



## **looking after children: thinking in the network about behaviour as communication**

### **Introduction**

The current move towards a primary care model is drawing children's services towards a more joint, responsive and flexible approach to working with children. As statutory services shrink, professional boundaries and budgets are shifting and pooling, and we are charged with working more co-operatively together, in multidisciplinary teams. These are increasingly the way in which looked after children's services are delivered. It therefore seems more important than ever to begin to think together across professional cultures about the children we jointly look after.

Work with disturbed children is disturbing. However, there are simple truths to hold onto. Children learn what they live, and those who have never had someone to get what they are going through will put other people through it, in order to get through to them.

Understanding more about children's behaviour as communication about what they have been through might help in the difficult task of jointly parenting looked after children. A child's behaviour can work like extreme weather on the feeling in the team around a looked after child, throwing everyone around them into agitated states of mind. As his or her 'corporate parents' (DoH, 1988), we feel powerful emotions in response. Can we take this challenging emotional information into account in our teams, giving it space and thought, so that we jointly better protect and look after the children in our care?

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This paper looks at the defensive protections used by looked after children, and considers the effect on the adults around them. These protections often rely on behaviour to communicate powerful feelings, in the absence of the capacity to put them into words - or even to feel that they are survivable. This capacity is absent when parents have not been able to help it develop, through sensitive responsiveness to their young child's states of feeling.

In the context of direct work with looked after children, I would like to consider ways of thinking jointly with the adults around a child about their extreme states of feeling, in which the focus is on a kind of processing which Bion calls 'alpha function' (Bion, 1962). This seems to offer a more resilient, flexible kind of protection for child and adults, and may help the professional team better facilitate the child's development. I will first give some context for the corporate parenting role with which we we are charged in our multidisciplinary teams.

### **Corporate parenting in the multidisciplinary team**

"If this were my child" (DfES, 2003) asserts that all those working in children's services should "accept responsibility for children in the council's care, make their needs a priority and seek for them the same outcomes any good parent would want for their own children" (DfES, 2003:3).

A kind of free-flowing good parenting is suggested by this. However, the term 'corporate parenting' (DoH, 1998) is at odds with this sentiment. It implies a feeling of something unified, de-personalized. This may at times be true. Its jointness can sometimes make it very hard to implement, across different services and workers. Yet the fact that it is joint also means that there are several points of view, and the possibility of lively discussion between them, whatever obstacles stand in the way. This may make us less susceptible to being drawn into a *folie a deux* and acting something out. Someone else is there to witness and comment upon the relationship. Here the role of the father, the third

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perspective, comes into play – whose representation in a conversation about the child may not necessarily be male. In thinking about corporate parenting, we need to bear in mind both maternal and paternal functions.

In writing this, I am drawing on my experience of doing outreach work for a Looked After Children Education Service (LACES), during a time of change for all children's services. My role involved a number of functions: advocacy, liaison and when possible, regular visits to support the child. The paper is an attempt to consider what those of us who work with looked after children can learn from their direct contact with the child. We are in various ways *in loco parentis* and so are on the receiving end of powerful states of feeling.

There is the potential for these feelings from the child to be processed by the adult as a communication and responded to in a thoughtful way, rather than received unconsciously and acted out. Various professional roles combine one to one work with inter-agency liaison. This offers the opportunity for these two strands to intertwine productively. Linking up with other agencies offers a chance to think together about the feelings evoked by the child in one-to-one work. This conversation can light the way towards helping the child's development progress.

In practice, though, there are problems with this joint responsibility, as I will try to show. All too easily, looked after children can "fall through a hole in the 'net'-work" (Emanuel, 2002). The generic difficulties inherent in working across agencies are exacerbated by distinct cultures, attitudes and vocabulary, developed to help deal with the anxiety of working at the sharp end of society (Satyamurti, 1981). The challenging task for the network is to find ways not just of tolerating the anxiety of working with a child in difficulties, but of using the feelings the child evokes to inform his or her care.

