

Integrating family approaches:

How knowledge of ACEs, Trauma, Signs of Safety, Building Better Futures and Think Family NI can collectively support compassionate and effective practice









Introduction

This leaflet is designed to illustrate current models and approaches which are being used in the statutory, community and voluntary sectors in Northern Ireland. All have a role to play in families' lives, at different times, depending on need. They can complement each other and be integrated to inform a practitioner's 'tool kit'. The commentaries beside each image are generalised so that practitioners can apply the models or approaches to their own work.

The fictional family portrayed in the leaflet are on a journey toward recovery and a better future. Practitioners are illustrated interacting with members of the family in different settings (a school's nurture or play room; an office or counselling room in a centre; a family home) using a range of approaches and models but with a consistently compassionate, child centred and trauma informed approach. They are also observed working in partnership with each other and the family. The role or profession of the practitioners is not made explicit as the approaches and models can be used by a range of disciplines to different extents e.g. by social workers, health visitors, community psychiatric nurses, GPs, family support workers, teachers, school nurses, counsellors, youth workers or mentors.

This leaflet is not a substitute for training in each of the models and approaches; the aim is to highlight where they interlink and how they complement each other in the best interests of the family. These approaches and models should be used to inform practitioners' assessments, their direct work with individuals and families, and guide discussions in professional supervision and in decision making fora.



The models and approaches are:

- Adverse Childhood Experiences (ACEs): Using a Trauma 'Lens'
 An approach led by EITP Trauma Informed Practice Project managed within the SBNI (Safeguarding Board Northern Ireland), based upon the international research, particularly referencing the Welsh study¹. The project supports the workforce's understanding of ACEs through the application of a trauma lens, and to consider how children, families and adults may have been impacted by experiences of adversity and trauma. Using a trauma lens means: realising the potential impact adversity can have upon children and adults; recognising that behaviour can be the expression of trauma and adversity; committing to resist re-traumatisation of people engaging in our systems and services, as well as our workforce, by responding compassionately and effectively².
- ▶ Signs of Safety³ is a process model which involves rigorous and balanced risk assessment from first becoming involved with a family until the network is working well enough that social services input is no longer needed. The focus is upon the everyday living arrangements of children actively maintained and monitored within a network of the people naturally connected to them. It comes from a solution focussed approach and sets out a method of how professionals work with families and their support networks, considering harm and safety.
- ▶ Building Better Futures (BBF⁴) is an evidence informed framework for assessing and enhancing parenting capacity with families where children are in need of support or protection. It outlines core dimensions of parenting to guide practitioners' assessments and

- inform strategies to enhance parenting; offers a framework for analysing the facts and feelings arising from the assessment; and a summary of tools for gathering information. BBF aims to facilitate relationship-based, strengths focused practice; it is child-centred with an emphasis on enhancing the child's safety, identity, security, stability and lived experience; and views parenting within the family's ecological context.
- 'Think Family' Northern Ireland uses The Family Model⁵ as the framework to promote family focused conversations in families where there are parental mental health issues. The model provides a systemic approach to parental mental health issues by looking at the present (living with mental illness), looking back (at the childhood origins of adult psychopathology) and looking ahead (at needs of support, potential for recovery and the need to intervene early in terms of age or onset of issues). Everyone is affected when someone is ill; getting the balance right between mental health issues and parenting, and how they can each affect the other, is an important determinant for family recovery. So too is the quality of contact and engagement between the parent with mental health issues, their families, practitioners and services involved. Consideration of the natural support networks surrounding the family: e.g. extended family, friendships, voluntary, community sector and what professional supports may be effective, will also support individual and family recovery.

