

UNDERSTANDING THE IMPACT OF BEHAVIOURAL DIFFICULTIES ON CHILDREN AND FAMILIES

Impact
on **Urban**
Health



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Introduction

During the early part of 2021, 18 families living in the London boroughs of Lambeth and Southwark took part in a research project exploring their experiences of having children with behavioural difficulties. The research was commissioned by Impact on Urban Health as part of developing its Children's Mental Health Programme. It was conducted by a team of researchers from Renaisi and Close-Up Research.

The main focus was on Conduct Disorder and Oppositional Defiant Disorder. Some of the children and young people had received a formal diagnosis, whereas others were displaying several indicators but had either not been diagnosed, or had another diagnosis.

The research focused on understanding the reality of families' lives. The families shared their experiences through a series of interviews (in-person and online), and taking part in diary tasks and other interactive exercises. The research team spent time getting to know the families and their circumstances over a number of months in order to understand their day-to-day lives and the impact of the behavioural difficulties at home, school and in the community.

The 18 portraits are presented in this pdf with the consent and approval of each family. The aim is to represent their stories as faithfully as possible so that their voices and experiences are heard.

There is an accompanying report that analyses the findings from this research in more depth, click [here](#).

These insights have helped Impact on Urban Health design a programme that supports children and families in the most practical, lasting ways possible.



Home

To view the full story for family click on the portrait, or use the home button to return to this page.



FAMILY 1

Carlos (9)

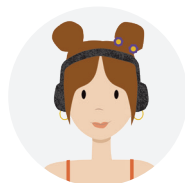
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FAMILY 3

Johnny (11)

pg 13



FAMILY 5

Hannah (16)

pg 19



FAMILY 7

Yusuuf (10)

pg 25



FAMILY 2

Stephen*

pg 10



FAMILY 4

Zack (7)

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FAMILY 6

Colin (8)

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FAMILY 8

Emmad (10)

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FAMILY 9

Lisa (11)

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FAMILY 11

Mahreen (11)

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FAMILY 13

Oscar (12)

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FAMILY 15

Nicholas (8)

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FAMILY 17

Joshua (17)

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FAMILY 10

**Raina (18)
Audrey (14)**

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FAMILY 12

Rosie (11)

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FAMILY 14

Jaxon (6)

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FAMILY 16

Kyle (3)

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FAMILY 18

Jaydan (11)

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Exploring the family portraits

Click on the links below to explore the family portraits by different characteristics

By the child's gender

Male

FAMILY 1	FAMILY 2	FAMILY 3
FAMILY 4	FAMILY 6	FAMILY 7
FAMILY 8	FAMILY 13	FAMILY 14
FAMILY 15	FAMILY 16	FAMILY 17
FAMILY 18		

Female

FAMILY 5	FAMILY 9	FAMILY 10
FAMILY 11	FAMILY 12	

By behavioural difficulty

Oppositional Defiant Disorder diagnosis

FAMILY 2	FAMILY 5	FAMILY 9
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Conduct Disorder diagnosis

FAMILY 1	FAMILY 6
--------------------------	--------------------------

No formal diagnosis

FAMILY 3	FAMILY 4	FAMILY 7
FAMILY 8	FAMILY 10	FAMILY 14
FAMILY 15	FAMILY 16	

Other diagnoses (e.g. ADHD, autism, depression)

FAMILY 2	FAMILY 5	FAMILY 6
FAMILY 9	FAMILY 11	FAMILY 12
FAMILY 13	FAMILY 17	FAMILY 18

By the child's age

Aged 10 and under

FAMILY 1	FAMILY 2	FAMILY 4
FAMILY 6	FAMILY 7	FAMILY 8
FAMILY 14	FAMILY 15	FAMILY 16

Aged 11-18

FAMILY 2	FAMILY 3	FAMILY 5
FAMILY 9	FAMILY 10	FAMILY 11
FAMILY 13	FAMILY 17	FAMILY 18

By household circumstances

Single parent household

FAMILY 1	FAMILY 3	FAMILY 4
FAMILY 6	FAMILY 7	FAMILY 9
FAMILY 10	FAMILY 12	FAMILY 13
FAMILY 14	FAMILY 15	FAMILY 17
FAMILY 18		

Two parent household

FAMILY 2	FAMILY 5	FAMILY 8
FAMILY 11	FAMILY 16	

Only child

FAMILY 5	FAMILY 11	FAMILY 17
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Low income

FAMILY 1	FAMILY 3	FAMILY 6
FAMILY 8	FAMILY 10	FAMILY 11
FAMILY 12	FAMILY 13	FAMILY 14
FAMILY 15	FAMILY 16	FAMILY 17
FAMILY 18		

Average income

FAMILY 4	FAMILY 5	FAMILY 7
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Higher income

FAMILY 2	FAMILY 9
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Glossary

ADHD

Attention Deficit Hyperactivity Disorder

ASD

Autism Spectrum Disorder

CAMHS

Child and Adolescent Mental Health Services

CD

Conduct Disorder

CIPP

Centre for Interventional Paediatric Psychopharmacology
(at Maudsley Hospital)