## **Transferring feelings onto an available person**

Freud's (1895) first explorations of the talking cure with Breuer identified the body language of the unconscious and felt the unexpected impact of unspoken feelings from early relationships transferred onto the relationship with the therapist. (Freud 1917). This potential stumbling block became a cornerstone of psychoanalytic practice, offering valuable insight into the early experience of the patient, that may pre-date words and be unavailable for language and for thinking. Outside the consulting room, can we use this valuable tool in our multidisciplinary team practice? As part of a team of corporate parents, we are in the firing line for a powerful range of feelings transferred onto us, as we stand in various ways for the original parents.

After all, as Klein (1930) understood, the aggressive impulses of the infant are bound up in its relation to its mother. She suggests (1946) that it is part of the maternal function to take in and make digestible this hatred, for re-introjection by the infant in a more palatable form, with added understanding – Bion's "alpha function" (1962). When this maternal function fails, the infant is forced to push the bad feelings – unprocessed sense impressions, Bion's (1962) "beta elements" - out of himself in a kind of urgent expulsion. We feel the force of this process in working with looked after children.

Neuroscience now confirms the make or break role of the maternal function for the infant brain and its capacity to regulate emotion. Schore (2001:62) models projective identification as "an early forming unconscious strategy for regulating right-brain to right-brain communications, especially of intense affective states." He describes (2003) what happens in the infant brain when this process does not happen, outlining the neuropsychology of a disorganized/disoriented attachment pattern associated with abuse and neglect.

Balbernie emphasises the wired-in nature of the neurology of emotional responses, adapting very early to survive abuse or neglect:

“The baby... must fit into what he finds and adapt his responses, and the neurobiology behind them, to the only world he knows. In extreme circumstances this can be a disaster.” (Balbernie, 2001)

The extreme circumstances of the early life of children who are taken into public care, then, set the pattern of emotional response in later life. Such children are adapted to adversity. Child development research bears this out – for example, Trevarthen & Aitken’s (2001) review of evidence of the development of active “self-and-other” awareness in infancy. There are significant implications for self-regulation and for mutual creation of meaning when there has been a failure of this active engagement of a sympathetic other. I will try to show how this failure has led to the children communicating their distress through non-verbal means, in an attempt to regulate painful internal states.

The need of children in public care to attempt this form of regulation has its counterpart in life in the professional network, too, as part of large, unwieldy organisations dealing with emergency, damage and distress. The danger is that our need for protection in such an anxiety-inducing world can work against our capacity to take in and understand the child’s projection of unmanageable anxiety into us.

Bombarded with unthought sense impressions - Bion’s beta -elements (1962) - and working more often now in community situations where boundaries of time and space can be hard to establish, how can we offer a kind of corporate parental alpha function for the children and for ourselves in the network team, in which projections are taken in and reflected upon, returned in a more symbolic, verbal, less concrete form?

After all, the direct work with children undertaken by agencies like social care or youth justice is not intended to be psychotherapy, or psychoanalysis. However, I am arguing that there is a kind of “invitation to regress” (Bollas 1987:25) offered by work in these corporate parenting roles, and it is vital for children's wellbeing and development that we attend to these communications. As we have seen, children who have survived abuse or neglect use patterns of emotional responses adapted to their early experience, patterns which are played out in relation to parental figures in the network. Our responses to these projections may promote or impede the child's development. Kenrick (2006:74) examines this predicament in relation to the child's carer:

“Where the strength of feeling cannot be processed... rage felt in the carer may erupt, and a cycle of violence may follow in which the adult can become the actual abuser. When the carer is feeling overwhelmed, a pause to explore to whom the feelings really belong may help to prevent or to limit enactment.”

