

Life story approaches and relationships within residential child care: A practice reflection

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Abstract

Residential child care creates a world of opportunity. It is unique and dynamic and often helps shape and direct the future for many children and young people. Relationships are key, they are multi-layered and adaptable, moulding to the children/young people and their individual needs. The use of daily life events, the rhythms, rituals and routines of the house help to create a safe space where the journey of therapeutically exploring the life story can evolve. In this article the author uses a case study to provide the reader with experiential examples, highlighting the importance of these every day interactions and life events to build and sustain authentic relationships within the residential child care environment, demonstrating the impact of such relationships in supporting a young person's exploration of their life story. The recognition that life story work is often a process and not a specific task allows the residential practitioner to consider their role in this journey as adaptable and helps to identify greater opportunities for relationships to be enhanced.

Keywords

Relationships, life space, life story work, residential child care;Article

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Introduction

Getting to the end of a 1000-piece jigsaw puzzle and discovering that there are pieces missing is gut wrenching. Hours, maybe even days have been spent carefully selecting the pieces, turning them around to make sure they fit, moving those that feel wrong to create space for the correct piece. A long and often concentrated effort is required, where we try to make sense of the shapes, colours and sizes in front of us. Where do we start? Which piece are we drawn to most? These questions are fundamental in the world of a child/young person who has suffered trauma. Parts of their life they don't even know happened, yet have impacted their journey, pieces of the puzzle that are unclear but live in their memories, stories they have heard but can't place and suggestions of events that have taken place but hold no meaning. Life story work helps to put all these pieces together, helps the child/young person to make meaning from their journey, understand the context of decisions and the impact of these and helps them to form an identify of themselves in the past, now and for the future (Ryan and Walker, 2018).

In my 14 years' experience within the field of residential child care in Scotland it has become clear that relationships are the key ingredient to supporting children and young people with experience of trauma to recover, grow and develop and to hold meaning and understanding to their lives and their journey. These relationships must hold substance, be demonstrative of an emotional attachment, they must be reciprocal, and they must evidence mutual respect and understanding (Li and Julian, 2012). In order to be successful in carrying out programmed work with children and young people as a form of intervention, developmental relationships require to be present. The presence of such relationships is deemed to '...have lasting influence on long term outcomes, including social skills, emotion regulation, conscience development, trust in others, and general psychological well-being' (Li and Julian, 2012, pg. 158). Life story work is often used as a therapeutic intervention to support the child's development and understanding of their inner world and how this relates to their perceptions of their reality (Rose and Philpot, 2010). It requires a relational

approach where the relationship between practitioner and child/young person is significant (NICE, 2010; Buchanan, 2014).

As a residential child care practitioner, I place a great deal of value and importance upon relationships. My experience has led me to develop an understanding of the power of relationships in terms of connections and the level of influence this can have when supporting and encouraging others: '...a relational approach offers hope for a different future... one in which the relationship is considered central to growth and development' (Garfat, 2003, p. 5). Using life story work is helpful as one of the tools that can be used for relationship building.

Delivery is vitally important. Garfat (2003) notes that when involved in an activity or intervention with a young person, the process by which you deliver and engage has lasting implications for the outcome. Not just in that moment, but over time, it can assist in the forming of developmental relationships between residential child care practitioners and children/young people. Sharing a moment, an experience together helps to create social connections and helps us understand one another and our thinking. Children who have suffered trauma and adversity have often built protective barriers around themselves, meaning that they are less open to relationships and more cautious of the intentions of adults. Their ability to form attachments can be hindered and they often struggle to emotionally self-regulate. Every interaction a practitioner has with them helps to break down these barriers. If those interactions can be carried out in a way that feels safe and holds meaning for the young person, that process can help reframe their view of the world and allow for them to enter the process of healing (Rose, 2012). Life story work can create many opportunities for meaningful interaction.

Theories of relationships are long withstanding in the world of residential child care. Vygotsky's social interaction theory supports the argument that interactions with others and being involved in mutual activities with those who have a greater knowledge or skill set can help the development of cognitive skills and enhance the child's social development and growth. Vygotsky referred

to this as scaffolding (Daniel, Wassell and Gilligan, 2010). The importance of having a more experienced other holds close links with life story work in the sense that the relationship and shared experience influences the outcome and the cognitive understanding experienced by the child/young person. Life story work is activity based and involves participating together (Ryan and Walker, 2018). It requires to be tailored to the needs and abilities of the individual; therefore, the practitioner must have a coherent understanding of the child, their history and how they currently make sense of this (Baynes, 2008). With this in mind, it could be argued that residential child care practitioners are often ideally placed to carry out these therapeutic interventions.

Residential child care settings offer opportunities for workers to get alongside the young person. This allows them to engage in everyday events and experiences, opening the relationship up to effective use of therapeutic interventions such as life story work. Residential child care practitioners should consider and explore ways in which they can enhance the opportunity for such interventions that will support the development and growth of the young person (Smith, 2015).

