Children with Problems or Problem Children?

Strategies and Policy Solutions for Dealing with Young People Who Suffer from Behavioural Challenges

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Co Founder of The Family School
Children with problems or problem children?

Context

when does ‘go away’ mean ‘I need you’?
The most vulnerable pupils.

- Three quarters of parents of children with a mental health problem seek help
- One quarter of children get help

- 4x more likely: born in poverty

- 7x more likely: special educational need

- 2x more likely: be in care

1 in 2 excluded pupils with a recognised social, emotional and mental health need (SEMH)
99% of excluded pupils leave without 5 good GCSEs including English and maths.

1 in 2 excluded pupils immediately NEET after GCSEs.

85% of children in criminal justice system were excluded.

99% of excluded pupils leave without 5 good GCSEs including English and maths.

The lifetime cost to the state:
- £370,000 per pupil
- £2.1bn officially excluded
- £20bn+ unofficially excluded

Non-excluded
Excluded

Serious mental ill health (Public Health England, 2014)

85% of children in criminal justice system were excluded

Prisoners who were excluded more likely to be repeat offenders – (MoJ, 2015)
Children with problems or problem children?

Help for schools
Uncertainty about the reliability and predictability of the world

Distrust and suspiciousness
Social isolation

Difficulty attuning to other people’s emotional states

Difficulty with perspective taking

Problems with boundaries

Lack of mental health support
Our work with Schools

• Education for Wellbeing RCT
• Mental Health Services and Schools Link Programme (CASCADE)
• Peer Support for Children and Young People’s Mental Health and Emotional Wellbeing Programme
• Mentally Healthy Schools Website
• Schools in Mind Network
  
  schoolsinmind@annafreud.org
Mentally Healthy Schools goes live

- The main aims of the site are to:
  
  - Improve school staff’s awareness, knowledge and confidence in promoting and supporting children’s mental health and wellbeing in their local areas.
  
  - Help school staff more easily find and embed trusted teaching materials, reliable programmes, practical resources and key guidance to promote children’s mental health, develop social and emotional competencies and improve early/effective linkage to help.
  
  - Increase school staff’s understanding of local and national resources and where they can source help and strengthen links to appropriate help for pupils and their families.
Inappropriate / disturbing / challenging behaviours can be interpreted as a symptom or communication of an underlying need or difficulty. In order to address such behaviours we must address these underlying needs / difficulties. It is crucial to identify, understand and then address/support the underlying factors that impact on children and young people.
The majority of inappropriate / disturbing / challenging behaviours can be avoided or at least significantly reduced and managed through proactively promoting and supporting positive social, emotional and mental health. The potential implications of unmet SEMH needs for education settings, individuals and their families are extreme.
Due to the complex nature of difficulties with SEMH, measuring the impact of SEMH interventions is challenging. Whilst an individual’s behaviour may be measured as one externalised indicator of their social, emotional and mental health, a true measure can only be gained through assessing the condition of their interrelated underlying needs / difficulties. A range of specific quantitative and qualitative measures can be employed in order to do so.

1) Taking a **snapshot** of well-being across pupils
2) **Identifying** those who might benefit from additional support and
3) **Evaluating** the effectiveness of that support.
In line with the government’s priority to increase access and availability of mental health and wellbeing support for children and young people, the new Education Mental Health Practitioner (EMHP) role is an exciting opportunity to deliver evidence-based early interventions for children and young people, working across both educational settings and healthcare sectors in England....
Complex Behaviours where regular rules and sanctions do not work

“Conduct disorders are characterised by repetitive and persistent patterns of antisocial, aggressive or defiant behaviour that amounts to significant and persistent violations of age-appropriate social expectations” NICE
CONDUCT DISORDERS

- Conduct disorders are the most common reason for referral of children to mental health services.
- They have a significant impact on quality of life for those involved, and, in the case of early onset (aggression at three years of age) outcomes for children are poor.
- Many children do not receive support because of limited resources, high prevalence and difficulty engaging some families.
- Early effective intervention is particularly important: recent research has established a neuro-developmental basis for this finding.

The essential features of Conduct Disorder (CD) involve “a repetitive and persistent pattern of behavior in which the basic rights of others or major age-appropriate societal norms or rules are violated”, resulting in a clinically significant impairment in functioning.
How might Malachi’s exposure to physical abuse have altered how he processes emotion?

- Physical abuse is associated with increases in brain electrical activity when processing angry cues – this is associated with hyperactivity of the amygdala – a key brain region involved in processing threat.

- Malachi may have developed a greater level of hypervigilance – scanning the environment for emotional cues. Specifically, he is likely to have shown a rapid processing and sensitivity to angry faces and greater difficulty to disengage from these cues.

