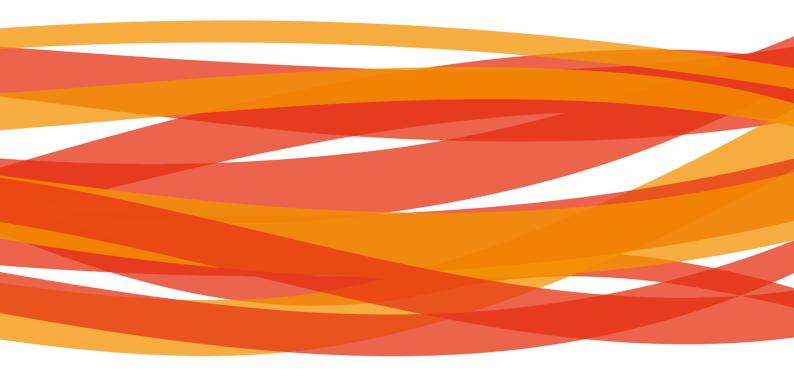


# Therapeutic interventions after abuse and neglect

A guide for practitioners and managers

Dr Arnon Bentovim, Jenny Gray and Stephen Pizzey 22 August 2018



Guide to therapeutic interventions after abuse and neglect

# Therapeutic interventions after abuse and neglect

A guide for practitioners and managers

Published by Child and Family Training, 2018

Child and Family Training, PO Box 723, York, YO30 7WS Email: info@childandfamilytraining.org.uk Website: www.childandfamilytraining.org.uk

#### © 2018 Child and Family Training

The authors have asserted their moral rights in accordance with the Copyright, Designs and Patents Act 1988 to be identified as the authors of this work.

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording or otherwise, without fee or prior permission.

Child and Family Training is a not-for-profit organisation working to promote evidence-based assessments and interventions with children and families.

Child and Family Training Ltd Directors: Dr Arnon Bentovim, Fay Berry, David Glasgow, Phil Heasman, Carol Jolliffe and Stephen Pizzey. Registered in England and Wales. Company number: 7978935.

Registered Office: 54 Bootham, York, Y030 7XZ.

Cover design: Adrian Jefferies, Defining Design, www.definingdesign.co.uk Publication development: William Baginsky, In edit, www.in-edit.co.uk

CFT\_guide\_220818\_interventions

## 1.0 Hope for Children and Families Programme

Child and Family Training (C&FT) is a not-for-profit skills development and training organisation. It developed the *Hope for Children and Families* (HfCF) approach that aims to enhance effective work to promote the health, development and well-being of children, young people and families through building on strengths and overcoming difficulties using evidence-based resources. The development and production of practice resources (tools, instruments and practice guides) to support the key processes of assessment, analysis, decision-making, intervention, review and evaluation is an important feature of the HfCF approach.

### 2.0 Forms of maltreatment practitioners meet in practice

Practitioners in social care, health, education and youth justice encounter abuse and neglect – at early stages when there are concerns about harsh parenting, disorganised attachments, early signs of neglect or children experiencing adverse circumstances, e.g. loss of a parent or a parent suffering physical or mental illness and/or substance abuse.

Practitioners also encounter established situations where different forms of maltreatment are identified: *Physical, emotional and sexual abuse, neglect or exposure to violence.* As many as 33-94% of children identified as having suffered abuse and neglect have suffered more than one form of maltreatment.<sup>1</sup> For example, neglected children may be vulnerable to sexual exploitation; sexually abused children in the family context may be exposed to intimate partner violence and physical abuse.

The extensiveness and number of maltreatment types suffered by a child or young person predicts the severity of impact on their health and development, making it more likely they will show *emotional, traumatic and anti-social responses, with associated subjective distress and anger*, including the newly defined form of *'Complex post-traumatic stress disorder '.<sup>2</sup>* **Complex post-traumatic stress disorder** (CPTSD) includes the core symptoms of PTSD i.e. re-experiencing, avoidance and hyperarousal, as well difficulties in regulating emotions with heightened emotional reactivity and violent responses, negative views about the self, and difficulties sustaining relationships.

# 3.0 The limitations of recommended therapeutic interventions

In the UK, the NICE guideline on *Child abuse and neglect* provides helpful guidance on which types of therapeutic interventions have been found to work with children and young people who have suffered **one** type of maltreatment at different stages of their development.<sup>3</sup>

In the UK and internationally, there is less guidance available on how to work with children and young people who have experienced **more than one** form of maltreatment.

<sup>&</sup>lt;sup>1</sup> Herrenkohl, R.C. and Herrenkohl, T.I. 2009. Assessing a child's experience of multiple maltreatment types: Some unfinished business. *Journal of Family Violence* **24**: 485 – 496.