Bellis et al 2014, 2018; www.phw.nhs.wales

² SAMHSA 2014; Treisman 2018

Elia International Ltd. www.elia.ngo

⁴ EITP Houston et al

⁵ Falkov 2012



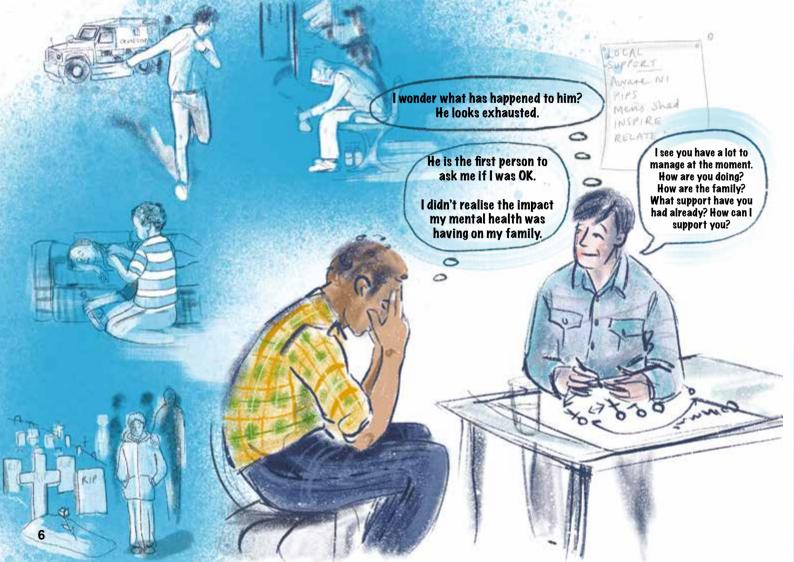
Understanding Behaviour

The picture shows the child expressing herself through a range of behaviours which the school pick up on: she is falling asleep in class; she has few friends; or when she does interact with peers she seems to bully or be aggressive.

A practitioner informed by the approaches may use elements of each of the models when working with a child by:

- creating a safe space within the setting which is calm and child centred
- providing for basic needs, nurturing the child with food, warmth and attention
- listening to the child by: observing behaviours and considering what those behaviours are communicating about what the child feels
- providing opportunities for the child to communicate through a range of mediums (play, games, stories, music as well as talk)
- communicating clearly to the child
- supporting the child to feel safe through validating their feelings and recognising their behaviour as potentially the language of trauma
- taking time, talking gently, warning of any change, sitting beside the child - not in front

- building a relationship: being open, clear, using child centred language, asking the right questions, using child centred tools, gaining a picture of the child's day to day experience and how the adults in their life respond to the child's needs
- offering reassurance: removing blame, shame and guilt, offering understanding of parental issues as needed (e.g. parental mental ill health); being committed to not retraumatising
- discovering the child's hopes and dreams through active listening and the use of therapeutic play tools and offering hope of change



Creating Hope

The picture shows the father in the family seeking help from a practitioner, describing and thinking about the adverse experiences in his childhood and adolescence, looking upset.

Using elements of all of the approaches and models, a practitioner:

- observes behaviours that indicate despair, guilt, distress, hopelessness
- creates safety by being open and transparent in language, discussions and planning, being firm but kind
- recognises when someone is in a place of hopelessness and the need to focus on the future to create hope that things can change
- creates hope through building a relationship using tools such as genograms or eco-maps, identifies strengths and finds ways of enhancing them
- persists, even if there is resistance, through demonstrating empathy, compassion
- understands how past experiences can impact upon adults and the choices that are made

- understands this can help remove blame and guilt and break the trans generational cycle of ACEs
- uses a sensitive questioning approach to elicit detail, identify exceptions and strengths and build on future safety which further builds the relationship
- works in partnership identifying small goals which are realistic and achievable
- uses skills of clarification, reflection, accurate empathy
- helps understanding of how behaviour may impact upon partners and children
- sees strength in positive coping skills, recognising difficulties and seeking support