DMDD

Disruptive Mood Dysregulation Disorder

EHCP

Education and Health Care Plan

ELSA

Emotional Literacy Support Assistant

EUPD

Emotionally unstable personality disorder

Mary Sheridan Centre

Provides community health services for child health in
Lambeth and Southwark

MASH team

Multi Agency Safeguarding Hub team

NVQ

National Vocational Qualification

ODD

Oppositional Defiant Disorder

PDA

Pathological Demand Avoidance

SEN

Special Educational Needs

SENCO

Special Educational Needs Coordinator

Sunshine House

Southwark's Child Development Centre

Summerhouse

Southwark's Primary Behavioural support service and provision

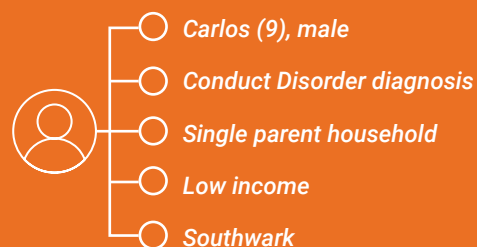
SILS

Southwark Inclusive Learning Service

Carlos (9)

Family 1

OVERVIEW



OTHER FAMILY MEMBERS

Mum: **Andrea**

Siblings:
Shannon (11)

Introduction

Andrea lives with her daughter Shannon (11) and son Carlos (nine) in a split-level flat with three bedrooms and a small balcony.

Andrea is of Jamaican and Guyanese (Afro-Caribbean) descent. Her children's father is in contact, but does not live with them. Andrea now has a partner who lives in Jamaica.

Until the pandemic, Andrea worked as a daytime security guard. During the past year, she has been taking online CCTV operator courses related to her work instead. Andrea also runs her own small online business selling clothes.

Andrea likes that there are activities for the children in their neighbourhood, and that their area is multicultural.

"It's Caribbeans here where I live, and we all get along. Like, we say: hello, good morning, good afternoon, good evening." (Andrea)

About Carlos

Carlos has been diagnosed with CD. In March 2021, he was referred for an assessment for autism; the family are waiting for the results of this.

Carlos likes football, and previously played for Crystal Palace's Under-11s football team. He still plays with a different team that has known him since he was three years old. He loves video games, and colouring and drawing with his sister. His bike is one of his favourite possessions and he rides it to school most days.

Andrea became concerned about Carlos's behaviour when he was three years old. Initially, she thought it was related to him having a stammer: *"He was expressing his feelings, because he couldn't talk at the time."* Andrea states that people used to misconstrue what Carlos was saying, which would make him take his frustrations out on others.

Carlos's behaviour includes banging his head on the wall, telling lies, wetting and soiling himself at home and in public, shouting and swearing, running across the street, and fighting his sister. There have been incidences where, Andrea says, *"he starts smashing up the house and throwing things around"*.

"When he's good, he's good. It's nice. He's a lovely boy. Like, he's so lovely. I just don't know what's going on with him. I want the best for him... He is like my baby. I love him so much. When he's got the anger side it's really bad." (Andrea)

According to his mother, Carlos sometimes doesn't realise he has done these things, and then gets even more upset.



Current situation

Carlos cannot brush his teeth, dress or wash himself without his mum's assistance. He recently kicked Andrea in the stomach when a hairdresser friend was at their flat, as he felt his new hairstyle would cause his peers to laugh at him. Andrea spoke to Carlos the next day about this; he said that he was being teased at school, and the teachers weren't doing anything about it. Andrea is trying to encourage Carlos to say when this is happening and *"not carry the anger inside him"*.

Andrea does not know all of Carlos's triggers, saying that sometimes he seems to switch without there being an obvious reason. According to Carlos's grandmother:

"He doesn't like when someone puts a stop to what he's doing. That's when he's really out of control, and it's hard to control [him]. He likes to control people. He don't want to listen to no one." (Carlos's grandmother)

Carlos can get bored easily and Andrea likes to try and keep him active. Football is a particularly effective outlet for his anger.

"That's the only way that I can let his anger; he takes out his anger on the football. That's the only way, boxing or football... I'd rather he takes it out on the ball than take it out on me or his sister." (Andrea)

Andrea feels that Carlos knows how to *"go around"* her. Andrea was instructed by teachers and therapists to ignore Carlos's behaviour, or take away something that is valuable to him — such as the remote control.

However, Carlos's grandmother disagrees with this advice — she feels that there is a way to speak to Carlos that will make him understand that his behaviour is wrong. She prefers talking

to Carlos rather than ignoring him. She also thinks that taking things away from him just exacerbates the negative behaviour.

Andrea talks about how she has been struggling with the advice:

"Why must I ignore him? Why can't I tell my child its wrong and put him on timeout? I feel the rule the therapist and the teacher has given may make my child worse as he is not stopping when I ignore him, he gets worse." (Andrea)

Impact

Carlos's behaviour has an impact on his older sister. Andrea worries that Shannon doesn't have much time for herself, as Carlos will try to get her attention and fight with her. Shannon expresses that she finds it hard to relax, and describes her room as her *"safe space"*, where she uses fidget toys and slime to calm herself down.

Shannon reacts angrily at school to children who present similar behaviours to her brother. Experiencing the same behaviour at school as at home puts *"more stress"* on her. Andrea is worried that her daughter's attitudes to school are changing.

"Shannon loves school, but recently she don't... She read novels, she read books. She don't do them things no more... You see her on the computer or something." (Andrea)

Carlos's behaviour has also affected his life at school and outside it. While he has a small group of friends, Carlos finds school challenging because his stammer often causes confusion among his peers. His behaviour caused him to lose his place on the team at Crystal Palace.

Andrea suffers from asthma and is anaemic, so struggles with tiredness and keeping up with Carlos. She finds it hard not knowing what is wrong with Carlos, and spends a lot of time trying to figure this out and support her son.