Mitrani describes the desire to do good on the part of the therapist as potentially an obstacle, because it may prevent her taking in the bad aspects of the child's experience – perhaps not “able to feel herself to be that unwanted part of the patient's self.” (Mitrani 2001:161)

In the multidisciplinary team, too, we may say that the desire to do good is likely to prevent acknowledgement and acceptance of the bad that is an inevitable part of the child's experience of us. Mitrani explains:

“In my work, I have found it is of little use to give the patient the impression, in one way or another, that what he made of what I said or did was either not what I intended nor what I actually said or did. This tactic misses the point and only reinforces the patient's sense that his experiences are unbearable.” (2001:161)

Transferring her idea to the role of the corporate parent, I would argue that we have a responsibility not to reject the bad but to acknowledge and contain it in the professional team to the extent we are able. We need to then reflect in the team upon its meaning, thinking about what it is the child needs us to understand about their early experience, in order that the child may develop the feeling of an attempt to understand what it was like for them. This facilitates the experience of a relationship with a parent-type figure which is humanly flawed, but which carries the possibility of repair and growth. Supporting each other to take the impact of the the force of the child's experience and think about it is one of the key aspects of work in the multidisciplinary team, in my view.

For the children referred to as looked after children, there has been a failure in Bion's (1962) containment and alpha function, an absence of Bowlby's (1969) secure base, and a lack of Winnicott's (1953) holding environment in their early lives. They have thus been left with the problem of finding ways to survive the extreme emotions engendered by their circumstances, while lacking the means of processing them. This has meant some extreme forms of protection have been necessary, which then become part not only of the child's past but of their present experience. The damage is not only inflicted during the actual experience of neglect or abuse, but is wired in, internalised (Schore, 2003), so that the child unconsciously expects and elicits that behaviour from other adults in their later life (Henry, 1974; Emanuel, 2002).

For example, it has been my experience that children who have endured neglect in their early lives may be easily forgotten and left to fend for themselves (see Turney & Tanner, 2001); children taken into care because of abuse may provoke fury in people working with them (Boston, 1983); unwanted children may be experienced as hostile and rejecting, tending to make anyone working with them want to turn away (Agass, 2000). I have worked with children where the network has felt chaotic, or conflictual, or unavailable, or harsh, or unwilling to take responsibility, and have experienced these emotional situations in myself in

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working with the children. Even bearing this phenomenon in mind, it has been hard to swim against the current of feeling in the network and in myself, as the brief discussion of the direct work that follows will show.

## **Zola**

In outreach work for a Looked After Children's Education Service team, I worked with a girl whom I will call Zola. She was a bright, lively eleven-year-old girl, with a dual British and Malaysian heritage. She had been in public care for five years, in a series of foster homes and children's homes, and had a history of absconding. She was removed at six from her mother, who struggled with alcohol and drug abuse, without the support of a partner.

In regularly absconding from placements, Zola seemed to be continually searching for somewhere else she could settle and belong. An image of a winged horse, which she picked up and wanted to draw on my first visit, gave me a clue to her state of mind. We eventually made a cushion based on that drawing. It seemed to exemplify the appeal of the enchanted escape to a perfect place. It had to be magical, because being included in real life, getting inside, either in a session or a foster placement, and being held safely there, seemed for Zola to be fraught with dangers. Alongside the frightening threats to her physical safety she had suffered and internalised earlier in her life, another risk of staying in one ordinary real place might be that of being excluded from an imagined perfect place elsewhere.

The present place – any actual place – tended to be experienced as unsatisfactory, and endowed with unappealing attributes. It was elsewhere that held all the promise of delight and satisfaction. At different times, Zola used her idea of me to hold both these qualities. Sometimes I was downright useless – foolish, clumsy, incapable. I was a bumbling idiot who couldn't be relied upon to provide her with what she needed; she would have to do that herself. At other

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times I seemed to be identified with a perfect mother, and expected to understand her in a wordless perfect way.

In writing my notes after visits, it was hard to convey the tumultuous pace at which things happened, often simultaneously. I felt battered by waves of strong feeling during our sessions, and then exhausted and sad at the end.

