Using the Transition Tool kit to support year 6 reintegration post Covid-19

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A recent survey undertaken by the charity **Young Minds** in March 2020 revealed that the current **coronavirus pandemic** is having a profound effect on young people with existing mental health conditions. Many of those who took part in the survey reported increased anxiety, problems with sleep, panic attacks or more frequent urges to self-harm.

The concerns from governments around the world are also focusing upon financial recovery options post pandemic and forecasts but do not appear to be factoring in the psychology - emotionally scarred consumers are likely to spend less and save more — a type of "Great Depression mindset." It seems that the sense of vulnerability will be long lasting in that anxiety and fear from the virus could outlast the pandemic itself – for adults and children alike.

The need for therapeutic responses

As Psychologists, Educationalists and Therapists, we now, more than ever, need to share what we know and empower others to make use of the evidence-based tools that work. I am not suggesting we all can become therapists but I am making the argument that given this current crisis, it is more vital than ever that we do all become more therapeutic and learn how to use the strategies that therapists know to be effective. Most of this is common sense in my view and not rocket science. As you read though many of the resources and programmes available to support EHWB

you will see how easy it can be to begin to ground yourself, to challenge negative thinking, to self soothe, to connect and to self- regulate with Mindfulness and tools from Positive Psychology.

The need for Trauma informed approaches

I have recognised that there will be an on-going need for us all to develop and make use of trauma informed approaches in the aftermath of this pandemic. Children and young people will need to find and build upon their inner resources of resilience and adults will need to do likewise alongside learning how to talk to them about their fears and to do so in a therapeutic way which enable them to heal and to cope in their new reality.

We also need to understand the potential we all have for post traumatic growth and focus upon how we can ensure this happens – both for ourselves and for our children and young people.

The need to be resilient and trauma informed yourself

We know that dysregulated and stressed adults cannot effectively support and help children and young people who are also dysregulated and stressed. It is impossible.

We also know that the **direct carers of children are most effective in helping them develop self-regulation**. They can provide activities that support regulation and are also the most immediate role models for children. The emotional tone of a school or children's home is dramatically affected by the capacity of adults to regulate themselves. If adults respond to children's distress in a calm but engaged way, they demonstrate an alternative way of managing stress. When adults respond to difficulties by becoming dysregulated, they replicate the damaging environments that characterised children's earlier experiences.

Kolk (1994) described trauma as 'speechless terror' and traumatised children may be slow to develop speech or may struggle to find words to describe their trauma or their feelings. Trauma may also affect the capacity to process verbal information. Traumatised children can struggle to follow complex directions and may experience auditory selectivity so that only part of a verbal communication is heard. Adults often interpret failure to obey directions or to respond to questions as wilful defiance and react punitively, rather than modifying their own communication to match the children's needs.

So, once again, we need to be careful to ensure that our responses and the systems we put in place both in the home and in school ensure these factors are considered. We must respond appropriately to children and young people who have experienced trauma and who are currently living through the traumatic times of this pandemic. **We need to create safety routines first and to also change our own expectations and behaviours.**

To achieve this, we need to ensure that we know how to engage in effective self-care and how to manage our own stress and anxiety whilst simultaneously understanding the need to respond in a truly trauma informed way. This has never been more important when we know that children and young people are all experiencing such a stressful social and educational context.

The real 'medicine'

The school community itself is the medicine in my view. Schools will need to provide the safe and nurturing haven that children need. Ensuring those who are the most vulnerable have the wrap around care they need will be paramount but so too will be the need to ensure that **all** in the community feel safe and held. Building resilience does not happen by accident. We need to make it happen.

Supporting children who are volatile, jumpy, nervous, scared, hyper-vigilant or withdrawn or in survival mode is something we will all need to be aware of and confident in doing. This only happens when we accept the evidence from neuroscience, act on it and ensure that **we** have regulated nervous systems to meet such demands and not become overwhelmed and burnt out by them.

Creating the healing context

School staff may wish to consider the following ideas in terms of developing a healing context in which children can begin to recover:

- **Holding celebrations/memorials** to celebrate carers/NHS staff or simply the school community itself. It is important to make use of such opportunities to reinforce the power and resilience of the community as a whole and to ensure that everyone feels held and safe. Remember that *we can all find meaning and gain knowledge within a communal crisis* and allowing this to happen gives a powerful message to children that we are not alone in this- genuinely. This is particularly important when many of us will have felt very alone and isolated during the lockdown process and not had access to this kind of communal support.
- Reinforce the importance of **social buffering** (Kikusui et al 2006) whereby social contact appears to have an incredibly positive influence on the psychological and the physiological aspects of social animals, including us human beings. *Relationships need to be the centre of all we do.* Ensuring that we connect with those who find it the hardest to connect – both children and adults will be needed. In simple terms – kindness will need to rule! Keeping lines of honest communication open and sharing our experiences and feelings will be important for all of us in order to feel contained and to provide this buffering for the most vulnerable.
- **Flexibility** will also be needed. Some children **and staff** will require more support and more specialised input. We need to make sure that assessment processes and identification tools are used across the school to identify those most at risk and to act at the outset to provide the support that they may need. Many will find getting back to school an emotional trauma in itself so ensuring that staff are aware of how to manage issues such as school phobia and how to support on an individual and wider basis will also be necessary. Flexibility

around gradual attendance and engagement for some will need to be part of this approach alongside individualised opportunities to engage in self-regulation. *They will not learn without this and trying to push children into academic learning and larger social contexts when they are unable to cope bears the risk of reinforcing and reliving their trauma.* Gradual desensitisation to their fears and getting back to routines and structures will be the way forward.