Support

After Andrea became concerned with Carlos's slow speech development, it took a long time to get support. When Carlos was four years old, he started going to speech and language therapy every week at the Mary Sheridan Centre.

Andrea and Carlos used to go to Sunshine House every week for therapy, but when the pandemic happened these switched to being virtual. Andrea asked if she and Carlos could have virtual meetings at the school, using the space there. However, on at least one occasion, Carlos started to smash things in the room and had to go back into class while the therapist continued to talk to Andrea.

Carlos has a mentor who takes him out and tries to help him through his behavioural challenges. Andrea says that although the mentor is amenable, Carlos often finds it uncomfortable walking with him in public because he is a white male.

Through Carlos's school, Andrea also has access to an early support worker. The first meeting happened recently and Andrea is feeling positive about this so far.

"She seems nice and positive as her child went through something similar... Carlos was acting a bit up, showing off, but once getting to know her, at the end as he knew she was here to help, he participated. She said she will be working with us to try and help with his disability... I am looking forward to seeing the new Carlos." (Andrea)

Andrea's family all live nearby. Andrea is really close to her mum, who comes by four times a week. Andrea's adult nephew and niece take Carlos out to play football and the park. Her partner has a son of a similar age with similar issues, and she finds it helpful to talk about it with him.

The future

Andrea hopes that Carlos gets a diagnosis that will give clarity as to why his behaviour is the way it is, so that she can be given the tools for managing it. She doesn't feel the CD diagnosis has been useful as it does not explain some aspects of his behaviour, such as soiling himself.

She fears that when Carlos enters secondary school, he will be a target for conflict. Andrea believes having a diagnosis and the label "disability" will protect Carlos, as it will also give those around him some context as to his behaviour.

"Especially our race, it's too much. Most of them have ADHD... Most of us haven't been diagnosed. So you wouldn't even know they have it. So the normal boys on the road that are bad boys don't understand. They'll just pick on the vulnerable ones and end up doing harm, not knowing that the person has a disability and it's not their fault." (Andrea)

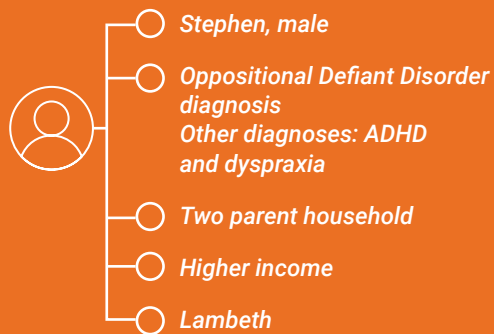
Diary task: A tour of where we live



Stephen

Family 2

OVERVIEW

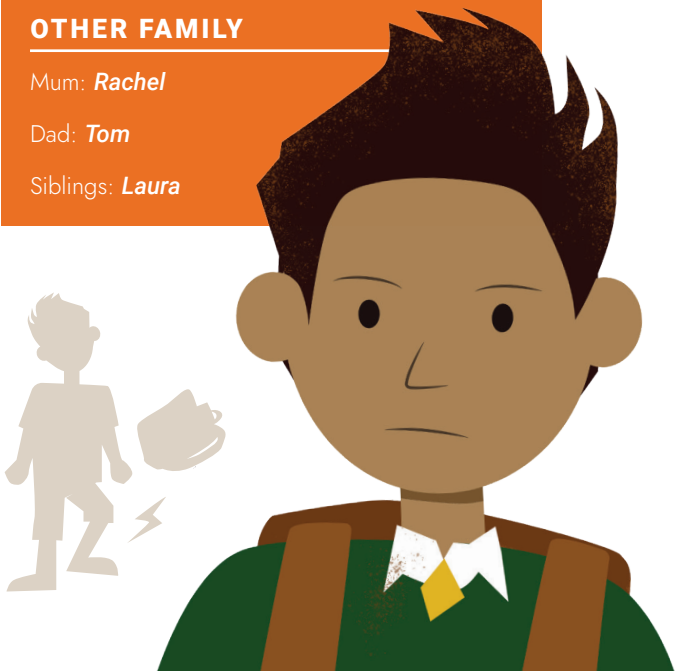


OTHER FAMILY

Mum: **Rachel**

Dad: **Tom**

Siblings: **Laura**



Introduction

Rachel and Tom have two children, Laura and Stephen.

Rachel is organised and a real perfectionist. She puts a lot of effort into planning fun and interesting things for the family to do, such as joining Scouts and a rugby team, or planning trips to museums. Tom is described by the rest of his family as being tolerant, kind and calm.

About Stephen

Stephen was initially diagnosed with ADHD and dyspraxia, and then ODD in November 2019.

Stephen is articulate and has high emotional intelligence. His family describe him as sociable, funny and tactile. He likes the *Avenger* films, *Minecraft* and *Star Wars*. He also loves nature, and lemurs are his favourite animal. His conditions mean that he can be hyperactive and has poor motor skills. He struggles to write and can fall over a lot.

Tom describes Stephen as having a short temper and says that he gets *“very cross and flies off the handle very quickly if he is pushed to do things he doesn’t want to do”*. His mum says Stephen can be very lovely and sweet one moment, and then suddenly turn into *“this utter monster”* and become aggressive and threatening. A recent example was when Stephen was upset about being late for school, grabbed a hockey stick and, in the

process of waving it around, hit his father. He also uses sexually aggressive language with his mum and sister.

