he is now, because when he came it was like “he’ll have to go into residential” and all of that sort of stuff, I mean really, but we said no way, he’s a little boy he needs to be in a family, and of course he must be in a family now, y’know he is hard work. But he does need to be on his own and he functions better, when he can just do things at his pace, and he doesn’t have to worry about what [sister] is doing.

I: Yeah, no I can understand that. Ok. Is there anything that we kind of haven’t really talked about or covered that you think would be particularly helpful to talk about at all.

P: I think just the experience of having him is just, it was really, I mean it was hard work but actually it was sort of like living, I mean because my background in the psycho- in the therapy stuff it was like living it all the time, and actually seeing all this stuff that you’d read in textbooks, actually happening to this child and seeing the effect of nurturing, consistent, warm, safe care environment from 2, my husband was very much a part of this, from 2 y’know, 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.

I: Yeah, that’s really lovely.

P: Yeah, and certainly you see how the effect of trauma, how it stopped everything, it just stopped his brain being able to grow because he just had to survive, so that year that I spent rocking him it was like rocking a baby y’know you’re just doing that all the time and he just fell into that and would seek it, it got to the point where he would seek it, and actually y’know that’s, that was, seeing the value in that actually, realising that this is the most valuable thing I can do for this child at this point was really key in believing that this will make a difference, this will make a difference, and it did. Y’know it did, but that’s erm...

I: When you’re in it...

P: when you’re in it, well its tiring and its time consuming but actually it was it was what he needed and that’s fine. And not worrying about oh well he can’t read his name, well actually well no, because he’s six months old actually and that’s what he needs, and you wouldn’t expect that of a baby would you? So just keeping that in mind all the time was very helpful. 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, having to, because y’know I don’t demonise them, particularly his mother, I mean his mother is incredibly young, dominated, vulnerable victim in all of this as well, poor woman, poor little, I mean she’s younger than our big children – we have three children in their twenties – she’s younger than our daughter, and of quite low cognitive ability and y’know that’s, that’s the emotion as well and y’know even now with [sister] yesterday and how just to delight in her birthday, and just thinking, this shouldn’t be me, this should be her mother, who should be able to look after her, y’know, and there’s all of that. And the anger that you feel towards them, and the and the, but then the sadness that they’re missing out on their lovely children, y’know it’s all there all the time, there’s a lot going on, whilst you’re then dealing with these children who are just being children really who are just sort of y’know. Yeah. So yeah.

I: Ok, just to round off then, do you have a particularly, we’ve talked about lots to be fair as we’ve gone through, but in terms of positive moments, memories, things that you’ve seen or they’ve said, something in particular that stands out.

P: Positive?

I: Yeah.

P: oh, with [foster child], oh, him going upstairs to get something from his room, that he wanted for him, on his own. That’s amazing. Erm, him saying to us, [foster carer name], him saying I think - it was in the context of him talking with his friends at school. I don’t know how it came up because y’know they were talking but about a little girl who at bedtime who had a shower with her mum and that’s fairly reasonable when you're five. But obviously for him, ffff, where you have to be so clear about things that were safe and all the rest of it. Him saying to me “[foster carer name], I think it’s alright for little children to have baths with their mum and dad, as long as it’s just fun and all the rude stuff doesn’t happen”. Now, if he can say that and know what that means, which he does know what that means, he can then have life can’t he? He knows what the boundaries are. He knows what happened, he knows what shouldn’t happen, he can do that, that was just enormous actually, and him verbalising that to us.

I: And that because it’s not just, he’s been able to make that distinction between that kind of grey area of, because having a bath with parents is a kind of grey area. It’s not like he’s saying it’s not “I know that it’s not appropriate to have baths with mummies and daddies” he’s saying that actually there is this area in between and that’s, yeah that is huge.

P: Huge. Him going trick or treating with his school friends last year, around the village where he’s at school, he was at school. And just enjoying it, just being able to do that, with us, y’know with me, and just taking it for what it was and not being totally freaked out, and then not having nightmares for weeks after. That was huge, that he could just be part of a normal life, without it, the triggers just overwhelming him.

I: That’s incredible.

P: That was amazing, yeah, that was lovely, that was really lovely. So yeah.

I: That’s so nice. Well thank you so much for sharing with me, I really appreciate it. If there was nothing else that you wanted to share...

P: No no no I think that’s fine.