The social pedagogy approach does just this. It has evolved across many European countries as a holistic profession concerned with social education in its broadest sense. It can be suggested that the very essence of social pedagogy is about being with others, building relationships, being present, being genuine, empowering, initiating learning, skill development and ultimately about using oneself to influence and simply be (Smith, Fulcher and Doran, 2013; Bird and Eichsteller, 2011). Social pedagogy is about 'how' things are done not 'what' is actually done.

'This perspective of social pedagogy means that it is dynamic, creative and process-orientated rather than mechanical, procedural, and automated. It demands from social pedagogues to be a whole person, not just a pair of hands' (Bird & Eichsteller, 2011, p. 9).

This type of approach to care lends itself well to working within the lifespace. Creating an environment within residential child care that is filled with safe and authentic relationships where life story work can evolve.

As a practitioner in Scotland, I have many experiences of working with children/young people who have been identified as being suitable or appropriate to begin life story work. I have watched it unfold successfully for some, but for others, I suspect it may only be a distant memory that holds little meaning. In the following section, I describe one of those experiences and provide some reflections on the meaning it held and why.

The story of C

It is July 2011, and I am supporting a young girl aged 11 (C) to get ready for her Social Worker visiting. I have been working with this young girl for three months and this is her second worker throughout this time. She tells me that she has had so many, that she can't remember them all but often recounts stories of her favourite. It's clear from her stories that she doesn't really understand why he can no longer work with her as she has previously seen him visit other young people in the house. This was therefore yet another experience that contributed to her thoughts and feelings of rejection and abandonment. The intention of the visit was to begin working on her life story book. This was a decision made at a recent meeting by a team of adults involved in supporting her care. It was envisaged that the social worker would speak with the child's mother to ascertain key pieces of information, photographs and stories that C can place within a workbook as a way of helping her understand her story and form her identity.

As we made breakfast together in the kitchen, I found myself working hard to encourage a bit of a smile and some excitement from C to take part in this activity. She loves arts and crafts and we had just bought some new materials that I suggested she could use. I felt excited for her, but I could see in her eyes and by the way she was picking at her favourite cereal that she wasn't sharing my excitement. She is a young girl who, by nature, wishes to please people and

will do anything to avoid disappointing those around her. So, when the new social worker arrived for their third meeting C went off to the lounge, where everything was set up and spent the next hour working away on her book.

At the end of the session, I excitedly asked her if I could see what she had done. She passed the book to me and talked through each of the completed pages, explaining the reasons for those which had been skipped. I told her it looked great and she smiled, happy at my acknowledgement of her work. I spoke with the social worker who felt that the session went well and advised that they had arranged to meet the same time the following week. However, my stomach was in knots. Something just didn't feel right. I knew deep down that getting the answers to some of the questions that C had would help her process and understand her journey, but I also knew that this wasn't the way to do it. The rest of the day goes by without any further mention of the book and as C went to bed that night, she asked me to keep it for her in the office as she was worried about spilling something on it. As she headed off to bed, I knew that the worry wasn't because she felt it was precious or valuable but more about upsetting the adults who had decided that this was a good plan for her.

Three months isn't a long time to get to know someone who you work with, well at least not when you are a busy social worker who sees a child once, maybe twice a month. However, as a residential child care worker, you spend five days per week with that person, in their house, making them breakfast, running them baths, washing and ironing their clothes, playing board games, watching TV, baking, going to the shops for groceries and generally living life alongside them; those three months can feel like you have always known each other. Residential child care can be just that. Not just for the children and young people but also for the practitioner. The setting brings a whole different dynamic to what we understand about a workplace. The rhythms, rituals and routines that are found within the house help set the culture and create structure to the way in which day to day interactions occur. The predictability of this creates a sense of security that allows for the children/young people to begin to feel safe in the development of relationships (Smith, Fulcher and Doran 2013).

Knowing where to begin, which questions to seek the answers to first, how to plan the process and when to improvise stems from relationships. In C's case, it was about knowing her, knowing how she thinks about things, how she processes, what upsets her, what makes her smile, what she needed to know and what purpose she thought it would serve. Just as important for me though, is knowing yourself – how does the young person see you? What do you bring to their life? How can you support their meaning making? What influence do you have in assisting their processing? How can you shape this journey for them in a way that helps them manage the difficult parts and utilise the growth elements? As a residential child care practitioner, working in the life space you do this every day. However, on a life story journey I needed to be open to the impact this therapeutic journey may have on my relationship and also about how to use the relationship to enhance the outcome for C.