Alongside the painful feelings she evoked in me, in the face of irreconcilable love for her mother and fear of her when she was under the influence of drugs and alcohol, she seems to have taken refuge in splitting people and events into good and bad. She told me about incidents in school for which she thought she should have been excluded, and said that it was all her old foster-carer's fault. All the badness was felt to lie in this old foster carer of hers, even though case notes are witness to the fact that this foster carer was committed to Zola, and was seeking to foster her long term. Her next foster carer, certainly in the initial stages, was idealised. It seemed that Zola needed to feel that she had left unacceptable parts of herself behind with her 'bad' foster carer. When she was somewhere else, a perfect place, she desperately wanted to begin again and be perfect.

Schore's work (2003:18) provides a helpful perspective on Zola's attempt to distance herself from a sense of her own badness, to identify it elsewhere. He describes shame as an "intense psychophysiological distress state" arising from maternal misattunement.

He describes the importance of the parental role in regulating the child's shame state, because the young child cannot autoregulate it. Like Winnicott's "good enough" mother (1971), and Bion's containing maternal reverie (1962), Schore's caregiver initiates and "re-enters into synchronized mutual gaze visual-affect regulating transactions" and thus the "dyad is psychobiologically reattuned, shame is metabolized and regulated, and the attachment bond is reconnected" (2003:19). Stern's (1977) "missteps in the dance" are part of this process. The

rhythm of minor disconnection and repair is important to a child's future emotional development. Where the disconnection with a caregiver is traumatic, and furthermore, repair is not initiated, there are intolerable levels of shame, which the child cannot autoregulate. Dissociation ensues ( Schore 2003:188), although the state of hyperarousal remains. The pain endures, but is disowned, and experienced as a "dead spot" (Schore 2001:70) in Zola's sense of herself.

### **Links between working with Zola and network responses**

Assumptions laid down by the conflict and constant transition of much of Zola's childhood were played out around her by split and warring camps within the multidisciplinary team. Long and adversarial phone calls and a persistent sense of impending crisis were features of its operation. After prolonged uncertainty about her foster placement, during which Zola alternated between begging to stay and running away, there was a disruption meeting. In what felt like an enactment of aggressive parental conflict, there were heated words exchanged, and accusations of betrayal were flung around the room among her network. After more than a week of visits and assessments, early morning and late night phone calls, as various professionals argued over what should happen, the decision was made: Zola would stay in the placement, and be allocated to a more experienced social worker. Neither outcome happened. Zola ran away, and there was nobody available to take over the case. The upshot of all the exhausting conflict was that Zola herself fell "through a hole in the 'net'-work" (Emanuel, 2002).

Eventually, Zola arrived at an emergency foster placement, bringing nothing with her but a bin liner holding some possessions – one of which was the winged horse cushion we had made. I was reminded of Alvarez's "necessary angel" (1992:118), an idealisation which can be for a damaged child an essential core around which to build loving relationships. Something about her clinging to the hope of something lovely in all her chaotic fury and loneliness and pain was very

moving. She was surviving in her own idiosyncratic way, but only just. It was a way of being that relies on those around her being thrown into states of violent emotion, and she pays a heavy price; that of dissociation from her feelings and thus from her “true self” (Winnicott, 1971).

In contrast to the rocky shores and crashing waves of emotion in working with Zola, I will now describe the relative flatness of work with Mike and the gaps in the team around him.

### **Mike**

Like Zola, Mike was eleven when he was referred to our outreach team. Someone had reported his dangerous behaviour on the streets to his school. The Special Educational Needs Co-ordinator could tell me very little about him, other than the reported incident. In contrast to Zola, I became more and more aware of the tendency in the professional network not to notice him or his difficulties, although these were severe. He was taken from his mother's house at the age of six, because of chronic neglect and domestic violence. His mother seems to have loved him, but to have been unable to look after and protect him. A series of referrals to social care, provoked by concern about hunger, neglect and domestic violence, were all closed after initial enquiries, because of evident affection between mother and son. The belief that Mike could be safely left in his mother's care runs through the social care account of the early family history, incongruous alongside a record of severe neglect, involving doors kicked in, police raids, burglaries, violent rows, suicide threats and drugs. Mike was experienced by professionals as coping, regardless of extreme neglect and physical violence. His survival, though, seemed to be bought at the cost of a lively sense of his own feelings, as the following work will show.