Tom and Rachel say that Stephen normally behaves this way when he is resisting doing something, even if he knows it is a losing battle. The ADHD medication that Stephen takes also impacts on his behaviour at home. When Stephen gets home from school, Tom and Rachel describe it as a *“comedown”* that can make Stephen feel completely exhausted and grumpy.

Current situation

Tom and Rachel describe the gradual development of Stephen’s more extreme behaviours around the age of seven or eight years old. They realised they needed to get support after a particularly violent incident involving Laura, where Stephen reopened wounds he had previously caused her with his fingernails.

Stephen is aware that he doesn’t always behave very well at home particularly after a bad day at school.

“Getting told off [at school] makes me feel stressed. I might be looking at something else and not listening to what the teacher’s saying and they get angry if you don’t listen. And if I don’t listen, they won’t say it again usually. [That makes me feel] a bit sad. [Then] I just get really grumpy when I get home.” (Stephen)

Stephen is also currently stressed about the transition to

secondary school. The more anxious Stephen feels, particularly about school, the more frequent and ferocious his tantrums become.

Stephen doesn't often get invited to play dates or birthday parties, in part because other parents think it will be difficult to include him. Rachel recalls one mother saying she didn't want Stephen at *"her son's lovely and calm birthday party"*.

Tom and Rachel respond to Stephen's behaviour in different ways. Tom tends to avoid confrontation but also believes this is more likely to lead to *"a reduction in temperature more quickly"*. Rachel, on the other hand, thinks this equates to giving into Stephen's demands, and that they need to set consistent but realistic consequences instead. They agree that taking these different approaches is problematic.

Stephen says that being given time warnings when he is asked to do something (for example, to get ready for dinner in 10 minutes) can be helpful. When he is feeling very upset, Stephen likes to spend time alone in his room, eat food or watch a film that will distract him.

Impact

Stephen's behaviour seems to be mostly reserved for the family. Rachel says that, due to Stephen's behaviour, it often does not feel like a happy household. The family have installed locks on their bedroom doors in order to avoid getting hurt when Stephen's tantrums get really bad.

The behaviour has significantly impacted both Rachel's and Tom's wellbeing and mental health. Tom is taking antidepressants. Rachel feels like she is having to climb a mountain every single day, and has developed both anxiety and depression. She feels pressure to pretend that everything is OK

with people outside her own family. She feels like other parents avoid her because they can tell she is struggling and don't want to be involved in her problems.

"I just can't cope with this anymore – all the battles and the screaming and the shouting and the abuse, you know? I'm an intelligent professional person, but I can't cope with this. It is too much." (Rachel)

Rachel and Tom have struggled with finding an appropriate school for Stephen. They have ended up using an inheritance from grandparents to send Stephen to an independent school outside London. There are smaller class sizes and less focus on grades, and Stephen gets to spend time outside. Rachel spends weekdays in a flat near Stephen's school, and comes back to London with him at weekends and over the holidays.

Stephen's behaviour has a significant impact on his sister. Laura is described as quiet and gentle by her family, but she has endured a lot of taunting and physical abuse from Stephen – and it has led to her feeling depressed, and affected her school grades. The situation got so serious that last year the school involved social services. Rachel and Tom were unable to get CAMHS to provide any therapeutic support for Laura after this was requested by their GP and social worker, and so they eventually decided to send her to boarding school. Laura feels that this has helped because *"I don't have to deal with it I guess, because it's away from everything"*.

"The school were very worried about Laura... She was sinking and the school called social services in... All her scores went down, she wasn't doing any homework, she stopped speaking... The social worker said Laura had to be separated from Stephen... Because she would say things like, I just want to die. I wish I was dead." (Rachel)

Support

Both sets of grandparents have passed away and they are no longer in contact with other family members. Tom works long hours, and therefore most of the child-caring responsibilities fall on Rachel's shoulders. Dealing with schools, trying to access support services and managing home life with Stephen is really full-on for Rachel.

Rachel finds it a constant struggle to get teachers and staff to understand how to support Stephen effectively. Teachers tell him off and punish him for things he cannot help. Even though Stephen is having a better experience at his current school, Rachel feels they are not making reasonable adjustments for a child with his needs.

"They [teachers] don't understand his condition so they tell him off and punish him. And unfortunately he's had a lifetime off of that. So he's oversensitive to being told off and punished. Obviously he doesn't like it and he thinks it's unfair." (Rachel)

Tom does not feel that getting an ODD diagnosis had been helpful as it has not led to any tailored support, or any further understanding about why the behaviour occurs.

"It's just applied a label to something... it doesn't lead to anything in the nature of treatment or help... If you go to a school and you say he's got this, it seems to me that it leads to hostility from the school rather than to any better outcomes." (Tom)

The family have received support from social services on several occasions, and while some positives have come from it, Tom and Rachel both comment on how this support was imposed upon them. Rachel has accessed six talking-therapy sessions, and attended a parenting course delivered by CAMHS. However, all

these forms of support were time-bound, and Rachel feels that without continual ongoing support, each family member begins to slip back into their old ways of doing things.

One of the most useful sources of support had been an ADHD parent support group in Lambeth. It was through one of the guest speakers that Rachel first discovered that ODD was not a neurological issue but a behavioural one.

The future

Rachel and Tom would like to get psychological support for Stephen in order to really explore the reasons for his behaviour. Stephen has finally been put on a waiting list for therapy, but this could take up to two years to access.

“It is quite an intense, quite stressful situation that has no sort of end in sight. With most adult stresses, there is an end in sight, or you can take yourself away from a situation, but you can’t do that with a child.” (Tom)

Rachel wants Stephen to be able to get a job in the future and find a way to live well. However, she sees an inevitable route to failure unless Stephen receives the support he needs right now.