- **Listening authentically and with empathy** needs to permeate all we do. Children may feel freighted and overwhelmed by leaving home and going into a social context - however well distanced – given the reinforcement they had received over months regarding the dangers of contracting the virus. This is the essential therapeutic approach. *It is healing in itself – to talk, to feel heard and to feel safe.* We need to provide time for this as and when needed. This does not equate to taking on the role of the therapist but does mean that we can ALL be more therapeutic in our interactions. In this way, we make pain tolerable and not toxic.

- **Reinforcing safety rules, boundaries and consistent approaches** will help to reduce toxic stress. *New rules around social distancing need to be framed as 'do's' rather than 'don'ts'* as this helps to reduce anxiety by framing these as positive and protective of ourselves and each other. Order, calm and reassurance need to be paramount.

- **Giving time to reflect** on what we value is also important given that most of us will have spent some time doing just that during these stressful times. We may well have come to a new realisation as to what really matters, what we value and what is essential and important to us in our lives. *Children need to talk about this too.* What is it they want now from their school community and how can it be better, more empathic, more inclusive, kinder? This is something to celebrate and hold on to – their resourcefulness and vision.

Creating the new normal on Transition – the year 6 issue

Ultimately, we are creating a 'new normal' so maybe this will be the chance to make it better than the old one. We all need to hold onto this.

Beginning with how we transition our year 6 groups back into the school context is a key starting point in developing our trauma informed approaches and beginning to see how this 'new normal' might be able to work in practice.

The Transition Tool kit from Nurture UK

In 2019 I developed the Transition Toolbox for NurtureUK – my favourite charity and one with which I have had a mutually productive and positive relationship over many years.

This Toolbox aims to support school-based staff in both the Nurture and classroom contexts in further developing their school culture and ethos in terms of promoting and ensuring this effective transition from year 6 -7. It also aims to promote teaching and learning opportunities which ensure the development of resilient children and young people who can cope effectively with the process of change.

The resources all aim to promote pupil participation and ensure that well-being is further fostered and maintained for all children. There are specific strategies, techniques and ideas regarding the transition process including systems and individualised approaches such as using the passport, setting up induction visits etc. the **60 Transition activities** for use with children form a core part of this resource. They present young people with a range of strategies and tools to develop a resilient way of thinking. They are encouraged to visualise success, see the glass half full, manage strong and complex emotions, self-regulate, cope with stress and anxiety, problem solve difficult situations, make and sustain positive relationships, recognise their own signature strengths and build upon these through a series of activities and problem based learning opportunities. The cards also make use of solution focused approaches, cognitive behaviour therapy strategies and techniques and a range of ideas and techniques taken from positive psychology and resilience theory.

The cards can be used flexibly to suit the learning context and the individual students being targeted. The facilitator's notes are explicit and provide details as to how to deliver each activity. The 60 cards are organised in 6 sections as follows:

- Making the transition

- Building self-esteem and confidence

- Developing resilience and problem solving

- Managing stress and anxiety

- Being a learner in high school

- Building strengths and setting goals

This Toolbox is based on the premise that planned and positive induction is effective in ensuring that the progress children had made in one education setting is subsequently sustained when they experience a change in this setting. It is hoped that the resource will enable those supporting young people through this process to consider further the psychological aspects of transition and to also further nurture the emotional well-being and resilience of children at a time of change in their school life.

In summary

This time of change is more pronounced for all our children and young people as we navigate this current pandemic. I am hoping that resources from this Toolbox can be used as part of the **Recovery Curriculum** – beginning with our year 6 children as they re-enter school prior to secondary transition after this period of Lockdown.

They have never needed this level of support to navigate transition and build the skills they need to continue to also navigate and manage their 'new normal'. I remain certain that if all adults involved in developing programmes of support for young children become further aware of the importance of developing resilience and post trauma growth and the fact that resilience can be taught and further built upon then, in my view, the resource will have met a key and primary objective. If we can further support our traumatised young people and ensure that they develop the

optimism and motivation necessary to cope with life's setbacks and changes – including this awful pandemic - then this will have been on one level an extremely productive piece of work.

I know from experience and feedback that young people themselves enjoy making use of the resources within the programme and also that school based staff and parents have felt empowered to more appropriately and positively support the young children whom they nurture and care for – specifically at the time of transition. I therefore further hope that this resource will become an essential part of the school's **Recovery curriculum** for supporting their year 6 children back into the school post Lockdown and provide the range of evidence based therapeutic strategies and resources we all so need at this time.

A final point

Let us keep them safe, nurtured, heard and held as they make this transition. The focus on well being needs to take precedent and any talk of 'catching up' with curriculum needs to be seen for what it is – a total fallacy and waste of precious healing time. Traumatised children cannot engage in academic learning until they feel safe.

Let us get our priorities right. Nurturing our year 6 as they transition back in and focussing on their well-being is the best starting point to ensure the healing process begins and they have the best possible chance of recovery and future growth.

References

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