When I visited him at school, Mike would be already waiting near the school door, but his offhand greeting and lack of facial expression belied this sign of

eagerness. His goodbyes were nonchalant, and he would wander off as if he had already forgotten I was there. My notes after an early visit show that I hesitated and watched him walk down the corridor. I felt uneasy, and registered a sense of guilt that came with a kind of emotional shrug of the shoulders: what more could I do? Perhaps this was emotional information about a mother who loved Mike but felt powerless to care for him as a dependent.

It was hard in working with Mike to keep hold of a sense of his vulnerability. This is not only reflected in the social care response to him, it is also true of my own attitude towards him. Early on, when there was an emergency with another child, I am sorry to say that I felt able to ring the school to reassure myself that Mike was happily occupied and would not mind missing our session, and decided to cancel it in favour of the crisis elsewhere. My assumption was that Mike was not a crisis; he would be all right. I regret that decision, and was later more able to see his desperate need and vulnerability, but it was effectively suppressed. He had a capacity to inspire affection, but his emotional grip on me was loose. I am sorry to have to say that I even registered an early doubt that he really needed the sessions, although it was quickly dispelled by a part of me that was less drawn in to the enactment of neglect.

At the beginning, he wanted to fill our time together with mild, low energy activities. I was conscious of tiredness beyond end of the day tiredness in my visits. This very fact seems now to communicate something about his early neglect, but at the time it was hard to think about. I would leave with a headache, exhausted. I was aware of a disparity between the behaviour for which he had been referred to our service, physical enactment of dangerous situations, and this lethargy, in which feelings were blocked out. The emotional quality of our relationship seemed to dull my feelings rather than enrage or confuse them. He was exposing me to the empty weariness of neglect, but not yet to the fear of the dangers he had experienced and witnessed. There was a series of visits during which he made a robot; it seemed to represent his struggle to survive powerful

emotions by blanking them out robotically. He added more and more layers of paper and glue to the front of the robot, giving it a tougher and tougher facade. As the weeks went by and the glue hardened, he would knock its chest to see how tough it was, what it could withstand. In life outside school too, Mike was constructing a tough guy facade.

However, his powerful dissociated feelings arose in a visit some months later, when he drew a small cat held by the neck above a drop. A kind of confused terror arose in my mind. I thought that he was showing me something appalling, and that he couldn't think about it. He seemed to need me to 'get it', feel the impact of the feelings and process it in my mind first. When he later suggested that we play hangman, the idea felt dangerous to me, but Mike's tone of voice and facial expression were matter-of-fact, as if it had no particular resonance for him. I was particularly frightened in case he did not guess my word – the scaffold I drew gathered more and more supporting structures as he went through the alphabet. He had no such qualms for me – I was often hung, and a crowd of cartoon faces laughed horribly at my death.

### **Links between working with Mike and network responses**

The risk of Mike identifying with the cruel abuser rather than suffer the pain of the victim was a real one. There was a need for thoughtful dialogue about how he might access help to facilitate a more integrated development, and prevent enactments in his adult life, but that dialogue was missing from our corporate parenting of him. Without a crisis, we would not meet. Mike was acting as his own shock absorber – he did actually suffer from tics and twitches - and would not generate a crisis to make all his adults jump.

No wonder he needed the robot. In fact, as I have mentioned, he seemed to express physically some of the danger he had experienced – he twitched, he threw stones, he made daredevil leaps - all of which testified to the experiences

he could not think about. However, he spared his adults, and the grey robot casing prevented real feeling getting through. We were able to forget about him and to feel that he would be all right – we had other more urgent things to deal with.