<sup>&</sup>lt;sup>2</sup> Cecil, CAM., Viding, E., Fearon, P., Glaser D, and McCrory, EJ. 2017. Disentangling the mental health of childhood abuse and neglect. *Child Abuse and Neglect* **63**: 106-119; Finkelhor D, Omrod RK, Turner HA. 2007. Poly-victimisation: A neglected component in child victimization. *Child Abuse and Neglect* **31**: 7-26; McCrory E, Gerin MI, Viding E. 2017. Child Maltreatment. Latent vulnerability, and the shift to preventative psychiatry – the contribution of functional brain imaging. *Journal of Child psychology, and Psychiatry* **58**: 338-357;

<sup>&</sup>lt;sup>3</sup> National Institute for Health and Care Excellence (2017) *NICE guideline. Child abuse and neglect.* Author: London.

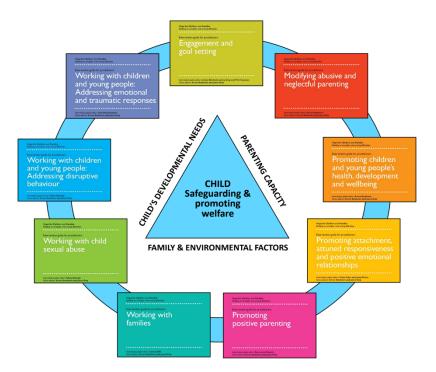
Fifteen different manualised approaches are set out in the NICE guideline. Negotiating between these in order to find ways to meet the needs of children, young people and families is challenging.

Training can be difficult to organise for organisations that have to decide which approach to choose from among differing theoretical perspectives. Practitioners working with children, young people and families who are at various levels of experience and training need to have an effective approach which can be trained widely so that the many children, young people and families who require services after abuse and neglect is identified, can be helped with an effective, evidence-based, trauma-informed approach.

### 4.0 A solution: the development of a multi-focal approach

A solution is the development of a **multi-focal approach** that can address multiple forms of abuse and neglect and the impact they have on children and young people. This capitalises on the benefits of the manualised approaches advocated by NICE, whilst affording greater flexibility to meet the complex needs of children, young people and their families.

The Hope for Children and Families Intervention Resources have incorporated common elements-therapeutic procedures distilled from the approaches recommended by NICE and other evidence-based approaches which have been shown to be effective. These elements are targeted at parents, children, young people and families. They aim to engage and motivate; provide psycho-education about the harmful impact of maltreatment; understand the historical and current stressful origins of abusive responses; interrupt and modify harmful abusive and neglectful processes, and their impact through establishing a trauma narrative, and promote positive parenting and the resilience of children and young people. These elements have been integrated into modules, and a set of intervention guides structured around the Assessment Framework domains and dimensions.



Each guide focuses on a relevant theme. It includes briefing modules, a step-by-step guide to delivering an evidence-based intervention, scripts, guidance notes, activities, handouts for

parents, and worksheets. Practitioners can choose approaches which fit with the specific needs of the children and families they are working with.

The HfCF approach equips practitioners to work with a range of situations at different levels of complexity. Practitioners can be trained in one approach – through a series of workshops and coaching sessions – designed with their organisation to be relevant to their working context. This approach can be adapted and applied to a wide range of circumstances.

## 5.0 Introduction to the intervention guides for practitioners

Nine intervention guides for practitioners have been designed to meet the common patterns of parenting stresses or difficulties, including abusive and neglectful parenting, and the associated impairment of children and young people's health and development.<sup>4</sup>

Each guide includes modules that are specifically aimed at intervening to modify abusive and neglectful parenting and the associated impairments to children. They also include modules that are aimed at improving and strengthening the quality of family life, promoting positive parenting and resilience in children. This reflects the powerful finding that whilst it is essential to protect children against abuse and neglect, building positive parenting capacity and the resilient functioning of children and young people assures a better outcome, for physical and mental health, and for breaking the cycle of abuse.

Some intervention guides relate to all children and families e.g. *Promoting positive parenting, Promoting attachment, attuned responsiveness, and positive emotional relationships,* and *Promoting children and young people's health, development and wellbeing.* They include guidance on working with situations where there has been caregiver failure to promote health and wellbeing, there is neglectful care, disorganised and insecure attachments, and difficulties in managing children's challenging and disruptive behaviour.

Other intervention guides are more specifically focused on working with children, parents and families where abuse and neglect has been identified e.g. *Modifying abusive and neglectful parenting* and *Working with child sexual abuse*.

Two guides, *Working with children and young people: Addressing emotional and traumatic responses* and *Working with children and young people: Addressing disruptive behaviour* are relevant to children and young people who have been exposed to various forms of maltreatment, and also generally for children suffering from concerning emotional, traumatic and disruptive responses.

Although distinct types of abuse are described in the intervention guides, in practice there are invariably differing combinations of abusive and neglectful parenting. For example, emotional abuse is associated with the attribution and perception of a parent that a child is deserving of punishment, harsh parenting or sexual action; neglect is associated with the failure of the parent to perceive children's physical, emotional or health needs.

When working with a child and family, following a thorough assessment, the practitioner needs to establish the profile of strengths and difficulties in the child/young persons' health and development, parenting capacity and individual, family and environmental factors.