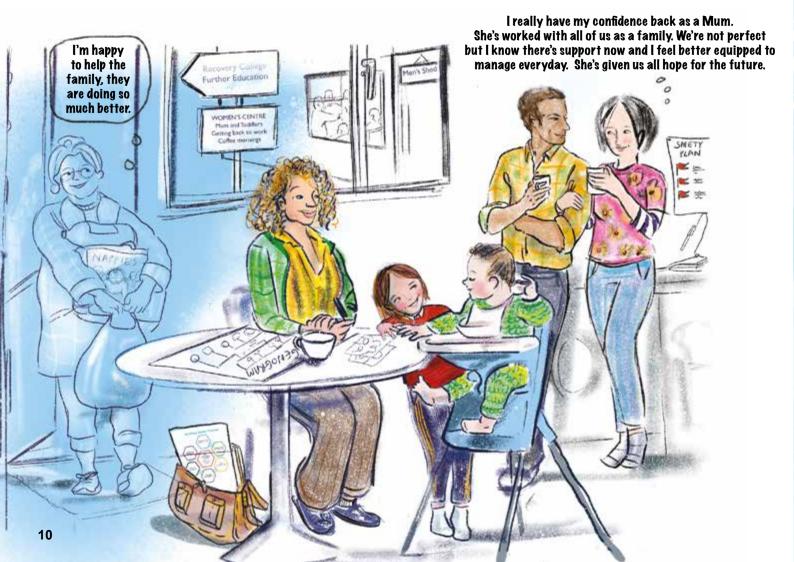
Creating Safety

This picture shows the practitioner in the child's home creating a safe space for the child to talk about her adverse experiences, her worries and her hopes using the tool of the '3 Houses'. Safety planning is illustrated too. The creative approach enhances the child's development and there is consistency in approach between the practitioner in the school and in the home.

Using elements of all the models and approaches a practitioner:

- creates safety, trust and calmness with consistency of approach, meeting basic needs first and then working up the hierarchy of needs
- is informed by child development and how the brain is impacted by experiences, relationships and environments
- recognises neglect may be experienced as a threat by the child's developing brain
- uses child centred tools and creative play to gain understanding of the child's lived experiences
- listens to the child and looks at strengths in the family, the child's hopes and dreams
- builds plans in working with the family to promote optimal developmental opportunities as well as safety
- gains a picture of daily life, identifies practical and emotional roles in everyday life to keep the children safe and well cared for and communicates this to the child

- identifies a network of people to support the parents/ carers in keeping the child safe, well cared for and with their developmental needs addressed effectively
- ensures everyone involved in the child's life agrees roles
- identifies what safety strategies the child can develop where possible, identifying who to turn to and how to ask for help e.g. agreeing with the child a safety object that can indicate a worry
- involves the child in planning
- supports the child to understand the difference between people who can offer support and those who can create safety
- supports the child's understanding of worries in an age appropriate way



Maintaining Change and Looking Ahead

On this page the whole family is together seen in a domestic and wider social system, illustrated by the signposting and others present in the home. It is not a 'happy ending' but progress has been made. Examples of networks for the children and the adults in the family are suggested which could enhance and support their individual and collective resilience.

Using elements of all the approaches and models a practitioner:

- establishes and maintains professional and social safety networks that support the children, each member of the family and the family as a whole, according to need
- communicates in a transparent and consistent way with the family (including the children) using tools as necessary (e.g. safety plans, words and pictures) and the family are supported to attend to their own communication and use such tools if suitable too
- supports parents to explore how their behaviour impacts upon the children positively and negatively
- maintains the focus upon the children's needs
- supports partners to gain insight into each other's wellbeing as well as their own
- supports hope and recovery and effective change
- ensures there is clarity of role for the family and others supporting the family (both formal and informal support networks)

- acknowledges the strengths of the family as a unit and of each of the members within it
- arranges regular reviews of safety networks, safety plans and parental health plans, adapting roles and plans as needed, ensuring they are inclusive, thus aiding communication
- prepares the family through discussing 'what ifs?' and plans for these with families, networks and professionals in order to build resilience
- carefully plans withdrawal of services with the family, redirecting to informal and community networks as appropriate



This leaflet was developed in consultation with a working group knowledgeable about each of the models and approaches. The EITP Trauma Informed Practice project would like to thank the following for their time, input and expertise:

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For further information and training contact your learning and development provider.









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