Reflecting Mike's physical expression of dangers he had experienced was the fact that the responses of the multidisciplinary team tended to play down the emotional impact of his experiences and offer physical solutions – for example, the isolation room for misdemeanours at school, or medical intervention for his twitches. What LACES could offer was very little and very late, and my attempts to refer him to Child and Adolescent Mental Health Services floundered, partly through unavailability of anyone from social care to support the referral, and partly through his foster carer's reluctance to, as she saw it, "stir up painful stuff for him". Neither was I able to advocate for more support for him in school, despite repeated attempts. His relative passivity in the classroom meant that they did not see him as someone who needed extra help.

The belief that Mike would cope, despite his significant difficulties, seemed to be entrenched in the professional network. His experiences seemed to be lodged in his body rather than thought about, as a form of self protection. This was replayed in neglectful corporate parenting – in which I include aspects of my own work with him - by the network intended to support him and help him develop.

### **Corporate alpha function**

I have used my experience of working with Zola and Mike as evidence of the emotional impact of working with children in public care, and the challenge this presents for professionals in the multidisciplinary team working directly with children. Not having had processing help in their early lives, these children were unable to communicate their feelings verbally, and so these were acted out, and needed to be received as powerful emotional information about their early lives.

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I would like to consider how those of us involved in direct work with children in care can begin to think together as corporate parents about what is being communicated in the only way available to the child. Can we experience the feelings the child is evoking in us, and consider them a necessary communication? By this I mean, can we use what the child is saying in this body/feeling language to help us understand something of the child's inner world? In the non-psychotherapeutic environment of the children's home, or the special needs department, dominated often by urgent response to crisis, it is sometimes easier for us to reflect the child's internal world by acting it out, rather than to reflect upon it.

If, as corporate parents, we want to help looked after children begin to learn from experience (Bion, 1962) and feel a stronger sense of their true selves (Winnicott, 1971), rather than get stuck in acting out old patterns, we need to contain and reflect upon their emotional communications in a kind of multidisciplinary team version of alpha function. This involves thinking together in the multidisciplinary group about our experience of the child. There would of course be serious deficiencies in this kind of processing, compared with the alpha function that a loving mother provides, and major difficulties in setting it up and maintaining it. However, where there is an absence of such a maternal function, and perhaps too an absence of psychotherapeutic help, dwindling rapidly as financial cuts bite, it seems all the more important that the members of the network team offer some reflection upon the child's projections.

This function may well have a dual benefit. The experience of working in looked after children's services is often unpalatable and painful, and professionals in a looked after child's network need a degree of protection from the force of it if they are to keep turning up for work every day. Some sort of protection is required, that allows for dialogue and reflection, in a way that the full metal jacket of dissociation does not. It may be that the team itself could begin to offer such flexible protection for its members, through helping to process some of the

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unpalatable projected material hurled at it. I would like to consider some helpful factors identified by Bion (1961), Hinshelwood, (1987) and Menzies Lyth (1988) in facilitating such a function: teams, leadership and reflective space.

Bion (1961) underlines the support teams can potentially offer, if they function as a “work group”, rather than operating on basic assumptions or primitive drives. The work group as he sees it is predicated on the idea of development, and on shared internal values, rather than compliance with external structures. The procedures and structures are necessary to guard the space in which thinking can happen, but putting the mechanisms in place alone will not guarantee that thinking takes place. However, where there is a focus on the internal values and attitudes Bion outlines, the team is likely to be able to support not only its members, but the children they look after.

This kind of team may have the potential to help its members contain anxiety, tolerate frustration and begin to make sense of their working experience (Krantz, 1996). Ruch (2006) suggests that the capacity for social care teams to offer support to practitioners has been under-recognised. However, there are significant difficulties in creating these work groups, inherent in the creation of trust and the facilitation of real dialogue in such a shifting environment, with different working 'languages' and cultures (Satyamurti, 1981).

Providing the leadership for this type of containing team entails the capacity to tolerate the frustration of not knowing in the face of internal and external pressure to provide solutions urgently (Bion 1961:29). By embodying this capacity, leaders can provide the containment for others to tolerate their frustrations too and begin to develop this capacity for themselves.