An analysis is then undertaken regarding any impairments of the child's health and development/harm using the Assessment Framework model (the profile of harm). Intervention

<sup>&</sup>lt;sup>4</sup> Bentovim, A, and Gray, J. (eds). 2016; 2017. *Hope for Children and Families: Building on Strengths, Overcoming Difficulties*. York: Child and Family Training.

modules need to be selected that relate to this profile in order to intervene to meet the identified needs of the child and family members, whilst ensuring the child is safe.

Generally, the practitioner needs to choose modules that:

- engage effectively with children, parents and the family
- provide psycho-education to help children and parents understand the impact of harmful processes, and their origins which have had an impact on their children's health and development
- interrupt and modify abusive and neglectful processes, and their impact; and,
- promote secure attachments, positive parenting, good quality emotional and physical care, protection, and the resilience of children and young people.

# 6.0 Summary of the contents of the intervention guides for practitioners

### **Engagement and Goal Setting**

The aim of these modules is to engage with children and their families, establish a profile for intervention, goal setting, intervening and measuring progress The two modules on engagement and goal setting provide a set of steps, associated scripts and worksheets to engage children and parents, and help the practitioner to set collaborative goals in light of the analysis, establish a plan of intervention, promote a sense of hopefulness, establish how progress is to be monitored and measured, and describe the consequences of success or failure.

INTERVENTION GUIDES FOR PRACTITIONERS	MODULES
Engagement and goal setting This intervention guide describes the concepts and structure underpinning the Hope for Children and Families (HfCF) approach and introduces the initial stages of engagement and goal setting as applied to the practitioner's own case. Before commencing a programme of intervention for a child and family it is essential to carry out a thorough assessment and analysis, establishing a profile for intervention.	<b>'Engaging children, parents and families: Promoting</b> <b>hopefulness'</b> [ES-M1] begins with an initial meeting, involving the children and family: an orientation by the referring professional briefing the practitioner on concerns, strengths and difficulties, and a discussion of the practitioner's understanding of the children and family's challenges and the strengths and difficulties with which they will be working. It suggests how the practitioner can provide information to the child and family about why it may be helpful to work with the practitioner. It sets the scene for a specific discussion on goals, and how the practitioner will assess and monitor outcomes and feed this information back to the referrer.
A seven-stage model of assessment, analysis, planning and reviewing interventions in child wellbeing and safeguarding contexts forms the basis of the process: Stage 1: Consider the referral and the aims of the assessment	' <b>Goal setting'</b> [ES-M2] assists in the process of establishing collaborative goals by exploring the children's, parents' and professionals' views about goals that have arisen from the assessment, child protection or care plan (if in place), and from previous discussions.

<ul> <li>Stage 2: Gather assessment information on the child's developmental needs, parenting capacity, and family and environmental factors</li> <li>Stage 3: Organise the information using the Assessment Framework and a chronology</li> <li>Stage 4: Analyse the patterns of strengths and difficulties</li> <li>Stage 5: Make judgements based on a systemic analysis</li> <li>Stage 6: Make decisions and develop a plan of intervention</li> <li>Stage 7: Implement the plan of intervention, monitor and review</li> </ul>	<ul> <li>A child and family agreement is developed, together with a family safety plan and a management plan acknowledging how progress on achieving the goals will be measured, and the consequences of not reaching them.</li> <li>The Case-specific information record is available at www.candft.org.uk/engagement and can be downloaded for use with each case.</li> <li>Strengths and difficulties are described, a baseline systemic analysis constructed to consider processes and their impact on the child's health and development without intervention.</li> <li>The likely response to intervention is</li> </ul>
progress. The Case Specific Case Record (CSIR) is designed to assist practitioners using the 'Hope for Children and Families' resources to think carefully about and to structure their work with a child, young person, parent or carer and then to record information relevant to each of the seven stages of involvement.	<ul> <li>considered, based on the parents' capacity to respond to their children's needs.</li> <li>A focus for intervention can then be established using the contents of the intervention guides and the library of modules.</li> <li>A plan and a framework for reviewing goals, goals to be achieved, tools to measure change and progress are agreed with the children and family.</li> </ul>

# Promoting the development of children and young people and modifying harmful parenting responses

Four intervention guides consider work with parents in addressing different areas of parenting:

- Promoting positive parenting
- Promoting children and young people's health, development and wellbeing
- Promoting attachment, attuned responsiveness and positive emotional relationships
- Modifying abusive and neglectful parenting

Modules in these guides specifically focus on providing an understanding of the historical and familial stresses associated with abusive and neglectful parenting; the impact of abuse and neglect on children's health and developments; and, interrupting and modifying abusive and neglectful processes, modifying negative perceptions of children, and improving the standard of care in a neglectful household.

There are an equal number of modules that focus on helping parents to develop skills in positive parenting, promoting more secure attachments through one on one activities, and helping them to promote their children's play, language and educational attainments.