Stephen’s ‘Anger Volcano’ for home

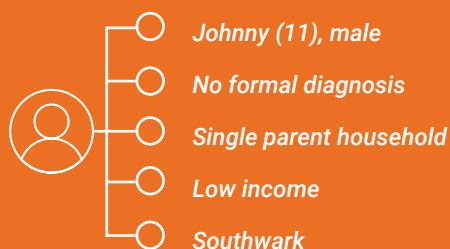
The yellow and green post-it notes are transcribed from the Zoom interview where he went through each step with the researcher.



Johnny (11)

Family 3

OVERVIEW



OTHER FAMILY MEMBERS

Mum: **Tina**

Siblings:
Jess (19)
Amy (26)

Introduction

Tina lives with her son Johnny (11) and daughter Jess (19), who is studying law at university. They live with their bulldog Poppy in a house with a garden.

Tina has another daughter, Amy (26), who lives with her partner and baby but visits often. The father of Tina's children died around two years ago. Johnny is in regular contact with his uncle (his father's brother), and Tina's mother lives locally.

Tina has lived in the area all her life and likes their neighbourhood, describing it as being close to all amenities.

Tina works half-days Monday to Friday in a school kitchen (in a different school to the one her son attends).

About Johnny

Johnny is experiencing behavioural difficulties. Johnny has no formal diagnoses yet, but following a brief meeting with a psychologist, ODD is suspected. In early 2021, the school referred Johnny for an assessment, which may also check if Johnny has ADHD and dyslexia.

Johnny enjoys playing on his scooter with friends and his computer games. He is also good at building things and is interested in carpentry. He designed and made some clothes during the lockdown, which he would like to sell. Prior to the

pandemic he took up boxing, which he loved. Tina says this was an excellent outlet for him, but he has no current interest in getting back into it.

Johnny can be pleasant to be around, but Tina says his mood can change easily:

"It's just that little switch. He'll go from one to 10 in a matter of seconds, if something's not going his way, he's going to get frustrated or something like that."
(Tina)

Johnny does not like authority, and he does things when he's ready to, in his own time. Tina reports that it is very difficult to get him to bathe regularly despite him taking pride in his appearance. He is often bored and needs frequent stimulation, as he has a lot of energy.

Johnny can be aggressive and defiant when being told off. His behaviour has also involved lashing out at his mother, including severe incidents where police have needed to be called and where Tina has received a black eye.

Context

Johnny's behavioural difficulties became more problematic towards the end of year 4. School was the main concern. Johnny often refused to get up and go to school, and his conduct could be challenging once he was there.



Tina feels that Johnny's behaviour was exacerbated by his father's passing, which was sudden and unexpected: *"One minute he was there and the next minute he wasn't, it was quite quick."*

During this time, Tina says that Johnny behaved more *"out of control"*, and he experienced a lot of anger, but did not show any other emotion, such as grief by crying. He also demanded to know Tina's *"every move"*.

Current situation

Johnny is currently in year 7. Tina explains that the transition from primary to secondary school was difficult, and there are issues most days.

Tina suspects that having to follow rules is one of the reasons for this. For example, Johnny struggles with timekeeping, and minor things such as not having certain types of pens to hand when he is supposed to. He gets frequent detentions, and was excluded for leaving the school premises during the day and going home, and for kicking doors.

***"I think it's more authority, like as in teachers and things like that, it seems like more authority, the more they tell him, 'You can't do that,' the more he – it's like he wants to do that. It's like, it's quite strange."* (Tina)**

Johnny's behaviour is a lot better on weekends and Tina believes this is because there isn't a routine to follow. When they've been on family holidays in the past, Johnny's behaviour has improved.

Tina explained that Johnny's behaviour is changing as he is getting older. While he does not tend to lash out anymore, or hit and throw things, he is more verbal. Johnny does not use strong language, but rather says that he hates Tina, or says, *"I don't want to be here in this house."* However, Tina has seen some positives when Johnny calms down more easily and takes timeouts.

Tina says that over time she's learned to reward Johnny's good behaviour by giving him pocket money, or allowing him to stay out with friends for longer.

Impact

Tina feels that Johnny's behaviour has changed her. She describes herself as once being strong, but now feeling powerless and anxious about Johnny's unpredictable behaviour.

She is often preoccupied about how he is doing at school, and is unable to switch off at work. Johnny's behaviour has made Tina not want to come home at times, because she is unsure of what she's coming back to. When she has time apart from Johnny, she feels more relaxed.

***"I've always been that strong woman... and then all of a sudden, you just seem a bit powerless... my girls was nothing like this. Then you think, 'Oh I'm doing something wrong.'... I've never had all that anxiety or anything, but now you do, because it could be little things that, you know, 'Oh something's going to happen now, it's going to blow up,' a bit like that."* (Tina)**

Johnny's behaviour can have a ripple effect on the family. If he argues with his sister Jess, she can get angry with Tina and then they argue.

Tina explains that Johnny does get upset about his behaviour, but he finds it challenging to talk about his emotions and can be closed off.

Johnny has a couple of close friends, and Tina has seen him at his happiest when he's spending time with them. However, Tina also feels that Johnny's behaviour can prevent him from reaping the benefits of attending school; and when behaving poorly, he is prevented from playing with his friends.