In the event that a “good enough” (Winnicott 1971, p.10) team and leader manage to overcome intrinsic difficulties, and establish a sufficiently reflective culture to contain primitive fear and hostility in looked after childrens' services,



there is a third key factor to consider. This is the creation of a space for thinking and for dialogue that is protected, in the building and in the week and most importantly, in the attitude of the team members. There are of course a number of real world external factors which work against its development - as well as internal ones, including that of professionals' own conflicts inside the group. Building an awareness of this significant factor into the process without obscuring the objective of thinking about the child is certainly a challenge.

Nevertheless, the attempt to develop a shared understanding of children's emotional communication is urgently necessary. It seems to me that embedding this attitude in the culture of the various professions that make up the multidisciplinary team might be transformative.

## **Conclusion**

Recent consideration of better working practice (Care Matters, 2006) acknowledges social care frustrations with a complex system and the need to build strong and lasting relationships with children. There is reference to the need for a culture shift, but the measures suggested are practical ones.

This emphasis on revising structures or introducing new ones, without an accompanying internal shift, may actually compound the difficulties. After all, present care planning for a looked after child is intended to review and manage the timing of significant transitions or interventions, yet this did not happen for Zola or Mike. But even where a care plan works well, it does not at present include a discussion of characteristic behaviours and the responses they evoke. For Zola and Mike, the absence of discussion of the feelings evoked by the child compounded the difficulties in working with them, and impeded their development. Writing three decades ago, Hutten (1983) described the benefits of such a dialogue:

“If time and space to think together about the front line worker’s experience is made available, the human resources can be increased out of all proportion to limitations of material resources”.

Although she acknowledges: “this is not always easy to arrange or to provide” (Hutten, 1983:111). Making this space to reflect upon the meaning of a child’s disturbing behaviour often seems impossible under the pressure of anxiety induced by the urgent and demanding work of children’s services. The current plans for re-shaping looked after children’s services do not address it. However, its absence means that children like Zola and Mike have to rely on their own early-established, wired-in, dissociative kind of self-protection. It may indeed protect from the painful awareness of distress and fear of disintegration, but in doing so, stunts their emotional development and reinforces a fragmented sense of self, which may be reflected in conflict or neglect, as we have seen, in the professional network around them.

In a social and political climate which is driven by financial constraint, so that statutory services are very thinly rationed, the use of early intervention, community outreach and prevention programmes seem all the more necessary. It therefore seems important to grow effective, resilient processes in children’s services which are informed by the attempt to understand children’s behaviour as a communication about early experience. If space is made available, rooted in ordinary working practice, for a conversation about what working with a particular child feels like, the emotional impact of each child upon those who work with him or her can be considered as potential communications about early experience. This is a way of affording more flexible protection for the workers in the network, and facilitating the real emotional growth and development of looked after children.

## References

- Agass, D. (2000) Containment, Supervision and Abuse. *In: Psychodynamic Perspectives on Abuse*, McCluskey, U. & Hooper, C. (Eds.) London, Kingsley:209-222.
- Alvarez, A. (1992) Live Company. London, Routledge.
- Alvarez, A. (1997) Projective Identification as a Communication: Its Grammar in Borderline Psychotic Children. *In: Psychoanalytic Dialogues*, 7:753-768.
- Balbernie, R. (2001) Circuits and circumstances. *In: Journal of Child Psychotherapy*, 27,3:237-255.
- Bion, W. (1961) Experiences in Groups. London, Tavistock.
- Bion, W. (1962) Learning from Experience. London, Heinemann.
- Bollas, C. (1987) The Shadow of the Object: Psychoanalysis of the Unthought Known. London, Free Association Books.
- Boston, M.(1983) Falling and Being Dropped. *In: Psychotherapy with Severely Deprived Children*. (Boston & Szur, Eds.) London, Karnac:11 – 19.
- Bowlby, J. (1969) Attachment London, Tavistock.
- Department of Education and Skills (2003) If This Were My Child: A Councillor's Guide to Being a Good Corporate Parent Nottingham, DfES Publications.