The parenting approaches can be adapted for foster, adoptive, and residential carers working with children and young people who have suffered significant adversity, abuse and neglect.

GUIDES FOR PRACTITIONERS	MODULES
Promoting positive parenting	'Understanding children's difficult behaviour' [PP-M1] focuses on understanding the causes of difficult behaviour, factors which contribute to it, how these factors link to the family and

This guide includes six	caregiver; understanding the situational context; and the
modules that focus on	importance of consistency and difficulties in maintaining it.
helping parents understand	
the factors that lead children	'Praise and positive attention' [PP-M2] addresses the value of
to behave in a disruptive fashion, to misbehave, and to	praise; the concept that behavioural responses (positive or negative) are reinforced through attention; and that praise is
find ways to turn this around.	a tool which increases behaviours which are most desired.
The ways to turn this around.	
The aim is to understand factors associated with the	<b>'The use of attention and ignoring'</b> [PP-M3] describes ways in
development and	which unwanted behaviours are sometimes inadvertently
maintenance of negative	rewarded through the child gaining attention; how to
behaviour and to introduce a	withdraw attention from mildly inappropriate behavior – e.g.
number of different	complaining, whining, reassurance seeking – whilst increasing
approaches to improve the	attention for more appropriate alternatives; and helping
behaviour through positive	parents to feel comfortable about using these skills.
approaches.	'Giving effective instructions' [PP-M4] addresses the value of
	giving effective instructions to children; the risk of ineffective
	instructions leading to a cycle of conflict; and provides
	opportunities to practise.
	' <i>Rewards'</i> [PP-M5] explains the value of using rewards to
	manage children's behaviour and describes ways of using
	different rewards systems.
	'Shaping challenging behaviour' [PP-M6] describes using the
	following: reward systems to shape challenging behaviour;
	consequences and sanctions; time out; an externalising
	approach to manage behaviour ("Defeating Temper"); and
	solution-focused approaches.
Promoting children's and	'Developing a capacity to identify and understand children's
young people's health,	<i>physical and emotional needs'</i> [PW-M1] begins by helping to ascertain the parents' concerns and their knowledge about
development and	child development in general, and then discussing factors that
wellbeing	influence children's development, and how these factors may
	have affected their children. It helps parents identify the
The guide presents parents with information about	particular challenges of each stage of development and
children's development,	consider what types of parenting best helps children at each
including how the brain	of these stages.
develops.	
It is intended to help parents	'Promoting early development' [PW-M2] and 'Promoting
understand how children	<i>later development' [</i> PW-M3] provides parents with approaches to foster their children's early and later
develop at different stages	development. They help parents/caregivers develop the
	actes princip incip parents/caregivers acteriop the
throughout their childhood, as	capacity to promote age-appropriate development
	capacity to promote age-appropriate development throughout children's lives by providing specific support to
throughout their childhood, as well as help them to understand their parenting	
throughout their childhood, as well as help them to understand their parenting role, and be able to respond	throughout children's lives by providing specific support to
throughout their childhood, as well as help them to understand their parenting role, and be able to respond to their children's needs, and	throughout children's lives by providing specific support to develop their speech, language and communication skills.
throughout their childhood, as well as help them to understand their parenting role, and be able to respond to their children's needs, and promote their health,	throughout children's lives by providing specific support to develop their speech, language and communication skills. They give parents direct experience of facilitating their child's development, and of how to promote this in the home.
throughout their childhood, as well as help them to understand their parenting role, and be able to respond to their children's needs, and promote their health, development and wellbeing,	throughout children's lives by providing specific support to develop their speech, language and communication skills. They give parents direct experience of facilitating their child's development, and of how to promote this in the home. ' <i>Ensuring safety and preventing harm'</i> [PW-M4] involves
throughout their childhood, as well as help them to understand their parenting role, and be able to respond to their children's needs, and promote their health, development and wellbeing, throughout each stage of	throughout children's lives by providing specific support to develop their speech, language and communication skills. They give parents direct experience of facilitating their child's development, and of how to promote this in the home. ' <i>Ensuring safety and preventing harm'</i> [PW-M4] involves reviewing with the parents the child's history of accidental
throughout their childhood, as well as help them to understand their parenting role, and be able to respond to their children's needs, and promote their health, development and wellbeing,	<ul> <li>throughout children's lives by providing specific support to develop their speech, language and communication skills.</li> <li>They give parents direct experience of facilitating their child's development, and of how to promote this in the home.</li> <li><i>'Ensuring safety and preventing harm'</i> [PW-M4] involves reviewing with the parents the child's history of accidental and non-accidental harm and discussing safety precautions;</li> </ul>
throughout their childhood, as well as help them to understand their parenting role, and be able to respond to their children's needs, and promote their health, development and wellbeing, throughout each stage of	throughout children's lives by providing specific support to develop their speech, language and communication skills. They give parents direct experience of facilitating their child's development, and of how to promote this in the home. ' <i>Ensuring safety and preventing harm'</i> [PW-M4] involves reviewing with the parents the child's history of accidental