***"It does affect him because he ends up getting upset some of the time as well. And he'll end up crying a little bit as well, which you never used to see before. He holds a lot in, you know he don't know how to communicate like that."* (Tina)**

Support

In early 2020, after an initial referral from social services, the family started receiving help from a support worker from Keeping Families Together (KFT). This ended when Johnny moved to secondary school in autumn 2020, but was reinstated when Johnny's behaviour started to worsen again.

In spring 2021, Johnny started attending SILS which has smaller class sizes, and more one-to-one support. This was initially for six weeks, but Tina is hopeful that Johnny would be able to stay there until year 11.

ILS has been a positive experience for Johnny so far. Tina feels the staff are receptive to his needs and that Johnny is learning there, whereas he was falling behind at secondary school.

“From when he goes there and when [he] comes home he’s just a completely different kid... he might be [anxious], like I said, on the first day when he goes back there, because it’s the first day again, you know, ‘cause he’s had two weeks off, but then once he goes, he’s like right fine. And he’s happy because he’s happy with himself. I know he’s proud of himself.” (Tina)

Tina says that KFT support has also had a positive impact, including conducting check-ins, doing activities with Johnny, and acting as a go-between at times. Johnny and his KFT support worker have an excellent rapport.

Family members have been there for Tina and Johnny when his behaviour has become overwhelming. For example, Tina’s mother looked after Johnny for three weeks after he threw something at Tina and gave her a black eye.

The future

Tina hopes that Johnny will get his diagnosis, and continue to be supported by KFT and CAMHS afterwards. SILS has counsellors available to pupils, and Tina hopes that one day Johnny will open up about his feelings around his father’s passing.

In the future, Tina wants Johnny to do an apprenticeship. However, she does worry about his motivation and anxiety around studying, which might cause some setbacks along the way.



Tina's diary task during the research

WEEK ONE

What has been the general mood at home this week and what has affected it?

Mood has been up and down. Johnny went to view a new school but at first didn't like it, so his mood was bad until he found out a boy he knows will be going too, so now he's happy. He starts on Monday.

Good to hear that Johnny is feeling better about SILS now. Hopefully it'll be really positive for him. What was it about the school that he didn't like?

I really think it will be positive for him, and only six kids in one class. He just don't like change, so he felt anxious about going. He does still feel anxious, but he can manage it better now he knows a friend is going.

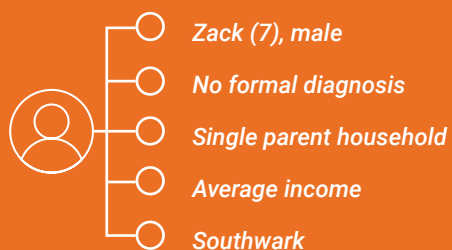
What has been the best part of your week and why? You can include a reason directly related to yourself or to your family as a whole.

Best part of my week is when Johnny went to view SILS and he enjoyed it, and I also realised that SILS could possibly help him. 😊

Zack (7)

Family 4

OVERVIEW



OTHER FAMILY MEMBERS

Mum: **Hayley**

Siblings: **Emily (13)**

Grandmother: **Kathy**

Introduction

Hayley has two children: Zack (seven) and Sophie (13). Hayley volunteers with the Salvation Army and a community group run by Parents and Communities Together. She finds these experiences a “lifeline” because they give her a sense of purpose.

Hayley, Zack and Sophie like to feed the ducks and have lunch in the park together. The three of them also spend a lot of time with Hayley’s mum and dad.

About Zack

Zack has not yet been diagnosed with a behavioural disorder. Hayley says his behaviour has been assessed at Sunshine House, and that he has been identified as being defiant. For now, his behaviour will continue to be monitored.

Hayley and Sophie describe Zack as being bubbly and energetic. He loves cars and collecting Thomas the Tank Engine trains. He also loves dressing up. However, he can be quick to explode and have full-blown tantrums.

Hayley says, “He is like a switch. You never know when it’s going to flick. My mum describes him like a ticking time bomb.” Sophie speaks about how one minute he can be giving her cuddles, and the next be punching and kicking her.

“He can get like really rough. He can go from like minuses to thousands with a click of your fingers. And he can get really harsh... He gets really mad, and he’ll go off, and you think he’s gone off to calm down, but he comes back and he’s gone off to get something to whack me with.” (Sophie)

Zack will often become physically violent. This can include throwing things, pinching, punching, hitting, kicking and biting. Zack’s nan, Kathy, describes his behaviour as “diabolical” and says it can often frighten her.

Context

Hayley is a survivor of domestic abuse, and the family have had to move around a lot. Their current council flat only has two bedrooms, which means Hayley has to sleep in the living room. They store most of their possessions at Hayley’s mum’s house, as the damp and mould ruins everything.

Hayley does not feel safe in their flat. She has witnessed drug runs, experienced several break-in attempts, and caught people urinating on their garden wall. She’s been waiting four years for the council to replace the damaged front-room windows, and to damp-proof the flat.



Hayley first became concerned about Zack's behaviour when he turned two years old. She thinks the lack of stability in the early years of his life might be a contributing factor: *"He didn't know whether he was coming or going."*

Current situation

Zack's tantrums can be daily or every other day. General triggers can involve being told what to do, wear or eat. It is impossible to get Zack to go to bed at a particular time, and normally Hayley has to wait until he falls asleep from sheer exhaustion, which can be as late as 1am.

Hayley said that Zack can make it quite clear to other children at school that he wants to be left alone, by growling, pushing or screaming. When he was four, he was suspended from nursery for pushing over his teacher.

Zack has begun to reflect on his own behaviour. He refers to his *"angry head"* and questions why he sometimes gets this way.