- This was probably an adaptive response in his chaotic home environment and kept him out of danger….but may have made it much more difficult for him to concentrate and engage at school, and more likely to develop violent behavioural problems in adolescence.
Increased right amygdala reactivity and increased bilateral anterior insula reactivity to angry vs. calm faces in children exposed to violence.
EEG study of the responses of maltreated and non-maltreated children to viewing an angry face (Cicchetti & Curtis, 2005 *Dev. & Psychopath.*)
Children

Soldiers

Amygdala

Anterior insula

McCrorry et al., (2011)

Wingen et al., (2011)
Powerful emotion
Poor mentalising
Inability to understand or even pay attention to feelings of others
Others seem incomprehensible
Frightening, undermining, frustrating, distressing or coercive interactions
Try to control or change others or oneself

Vicious Cycles of Mentalizing Problems
What works

Building Executive Function Skills and Attention Skills
Parent Coaching - Restoring trust with parents and pupils
Home and School joint approach to trauma and anxiety related behaviours
What works at The Family School

Weekly parent coaching programme based on Executive Functions curriculum
Weekly family learning programme to develop interpersonal and social interaction skills
Pairing programme with sociable peers “living proof”
Academic tutoring to enable students to express their needs in appropriate ways
Attention training drills using sport and technology-SMARTGYM
Neuro Sequential

B Perry
Importance of Executive Function Skills for Higher Functioning

Children and young people with conduct problems have been shown consistently to have poor tested executive functions (Ishikawa & Raine, 2003); (Hobson et al., 2011). Executive functions are the abilities implicated in successfully achieving goals through appropriate and effective actions. Specific skills include learning and applying contingency rules, abstract reasoning, problem solving, self-monitoring, sustained attention and concentration, relating previous actions to future goals, and inhibiting inappropriate responses. These mental functions are largely, although not exclusively, associated with the frontal lobes.
## Curriculum: Key executive function skills for learning and mental wellbeing

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<thead>
<tr>
<th>Skill</th>
<th>What does it mean?</th>
<th>What does it look like if weak?</th>
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<tbody>
<tr>
<td>1. Impulse control</td>
<td>Think before acting</td>
<td>May say inappropriate things and engage in risky behaviour</td>
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<td>2. Emotional control</td>
<td>Describe feelings and keep them in check</td>
<td>Can over-react and find criticism hard</td>
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<td>3. Flexible thinking</td>
<td>Adjust to the unexpected</td>
<td>May get frustrated if asked to think about something new or from a different angle</td>
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<td>4. Working memory</td>
<td>Keep information in mind</td>
<td>Can have trouble remembering instructions, even with notes or repetition</td>
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<td>5. Self-monitoring</td>
<td>Judge how they are doing</td>
<td>Can be surprised by a bad mark and get upset</td>
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<td>6. Planning and prioritising</td>
<td>Decide on a goal and plan to meet it</td>
<td>Cannot decide what is important for completing a task or a piece of work</td>
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<td>7. Task initiation</td>
<td>Take action to get started</td>
<td>May have difficulty starting work or have no idea where to begin</td>
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<td>8. Organisation</td>
<td>Keep track of things physically and mentally</td>
<td>Can lose their train of thought as well as clothing and homework</td>
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“Parent Learning: Super highway to learning”
One Degree Parent & Family hub
in partnership with The Anna Freud Centre

We see parents as partners, and know that they play a crucial role in supporting children’s learning. We understand that levels of parental engagement are unequivocally associated with children’s academic and personal outcomes. Because of this, we’ve joined forces with experts from The Anna Freud Centre to develop our multifaceted approach to giving parents tools to help children thrive.

One Degree Parent & Family hub

55% of parents have attended a Family Learning group session

90% of parents report a reduction in challenging behaviours using on the ‘Parenting Daily Hassles’ scale since attending Family Learning group sessions.

92% of parents attending Parent Learning report an improvement in attention, focus and self-regulation in their child at home

93% of parents report that weekly home learning videos, HW resources, parent workshops and clear HW policy help them support their children at home

20% of parents have attended a one-to-one consultant psychotherapy session

60% of parents take a weekly food bag from the ODA food store

Essential Support
• Weekly Food Bank
• Debt and financial advice
• Advocacy and mediation
• Career support

Family Learning Group
• Building a community and support network
• Parents visiting lessons to observe children in class
• Solution-focused weekly group meetings

Parent Psychotherapy
and Consultation
• Free one-to-one brief therapy sessions with a consultant psychotherapist from the Anna Freud Centre

One Degree Parent and Family Hub
in partnership with

Parent Coaching
and Education
• Expert content on developing executive function
• Precision coaching model to empower parents with weekly action plans and practice of technique

Home Learning
• Weekly class videos
• Powerful tools: Benomi, Mathematics & Reading resources
• Parent workshops on phonics, reading etc.
Working with families in schools
CAMHS lead and School lead working together example

An Introduction to Multi Family Groups in Schools
The combination of technology with psychological and educational expertise to improve performance in cognitive abilities
SMARTGYM
Boosting cognitive abilities and attention skills using SmartGym CardioWall programmes
Training: London

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Outcome - you will be prepared to set up and run a ten week course designed to engage parents in your school

Process – you will be taught key practices that help a parent coaching programme run well in school

Content – you will be given material for the sessions and given the necessary supportive information/lesson plans

Supervision- you will be offered supervision