	external); and helping the parents deal with hazards both in the home and external to it. 'Providing good quality basic care' [PW- M5] establishes a profile of the pattern of care and the home conditions. It creates a clear picture of the pattern of the children's care over a 24-hour period before agreeing goals with the parents to improve the quality of their care, and then initiating a plan of intervention and assessing its effectiveness. 'Nutritional care: Weight faltering and failure to thrive' [PW- M6] supports families to improve their children's feeding, increasing their calorie intake where necessary. It facilitates discussions about the possibility of addressing weight faltering and failure to thrive as part of an approach to dealing with a general picture of neglect, or alternatively its links with pronounced food refusal or highly stressful mealtimes when there may be 'highly aversive', emotionally abusive interactions.
Promoting attachment, attuned responsiveness and positive emotional relationships This guide stresses the importance of the secure attachment; explains the nature of secure and insecure attachments; and helps practitioners to identify the nature of the attachment between the parents and infant, growing child and adolescent; understand the factors which have led to insecure or disorganised attachment responses; and help to modify these responses.	<ul> <li>'Promoting attachment, attuned responsiveness and positive emotional relationships: Younger children' [PR-M1] focuses on helping parents understand what attachment is; identify attachment behaviour; understand the balance of the need for security and the need to explore; and intervene when 'disorganised' attachments have occurred.</li> <li>'Promoting attachment, responsiveness and positive relating with older children: One-on-one time' [PR-M2] helps parents understand the way attachments develop for older children; observe their older children and comment on their activities, play and achievement, increasing the amount of positive attention, and see that reinforcing positive behaviour is an excellent way of managing behaviour and supporting the process.</li> <li>'Promoting attachment, attuned responsiveness and positive emotional relationships with adolescents' [PR-M3] focuses on helping parents understand the way attachments develop during adolescence; observe their responses and understand how apparently challenging behaviour can represent attachment needs; and support them to increase the amount of positive attention.</li> </ul>
Modifying abusive and neglectful parenting This guide is intended to support work with parents who have been responsible for physically, sexually or emotionally abusive actions towards their children, have seriously neglected their care, or have exposed their children to domestic violence.	<ul> <li>'How abusive and neglectful parenting affects children's emotional and physical development: Psychoeducation' [MP-M1] helps parents recognise the harmful impact on their children, the way in which toxic stress has an impact on the child's developing brain and assists parents to take responsibility for their abusive actions.</li> <li>'Parents coping with stress and the link with abusive and neglectful parenting' [MP-M2] addresses how stress arises and affects parents' behaviour and capacity to provide good quality care. It focuses on the factors (e.g. children's temperaments, parents' personal health and relationships, parental responses to family of origin issues and</li> </ul>

Although the focus is on direct work with parents, the presence of children and young people may be key to the process. They can communicate about their experiences and trigger discussions about the impact of these events on them.	<ul> <li>environmental stressors) that can increase parental stress and provides practical ways of managing stress.</li> <li>'Helping parents cope with negative perceptions of their children' [MP-M3] helps parents discuss the consequences of being in a stressful situation and the negative consequences, and their thoughts, feelings and actions associated with this stress. It then enables them to identify and challenge these thoughts and change their perception of their children's behavior.</li> </ul>
	'Clarifying, sharing and reconciling the impact of abusive and neglectful parenting' [MP-M4] enables parents to construct a timeline of episodes of abusive and neglectful parenting and take responsibility for the associated harmful impact. It assists in setting up a forum for the discussion of abusive events where appropriate responsibility is taken and apologies are made, before planning a future that is protective, nurturing and stable.

### Working with children and young people

Two intervention guides consider work with children and young people:

- Working with children and young people: Addressing emotional and traumatic responses
- Working with children and young people: Addressing disruptive behaviour

These are the core guides working with children and young people who have been exposed to abusive and neglectful parenting.

The traumatic responses associated with abuse, neglect and through complex neurobiological processes have an extensive impact on children's development, physical and mental health. An overlapping set of emotional and traumatic responses result. These need to be responded to through use of a range of modules that help practitioners work with parents and carers to develop children and young people's generic skills to manage their emotions, find safety and develop problem solving abilities. Specific anxiety, mood, traumatic responses, and disruptive behaviour need to be addressed once basic coping skills have been mastered.

INTERVENTION GUIDES FOR PRACTITIONERS	MODULES
Working with children and young people: Addressing emotional and traumatic responses	' <b>Developing a child-centred approach'</b> [WR-M1] begins with the process of getting to know the child, building a relationship, conveying interest in the child and hope for the future, an understanding of how children feel and acknowledging the child's strengths and presenting difficulties and ends with establishing the child's goals as a result of the intervention.
This guide describes work with children and young people to address the emotional,	' <i>Psychoeducational intervention on the effects of maltreatment'</i> [WR-M2] is concerned with helping children gain an understanding of how they have been affected by maltreatment, correcting any misattributions or misperceptions, and developing a coherent story of what happened and why, which allows them to have a positive sense of self.

behavioural and developmental impairments associated with being exposed to abusive and neglectful parenting.