Hayley has tried different strategies to deal with Zack's behaviour.

"If something doesn't work twice or three times, I don't keep persisting. People say we got to stick with it, you can't just give in. I was like, but if it's not going to work, why keep carrying on doing it? I might as well save myself some stress and time and try something else. And if that works better, I'll do that instead." (Hayley)

When Zack is having a tantrum, Hayley avoids eye contact, does not say anything, and sometimes raises her hand as if to create an imaginary wall between them. Sophie agrees that it works better to ignore Zack rather than tell him off, because he wants the attention. However, she acknowledges that often they give into his demands.

Out in public, Hayley feels people expect her to respond and stop the behaviour immediately. She finds it frustrating when members of the public try to intervene, or make comments about her parenting abilities.

Impact

Hayley finds Zack's behaviour draining and stressful. She tries to predict and plan ahead for different scenarios. There are many instances where they have been told to get off a bus or leave a shop because of how Zack is behaving.

"It's stressful. Nine times out of 10, I'm worried about where I'm going to go and what I'm doing, whether it's on a bus trip or train trip... I'm always thinking, is he going to have a kick-off? Can I go a different way so that it's less likely to happen? So it's always in my head." (Hayley)

Since Zack tends to go to sleep very late, Hayley doesn't have the evening to catch up on life admin and housework, let alone get any *"me time"*. She tends to *"stick to the same crowd"* and avoids making new friends because she doesn't want to have to explain Zack's behaviour.

Sophie says that Zack's behaviour can be *"stressful, annoying and painful"*. She does not get to spend as much time with her mum as she would like. Zack's behaviour gets in the way of her doing her homework or getting enough sleep, particularly as they can't close any doors because of the damp. Zack often comes into Sophie's room to harass and annoy her.

Zack doesn't get invited to other people's birthday parties or sleepovers because of his behaviour. Hayley organised a bowling birthday party for Zack and none of his school friends turned up. Zack's nan also feels that his behaviour gets in the way of her being able to get close to him, or to do fun things with him.

"Up until he was three I always had the kids... But now with Zack, I just can't cope with him... I can't have him during the day for a long period of time because, basically, he doesn't want to do anything." (Kathy, Zack's nan)

Support

Hayley has found interactions with Zack's school to be challenging. She has been asked to attend countless meetings about Zack's behaviour and feels that staff, including the headteacher, often speak to her as if she is to blame. Zack's current teacher understands Zack's needs and how to manage his behaviour, but this is not representative of the whole school.

Ideally Hayley would like Zack to attend a SEN school. She speaks about her own experiences of school, and how her move from a mainstream school to a SEN one meant that she *"flew through doors"*, passed English and maths, and started doing vocational courses.

Hayley has not found the formal support she has received particularly helpful. Hayley visited the GP several times when she first became concerned about Zack's behaviour — but was told not to worry. It was only when Hayley was at a stay-and-play session that one of the workers noticed how Zack could get angry quickly, and helped Hayley get a referral to Southwark Family Support.

Hayley is a qualified NVQ-level childcare coordinator who has a lot of experience working with children with severe special needs, yet she has been repeatedly referred to parenting courses. For the most part, these haven't been helpful as Hayley feels that the facilitators don't understand what life is actually like for parents.

“90% of the support from people is ‘stick Mum on a course’, which is not always helpful.” (Hayley)

Zack has also received support from CAMHS, which has involved joint sessions with Hayley and attending a sleep clinic. Some of the advice did not take into account their actual circumstances. For example, they suggested leaving Zack in a room on his own until he fell asleep, at a time when they were living in a one-bedroom flat. This would have meant not allowing Sophie to go to bed until Zack fell asleep.

Hayley really values the support she gets from her mum. Sophie stays with her grandparents at least once a week. This means she can get a bit of break from Zack. Sophie also has access to a mentor through a charity called Step Out. Every Thursday they go for dinner or to the park. It is an opportunity to *“forget about everything”*.

Hayley would like formal support to be more holistic and address some of the wider needs and issues that she believes can help explain some of Zack's behaviour. This includes an improvement in their living conditions.

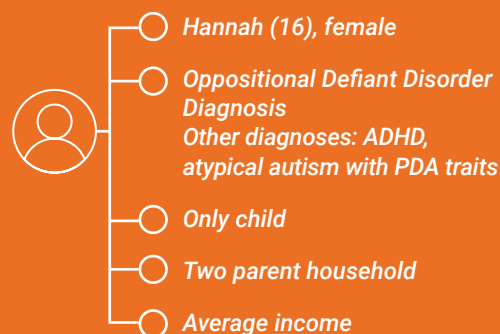
The future

Hayley is worried that when Zack goes to secondary school, he will get excluded due to his behaviour, and end up being arrested. Hayley and Sophie are concerned about who he might lash out at as he gets older. If he is violent or aggressive with someone who doesn't understand him, they might hurt him back.

Hannah (16)

Family 5

OVERVIEW



OTHER FAMILY

Mum: **Esther**

Dad: **Douglas**

Introduction

Esther and her husband Douglas have one daughter, Hannah (16). Esther and Douglas fostered Hannah when she was eight months old, and adopted her when she was 15 months old.

The family lives on a quiet street in Lambeth in a terraced house with a garden. Esther describes it as one of the nicer parts of the borough — it is easy to get everywhere, they have a swimming pool up the road and there are plenty of local shops.

Esther works as a dietitian for the NHS and Douglas is a HR professional at his own company.