C needed some creativity and thought put into her life story book. She needed to be supported in this journey by those who knew and cared for her and would be there day after day helping her process the information she was learning and the feelings and emotions she was experiencing. She needed relationships to be the focus of this experience. Recognising that the process of creating a life story book as conceptualised during the review meeting wasn't adding anything to C's experience, myself and her case team decided we needed to do better. The ideology of life story work was developed. We set about looking at how we, as her direct care team, could create the opportunity to embrace this, supporting C to consider what she wanted/needed from it. What were the questions she needed answers to? What were the memories she couldn't quite recall? And most importantly how was discovering all this going to help her move forward? The focus of our approach was helping C to lead the way in uncovering her journey and supporting her to attribute context to her meaning of this (Baynes, 2008).

The Common Third is central to social pedagogic practice. It describes the use of activity to enhance relationships between the practitioner and the child (Bird & Eichsteller, 2011). In order to support C to benefit from her life story work we

adopted this concept and encouraged exploration of her past world throughout her present. We purposefully used the life space as a means to share experiences such as games, puzzles and mealtimes to create opportunities to identify the questions that C sought answers to for her life story book. We then incorporated the revelation of these into daily life (Smith et al, 2013; Garfat, 2016).

C had mixed memories about her various placements. She often questioned what age she was when she lived in previous foster placements. With support from C's social worker we established a timeline. Our knowledge of C and her enjoyment for adventure and surprise gave us the idea that we could take her on a mystery tour, uncovering the journey of her placements and creating a photographic trail of this. C loved it – the journey and visits to all her previous houses and local communities reignited memories, some of these were happy and some were difficult to process but they gave us the next step. More questions arose and C was beginning to make sense of her story in her own way. She often revisited parts of it after some contemplation and as she grew older, she began to attribute new meaning to the events and memories that she determined to be key.

C required support to cognitively process the information she was obtaining. The adults around her understood C's level of cognitive functioning and therefore could tailor the supports required. By scaffolding this learning in a way that C could process cognitively, secure attachments began to develop. As practitioners we needed to demonstrate an understanding of C's zone of proximal development in order to ensure we created opportunity for her to grow and develop her own understanding (Daniel et al, 2010). This required skill in terms of our knowledge of self and our ability to make use of our reflexive selves (Gardner, 2014). The opportunity to enhance everyday experiences and rituals into meaningful moments is what places residential child care in a novel position to therapeutically engage a child/young person in life story work.

C was 18 years old when she left our care. The young girl who initially felt abandoned and unloved had embraced her story. The impact of her early life

experiences remain to this day as she enters new relationships, but her resilience and cognitive understanding is much greater, offering her the ability to embrace and respond to these challenges. In our view, the meaningful life story work she did with us contributed to this. C's life story work continued throughout her time with us. C was fortunate; all the key members of her case team remained in the house and the stability and continuity of that experience, sharing memories and the meaning making of these grew and developed supported by adults with whom she shared real meaningful relationships (Rose, 2012; Ryan and Walker, 2018).

Conclusion

Residential child care in 2019 is an evolving practice. The profession in Scotland is growing and developing with greater knowledge and understanding about the impact of experiences within this setting on the future outcomes for the children/young people. Skills are being developed and enhanced and workers are expected to take on a more therapeutic approach to their role than ever before. Residential child care is becoming more about nurture, hope, opportunity and experience than its historical platform of the traditional care home; a place where basic day to day needs were met by the adults working in the home and any notions of 'treatment' was considered beyond the scope of their role (Smith, 2015).

Relationships impact our lives on so many different levels. Every day they influence our decisions, create opportunities, impact our emotions and support us through life. Young people living in residential child care experience a variety of relationships that are often inconsistent, making it difficult for them to develop a secure base from which to build positive attachments (Buchanan, 2010; Rose, 2012). However, as a residential child care practitioner it is important that we acknowledge the influence we have in helping to shape those fundamental developmental relationships for our children and young people. It is our task to create environments in which they can explore themselves, their stories, their relationships and question their understanding and development.

Life story work can be used as a therapeutic tool to support a child/young person to make meaning from and share their story with others and it can be incorporated into daily life. It is both demanding and rewarding, for practitioner and the child/young person. You can use your very being to embrace the relationships and create key opportunities for exploring each life story. 'Don't wait for the perfect moment, take the moment and make it perfect' (Anonymous). Residential child care offers an opportunity for practitioners to get alongside children/young people on every level. Make sure you make the most of these situations. Be creative & aspirational in your approach. Look for moments and then seize them. Everyone will reap the benefits.

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About the author

A graduate of the University of Glasgow, with an MPhil in psychology, Elaine Hamilton has 14 years' experience working at all levels within the field of residential child care, with further experience in field social work and educational psychology. Currently service manager at Nether Johnstone House residential child care services, Elaine is completing the MSc Advanced Residential Child Care course at the University of Strathclyde and is working on her dissertation on life story work within the residential setting.