The focus is on working collaboratively with the child after an assessment process has been completed, and the profile of the child's needs established.

Most of the modules are generic and useful for children affected by abuse or neglect. Generally, they should be worked through in the order presented. These generic modules aim to provide the child with a toolkit of skills to help them manage their feelings, thoughts and behaviours. They are also useful to the practitioner in building relationships with children and helping engage them.

There are three specific modules on anxiety, mood and trauma problems. These should be selected on the basis of the problem the child is experiencing.

There is also an optional module on social skills if the child has difficulty with peer relationships. '**Safety planning'** [WR-M3] focuses on increasing the child's ability to maintain personal safety when there are known risks in the environment, understanding how to maintain their personal safety and developing, understanding and following a safety plan

'**Coping skills'** [WR-M4] helps children identify their usual ways of coping with stressors and provides them with suggested ways of coping more effectively.

'**Relaxing and calming'** [WR-M5] introduces the idea that staying calm and relaxing are good ways to affect the way we feel – especially when stressed out and tense. It demonstrates what relaxation feels like to children who have difficulty relaxing, increasing their awareness about their own tension so that relaxation skills can be applied at the proper time, and teaching the child to relax in certain situations (e.g. bedtime).

**'Describing and monitoring feelings'** [WR-M6] helps the child to describe, measure, and monitor their feelings to get a better appreciation of how feelings can be affected by different events in positive and negative directions.

'Activity selection' [WR-M7] helps the child learn about the connection between things we do and how we feel, and the link between positive activities and feeling good. The child is helped to identify activities they can do to improve their mood and schedule activities which make them feel good.

'**Problem solving'** [WR-M8] helps the child learn steps for effective problem solving, knowing how to generate ideas and possible solutions, apply these problem-solving skills to real life problems, and enable them to develop a greater sense of urgency and mastery in their life.

'Working with anxiety problems: Helping children who experience excessive anxiety' [WR-M9] helps children to understand what anxiety is and learn to differentiate between normal anxiety in situations of danger and excessive anxiety, and to identify situations that make them anxious and the way they respond. The child learns it is possible to reduce feelings of anxiety by changing how they respond to situations and understands how interventions can help.

'Working with mood problems: Helping children who present with persistent low mood or with depression' [WR-M10] helps children understand more about mood problems and depression, that individuals can control their mood and feelings by changing how they act and think – to be optimistic about their situation and the likelihood of improving, and motivated and interested in participating in this improvement process.

'Working with trauma problems: Helping children who experience traumatic responses' [WR-M11] includes the following: Psychoeducation, parenting skills, relaxation, affect expression and modulation, constructing a trauma narrative, cognitive coping and processing, mastery of trauma reminders, and enhancing safety and parent-child settings.

**'Developing positive relationships with family and friends'** [WR-M12] introduces the importance of being positive in our interactions with others, teaches the child verbal and non-verbal social behaviours,

	provides the opportunity to practice new social skills and encourages the child to practice their new skills with others.
	'Maintenance and building resilience' [WR-M13] reviews progress with the child and considers how it can be maintained, anticipating future challenges and how to address them.
Working with children and young people: Addressing disruptive behaviour This guide focuses on working with children and young	<b>'Education, talent and the "Good Life"</b> [WB-M1] helps children and young people recognise their ability to decide the personal characteristics and behaviours that they wish to form part of their future; assists them in identifying positive goals for the future so that they can work towards achieving a 'Good Life'; enables them to identify and recognise the strenths and skills that they have to help them achieve their goals; and, encourages them to identify obstacles preventing them from achieving these goals and individuals in their lives who could form part of their positive supportive network.
people who are showing disruptive behaviour problems. These are some of the commonest responses to abuse and neglect.	<b>'Young people coping with disruptive behaviour'</b> [WB-M2] introduces a cognitive behavioural model to help children and young people understand their angry thoughts and feelings and analyse what happened to trigger their behavior, the behaviour itself and the consequences. It helps children and young people to understand the internal and external triggers which lead to the angry feelings and substitute other responses as an alternative to anger. It also provides parents with techniques to support their children when they are using these new, alternative responses to anger.
	"Assertiveness training" [WB-M3] provides an alternative to aggressive behavior and helps in the development of pro-social behaviour. It enables children and young people to learn how to express needs or intentions appropriately, countering aggressive patterns of interaction by providing a substitute, using socially appropriate strategies to express feelings, stand up for themselves and disagree with others, and practise these in situations in which assertive strategies would be appropriate.
	'Developing positive relationships with family and friends' [WB-M4] addresses self-presentation and developing relationships with friends and families, and social skills. It introduces the importance of the child or young person being positive in their interactions with others, teaching them verbal and non-verbal social behaviours and supporting them to practice these new social skills with others. This is part of the 'Good Lives' process.

