Review

Opportunities for reflection and learning that will improve our practice in safeguarding adolescents and applying contextual approaches

# **Reflective Practice: attitudes, values & beliefs**

Practitioners must reflect on how their attitudes and beliefs can act as a barrier that prevents adolescents from accessing the support they need. Investigations into high-profile child sexual exploitation cases (e.g. Rotherham, Rochdale, and Oxfordshire) have highlighted how professionals' attitudes and beliefs about those who have suffered abuse contributed to systematic failings in safeguarding adolescents.

Adolescents experience different barriers to engaging with practitioners, and practitioners will not always be able overcome these barriers. It may be that the ethnicity, gender and/or age of a practitioner lead an adolescent to feel they will not be able to identify with the practitioner. An adolescent with SEND may feel that a practitioner is not understanding of their needs or has a negative attitude to SEND

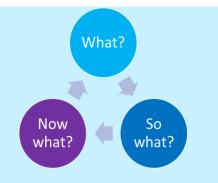
To overcome these barriers and to maximise opportunities for adolescents to engage with services, practitioners must be aware of their own attitudes, values, beliefs, privilege and cultural positioning and the impact these factors may have on professional relationships.

Reflective supervision with managers or peers in a one-to-one or group setting can be an effective way to examine some of these factors and the effects they may be having in building relationships with adolescents.

#### **Review: reflective practice**

Reflection on actions and conversations with adolescents and other professionals can help practitioners to better understand and overcome the barriers to engagement and building relationships.

Reflective practice is a skill you can explore in line management, with your peers or with a supervisor from outside your agency.



Reflection can help you to explore an event and the thoughts and feelings you have about what happened.

You may consider your own behaviour, the response from others, and any other factors that influence an event. When you explore your behaviour and your relationships with adolescents in this way, you can begin to learn more from your experiences.

You may find that the event you explore does not match with your previous ideas or beliefs. If the outcome of an event was not expected, you can explore what might have changed the outcome if you had behaved differently.

Reflection is an ongoing process throughout your work with adolescents and can be used in any discipline and at any level of need. Reflective practice is not just for social care and mental health workers and can be applied by any practitioner in informal settings, as well as during formal supervision.

### Review: reflecting on the balance of enforcement and support

Practitioners and managers must consider what the best course of action might be to safeguard an adolescent who is at risk of harm or who has done harm to others. Reflective supervision is a safe conversation to explore thoughts and feelings about the balance between enforcement and support of adolescents.

#### The need for reflective supervision

Practitioners who support adolescents who have experienced trauma are at risk of vicarious trauma. Vicarious trauma is an aspect of any profession that involves caring for others and can be more acute for professionals who work with traumatised children. Empathising with clients is vital but can mean that practitioners take on trauma. To remain effective and to get the best possible outcomes for traumatised children it is essential to make sure that professionals have access to the support they need to protect themselves (Vicarious trauma: the consequences of working with abuse NSPCC research briefing 2013).

## Secondary Trauma or Compassion Fatigue

Refers to the presence of Post-Traumatic Stress Disorder (PTSD) symptoms caused by at least one indirect exposure to traumatic material. Compassion fatigue is a less stigmatizing way to describe secondary traumatic stress and has been used interchangeably with the term.

#### **Burn out**

This is characterised by emotional exhaustion, depersonalisation, and reduced feelings of personal accomplishment. While it is also work- related, burn out develops because of general occupational stress; the term is not used to describe the effects of indirect trauma exposure.

### Identifying signs and symptoms of vicarious trauma

One way to prevent the onset of vicarious trauma and compassion fatigue is to be able to spot the signs and symptoms in staff. Staff showing any of the following signs and symptoms (list not exhaustive) may need extra support to address the impact of their practice on their wellbeing:

Social withdrawal	Intrusive imagery
Mood swings	Cynicism (may include blaming adolescents for abuse they have experienced)
Aggression	
Greater sensitivity to violence/abuse	Difficulty managing boundaries with service users
Somatic symptoms/ Sleep disturbances	Physical health impacts e.g. frequently becoming ill

Practitioners may also experience reduced professional capacity. Performance levels may be affected, ability to relate to clients may be diminished and morale may suffer. It is therefore in managers' interests to actively prevent the onset of these states.

## Supporting practitioners to prevent vicarious trauma

Good practice examples for actively supporting practitioners to prevent the onset of vicarious trauma include:

- Providing reflective supervision i.e. supervision is not target or performance-driven, either on a one-to-one or peer group basis
- Providing clinical supervision from an external organisation
- Encouraging staff to consider self-care and strategies they can adopt outside of work to look after themselves. Examples of self-care can be found in the appendix.
- Encouraging staff to adopt firm work/life balance boundaries e.g. switching work mobiles off at the end of a shift, avoiding looking at emails out of work hours, etc.
- Encouraging and adopting an environment/workplace culture that is open and discusses the impact that work has on staff's wellbeing, feelings, and emotions.
- Encouraging positive relationships between team members.
- Ensuring that staff take appropriate breaks to leave the office to re-energise e.g. lunch breaks.
- Ensuring that staff are taking time off in lieu (where they have worked overtime), annual leave and sick leave where required.
- Make employee assistance lines available to staff and ensuring staff know who they can access these.

Practitioners often fall into the habit of *doing an assessment to an adolescent* rather than **with** an adolescent. The following guidelines support effective engagement with adolescents:

**Listen, listen, listen**: the single most important principle is to listen to what the adolescent has to say

**Acknowledge**: thank adolescents for being able to talk to you. what they have to say, and later support them

**Stay alert**: keep your eyes, ears, and body language open to what the adolescent has to say, without judging, being shocked, commenting or advising (in the first instance)

**Start neutral:** do not discuss the consequences of their behaviour during early stages of engagement, unless there are clear and immediate child protection concerns

What's in it for me? Listen out for motivation and to gain an understanding of what the adolescent wants.

**Solution-focused:** ask questions that lead to solutions, rather than remaining on problems, issues, and mistakes

**Be sensitive:** describe behaviours of concern sensitively with adolescents considering the pace and number of questions

Adapt communication to needs of adolescents with SEND or work with an advocate who knows them well

**Prepare for challenge:** lead adolescents carefully towards for intrusive, probing, or challenging questions

**Offer a way out:** explain to adolescents that they can end a discussion or engagement

**Ready for change?** Approach early engagements with curiosity and look for the signs of readiness to change...

**Feedback:** give feedback that is specific and focused on desired behaviours

What's your view? Seek their perception of their behaviour rather than talking about your perceptions.

The behaviour not the person: there is much more to an adolescent than their behaviour. Be aware of your own emotional responses.

Cut the judgemental phrases: I am-disappointed by you

**Avoid correction:** instead of questioning the decision, question how they arrived at their thinking (Elicit-Provide-Elicit Model)

**Follow up!** Make sure that the plans you put in place actually happen through regular communication.