- Department of Education and Skills (2006) Care Matters: Transforming the Lives of Children and Young People in Care. London, HMSO
- Department of Health (1998) Quality Protects. London, HMSO.
- Emanuel, L. (2002) Deprivation x 3. In: Journal of Child Psychotherapy, 28, 2:163-179.
- Emanuel, R. (2004) Thalamic fear. In: Journal of Child Psychotherapy, 30,1:71-87.
- Ferguson, H. (2005) Working with Violence, the Emotions and the Psycho-social Dynamics of Child Protection: Reflections on the Victoria Climbié Case. In: Social Work Education, 24, 7:781–795
- Freud, S. and Breuer, J.(1895) Studies in Hysteria. (2004) London, Penguin.
- Freud, S. (1917) Transference. In: Introductory Lectures on Psychoanalysis 1. London, Penguin, pp. 482-500.
- Great Britain (2004) The Children Act 2004. London, Stationery Office
- Henry, G. (1974) Doubly deprived. In: Journal of Child Psychotherapy, 3:15–28.
- Hinshelwood, R. (1987) What Happens in Groups: Psychoanalysis the Individual and the Community. London, Free Association Books.

- Jaques, E. (1955) Social Systems as a Defence against Persecutory and Depressive Anxiety. In: New Directions in Psycho-Analysis, Klein, M. et al (Eds.) pp. 478-98.
- Kenrick, J. (2006) Work with Children in Transition. In: Creating New Families, Kenrick et al (Eds), London, Karnac.
- Klein, M. (1930) The Importance of Symbol-Formation in the Development of the Ego. In: Love, Guilt and Reparation, (1975) London, Hogarth, pp.219-232.
- Klein, M. (1946) Notes on Some Schizoid Mechanisms. In: International Journal of Psychoanalysis, 27 pp.99–110.
- Klein, M. (1952) Some Theoretical Conclusions Regarding the Emotional Life of the Infant. In: Envy and Gratitude and Other Works, (1975) London, Hogarth, pp.61-93.
- Krantz, J. (1996) Anxiety and the New Order. The International Society for the Psychoanalytic Study of Organisations Symposium Paper, New York.
- Menzies, I. (1960) The Functioning of Social Systems as a Defence against Anxiety. In: Containing Anxiety in Institutions, (1988) Menzies Lyth, London, Free Association Books, pp.43-85.
- Mitrani, J.L. (2001) Ordinary People and Extra-Ordinary Protections: A Post-Kleinian Approach to the Treatment of Primitive Mental States. London, Routledge.

- Ruch, G. (2006) Thoughtful Practice: Child Care Social Work and the Role of Case Discussion. In: Child and Family Social Work.(OnlineEarly Articles)
- Satyamurti, C. (1981) Occupational Survival: the Case of the Local Authority Social Worker. Oxford, Blackwell.
- Schore, A.N. (2001) Neurobiology, Developmental Psychology and Psychoanalysis: Convergent Findings on the Subject of Projective Identification. In: Being Alive. Building on the work of Anne Alvarez. (2001) Edwards, J. (Ed.). East Sussex, Brunner-Routledge, pp.57-74.
- Schore, A.N. (2003) Affect Dysregulation and Disorders of the Self. London, Norton.
- Stern, D. (1977) The First Relationship. Cambridge, Harvard University Press.
- Trevarthen C. & Aitken K. (2001) Infant Intersubjectivity: Research, Theory, and Clinical Applications. In: Journal of Child Psychology and Psychiatry and Allied Disciplines, 42(1) pp.3-48.
- Turney, D. & Tanner, K. (2001) Working with Neglected Children and their Families. In: Journal of Social Work Practice, 15 (2) pp.193-204.
- Winnicott, D. (1953) Transitional Objects and Transitional Phenomena. In: International Journal of Psychoanalysis, 34:89-97.
- Winnicott, D. (1971) Playing and Reality. London, Tavistock.