### Working with families

One intervention guide considers work with families: Working with the family as a group, and in various combinations is an essential skill for practitioners. The **Working with families** guide helps practitioners to engage with parents and children together to facilitate parent-child communication, and to work to interrupt and find alternatives to conflict within the family, and between the parents, and community.

INTERVENTION GUIDES FOR PRACTITIONERS	MODULES
Working with families	'Promoting healthy family functioning, family communication and problem-solving skills' [WF-M1] focuses on setting up family meetings, facilitating more positive parent-child

This guide helps practitioners	communication, and creating a "communication hierarchy" so
work with families to manage	that difficult topics can be addressed, and teaching and
conflict and dysfunction in	practicing communication skills to improve positive
family life associated with	relationships amongst family members.
abuse and neglect.	'Helpful techniques to manage conflict and dysfunction in
The goal is to help the	<i>family life</i> ' [WF-M2] focuses on helping the family understand
practitioner promote a	the origins of conflict arising within it or between the
sufficiently stable family	practitioner and protection agency, describing practice skills to
environment to enable	deal with conflict, and establishing the nature of the issues
children to develop and	that are causing conflict and developing a problem-solving
maintain organised	strategy. Techniques including solution focused approaches,
attachments to caregivers to	are described to work with the family as a whole, and with
provide a 'secure base'.	parental couples in conflict, exposing children and young
By establishing a network of	people to violence.
stable family and social	'Support networking for families' [WF-M3] is aimed at
contexts, a secure identity	identifying current sources of informal and formal support,
within family, cultural and	helping promote relationships between family members and a
social contexts can be	potential supportive network, and helping the family develop
fostered, despite stressful and	sources of support, both formal and informal.
potentially destabilising	
events.	

### Working with child sexual abuse

One intervention guide *Working with child sexual abuse* considers work with children and young people who have been abused sexually and with their parents/caregivers, and with those who are responsible for or who display harmful sexual behaviour. Working with child sexual abuse is challenging for practitioners. Given the emerging burden of child sexual abuse and sexual exploitation it is essential that practitioners develop skills to support children and young people who have been exposed to sexual abuse and demonstrate sexually harmful behaviour, often in association with other forms of maltreatment and adversity, and to support their parents. Two key areas of work are described below.

INTERVENTION GUIDES FOR PRACTITIONERS	MODULES
Working with child sexual abuse	'Promoting safety for children and young people who have been harmed sexually in the family or by a trusted member of the
This guide focuses on two key areas:	<i>community'</i> [WA-M1] aims to empower protective parents with knowledge, tools and hope to play an active part in their child's recovery and future protection; understand what child sexual abuse is, what motivates individuals to engage in sexually abusive behaviour and 'grooming'; understand the child's perspective; and help parents to protect children.
1) Working to enhance the resilience of children and young people who	
have been sexually abused by a family member or by a trusted member of the community,	'Working with parents and carers to support work with children and young people responsible for harmful sexual behaviours' [WA- M2] helps practitioners support parents/carers appreciate the categories, origins and function of harmful sexual behaviour, what is age-appropriate and the therapeutic work required. The module
2) Working with children and young people responsible for or who have displayed harmful	helps practitioners decide what approaches are helpful; identify specific roles of parents/carers in their family situation; identify the nature, circumstances and context of the child/young person's behaviour and develop an understanding of what constitutes

sexual behaviours and	harmful sexual behaviour. In addition, the module supports
with their parents and	practitioners in proposing interventions tailored to the particular
caregivers.	needs of the child or young person and ways in which
Promoting safety for these children and young people, and supporting and empowering protective parents to promote the child's recovery and psychological wellbeing,	parents/carers can support those interventions. 'Working with younger children who have displayed harmful sexual behaviours' [WA-M3] helps practitioners work collaboratively with children and their parents/carers to change inappropriate behaviours and help children to learn positive ways of managing their sexuality, practicing basic simple rules about sexual behaviour and physical boundaries. 'Working with older children and young people who have
	<i>displayed harmful sexual behaviours'</i> [WA-M4] helps practitioners working collaboratively with older children and young people and their parents/carers to enhance protective factors and help young people develop their sexuality appropriately, be open and communicate positively about sexual matters, developing age- appropriate sexual knowledge and understanding of what is OK and not OK. The module also supports development of a family safety plan.

### References and relevant reading

Bentovim, A. and Bingley Miller, L. 2001. *The Family Assessment: Assessment of Family Competence, Strengths and Difficulties.* York: Child and Family Training.

Bentovim, A., Cox, A., Bingley Miller, L. and Pizzey, S. 2009. *Safeguarding Children Living with Trauma and Family Violence: A Guide to Evidence-Based Assessment, Analysis and Planning Interventions.* London: Jessica Kingsley.

Bentovim, A. 2015. Burdens and consequences of child maltreatment. In Bentovim, A. and Gray, J. (eds). *Eradicating Child Maltreatment*. London: Jessica Kingsley Publishers; pp. 17-50.

Bentovim, A. and Elliott, I. 2014. Targeting Abusive Parenting and the Associated Impairment of Children. *Journal of Clinical Child & Adolescent Psychology*. Available http://www.tandfonline.com/loi/hcap20 http://www.tandfonline.com/loi/hcap20http://www.tandfonline.com/loi/hc.

Bentovim, A, and Gray, J. (eds). 2016; 2017. *Hope for Children and Families: Building on Strengths, Overcoming Difficulties.* York: Child and Family Training.

Bentovim, A., Gray, J., Heasman, P. and Pizzey, S. 2017. *Engagement and goal setting*. In A. Bentovim and J. Gray (eds) *Hope for Children and Families: Building on Strengths, Overcoming Difficulties*. York: Child and Family Training.

Bentovim, A. 2017. *Modifying abusive and neglectful parenting.* In A. Bentovim and J. Gray (eds) *Hope for Children and Families: Building on Strengths, Overcoming Difficulties.* York: Child and Family Training.

Bentovim, A. 2017. *Promoting children and young people's health, development and wellbeing*. In A. Bentovim and J. Gray (eds) *Hope for Children and Families: Building on Strengths, Overcoming Difficulties*. York: Child and Family Training.

Cecil, CAM., Viding, E., Fearon, P., Glaser D, and McCrory, EJ. 2017. Disentangling the mental health of childhood abuse and neglect. *Child Abuse and Neglect* **63**: 106-119.

Chorpita, BF. and Weisz, JR. 2009. *Modular Approach to Children with Anxiety, Depression, Trauma and Conduct Match-ADTC*. Satellite Beach FL: PracticewiseLCC.

Cox, A. and Bentovim, A. 2000. *The Family Pack of Questionnaires and Scales*. London: The Stationery Office.

Cox, A., Pizzey, S. and Walker, S. 2009. *The HOME Inventory: A Guide for Practitioners – The UK Approach*. York: Child and Family Training.

Department of Health, Department for Education and Employment, Home Office. 2000. *The Framework for the Assessment of Children in Need and their Families*. London: The Stationery Office.

Eldridge, H. 2017. Working with children and young people: Addressing disruptive behaviour. In A. Bentovim and J. Gray (eds) Hope for Children and Families: Building on Strengths, Overcoming Difficulties. York: Child and Family Training.

Eldridge, H. 2016. Working with child sexual abuse. In A. Bentovim and J. Gray (eds) Hope for Children and Families: Building on Strengths, Overcoming Difficulties. York: Child and Family Training.

Finkelhor D, Omrod RK, Turner HA. 2007. Poly-victimisation: A neglected component in child victimization. *Child Abuse and Neglect* **31**: 7-26.

Garcia, AR., Greeson, JKP., Thompson, A., DeNard, C. and Gupta, M. 2017. Adverse childhood experiences among youth reported to child welfare: results from the national survey of child & adolescent wellbeing. *Child Abuse and Neglect* **70**: 292-302.

Gates, C. and Peters, J. 2017. *Promoting attachment, attuned responsiveness and positive emotional relationships.* In A. Bentovim and J. Gray (eds) *Hope for Children and Families: Building on Strengths, Overcoming Difficulties.* York: Child and Family Training.

Herrenkohl, R.C. and Herrenkohl, T.I. 2009. Assessing a child's experience of multiple maltreatment types: Some unfinished business. *Journal of Family Violence* **24**: 485 – 496.

Jolliffe, C. 2016. *Working with families*. In A. Bentovim and J. Gray (eds) *Hope for Children and Families: Building on Strengths, Overcoming Difficulties*. York: Child and Family Training.

Marchette LK, Weisz JR. 2017. Practitioner Review: Empirical evolution of youth psychotherapy toward transdiagnostic approaches. *Journal of Child Psychology and Psychiatry* **58** (9): 970-984.

McCrory E, Gerin MI, Viding E. 2017. Child Maltreatment. Latent vulnerability, and the shift to preventative psychiatry – the contribution of functional brain imaging. *Journal of Child psychology, and Psychiatry* **58**: 338-357.

National Institute for Health and Care Excellence. 2017. *NICE guideline. Child abuse and neglect.* London.

Pizzey, S., Bentovim, A., Cox, A., Bingley Miller, L. and Tapp, S. 2016. *The Safeguarding Children Assessment and Analysis Framework*. York: Child and Family Training.

Roberts, R. 2016. *Promoting positive parenting*. In A. Bentovim and J. Gray (eds) *Hope for Children and Families: Building on Strengths, Overcoming Difficulties*. York: Child and Family Training.

Weeramanthri, T. 2016. Working with children and young people: Addressing emotional and traumatic responses. In A. Bentovim and J. Gray (eds) Hope for Children and Families: Building on Strengths, Overcoming Difficulties. York: Child and Family Training.

WHO. 2012. *ICD-11 content form for mental and behavioural disorders submitted by working group on stress-related disorders*. Retrieved from http://apps.who.int/classi - cations/icd11/browse/f/en



child family training

www.childandfamilytraining.org.uk