About Hannah

Hannah was first diagnosed with ADHD and ODD when she was six years old, and this was later adjusted to include atypical autism with PDA traits and dyslexia. Hannah goes to a residential college in Somerset, and comes home on the weekend every fortnight and during school holidays.

Esther describes her daughter as lively and funny. She enjoys doing practical and creative things, sports, and spending time on social media. Her mum feels it can take time to see the real Hannah as she sometimes masks her difficulties.

“She’s more practical. She’s also dyslexic, so she’s struggled with reading and writing, but I think she’s naturally good at art, and naturally good at doing make-up.” (Esther)

Hannah started showing signs of anger and had outbursts when she was about three years old. She used to bite and hit other children and staff at her preschool, and her parents.

Context

Esther describes how some friends, family members and the school thought that Hannah’s difficult behaviour was due to her being adopted, and that she had maybe experienced trauma in the early months of her life. From what Esther knows, Hannah’s birth mum had behavioural issues and her maternal grandmother had experienced drug addiction.

When Hannah went into year 1, the combination of changing teachers and beginning more formal learning (such as reading and writing) meant that Hannah’s behaviour deteriorated.

“She was expected to start reading, she couldn’t do it. Because she’s not stupid, she was aware that she couldn’t do it, so her behaviour started to deteriorate. At that point, a friend of mine said, ‘I think you need to get Hannah assessed, I think this is more than the fact she’s adopted. She might have something else going on.’” (Esther)



Hannah's behaviour was at its worst during the subsequent years at primary school. She was frequently in trouble for disrupting the order in the classroom and being aggressive towards other children and teachers. Esther describes how Hannah felt that she did not fit in and that other children were teasing her.

When she was 10 years old, Hannah was so violent that Esther and her husband gave Lambeth Council an ultimatum: either Hannah would get access to a residential school or the adoption would break down, which would be costly for the council. The social worker persuaded the council to invest in sending Hannah to a weekly residential school in Wokingham. Over the last summer holiday before Hannah went to the school, she was in temporary foster care to give Esther and her husband some respite.

Current situation

Some of the contributing factors to Hannah's difficult behaviour include anxiety, feeling out of control, comparing herself to others when she can't do something, or being tired. This was particularly acute when she was younger.

"She was biting and hitting [in preschool] – now I realise it was her anxiety about not understanding everything and not being able to control her sort of fight mechanism. She would go into fight rather than flight." (Esther)

Hannah's behaviour is very different now compared to when the behavioural difficulties were at their worst. She can still be challenging and finds it difficult to process things, but the aggression and violence towards others has gone. She has learnt some strategies to calm herself down including listening to music; doing arts; and doing sports such as horseback riding, cycling and different ball sports.

Esther describes a turning point being when she saw a programme on Channel 4 called *Born Naughty*, where two of the children were behaving in similar ways as Hannah. They had both been diagnosed with atypical autism and PDA. Esther did her own research into strategies to manage children with PDA traits, and she and Douglas started using these at home. The school began to do the same, and the frequency of Hannah's outbursts reduced.

Impact

When Hannah's behaviour deteriorated, it put a lot of strain on Esther and Douglas's marriage. Nothing they tried seemed to work. Hannah would smash things in the house, and Esther and Douglas had to physically restrain her.

Esther felt isolated and she lost friends during this challenging time. Initially, she did not get the full support from her brothers as she would have wished.

She sometimes also blamed herself and her husband for their daughter's behaviour. The child psychologist at the post-adoption centre only believed that something else was going on with Hannah after having seen one of Hannah's meltdowns herself.

"I used to hear all about battered wives and I think, well, there's nothing about battered parents, it's what we are... But as she got older and we got the diagnosis – that changed, and I would think, my mum was a brilliant mum and I know I'm fine as a mum." (Esther)

Hannah is in touch with a couple of friends from school in London, and from her church youth group through Instagram.

Hannah also has some friends at the specialist residential college she now attends, but Esther describes how Hannah struggles to maintain friendships. There is a lot of drama – they are friends for a while, but then they fall out for various reasons. The same applies for boyfriends.

Esther describes how Hannah previously would connect with people she did not know online, and she would not always recognise whether it was a good or bad relationship.

"She's very vulnerable – only until recently she would just befriend anyone on the internet. And I think she's just about learnt not to do that now, but she will not always recognise when there's danger or what's good in the relationship and what isn't." (Esther)

Support

The family have accessed a wide range of support from friends and family, charities and school, and more formal support. Esther knows what her rights are, which she attributes to working for the NHS and the fact that her husband had previously worked for the local authority. They understand how to escalate things when needed.

The family first received support from a child paediatrician at the Mary Sheridan Centre and they were later referred to CAMHS. Hannah was put on antipsychotic medicine, which made the outbursts less intense but did not fully help. The team at CAMHS felt that Hannah was not on the autism spectrum. Esther was in touch with different charities, and one of them recommended the CIPP team at Maudsley Hospital as a second opinion. This team supported Hannah to be diagnosed.

During this time, Esther also accessed parenting groups (from an ADHD charity and a post-adoption charity); and received some emotional support from her family, and from a neighbour who would look after Hannah to give the parents some respite.

A crucial element of support was Hannah moving to the specialist residential school. Hannah spoke positively about this, as well as about the residential college she currently attends. It has made a difference to have smaller classes and understanding teachers, and to be surrounded by other young people who have similar needs to her. She also has access to occupational therapy.

The future

Hannah would like to study performing arts at college. Esther finds it hard to hope too much for her daughter's future. Based on her own research, outcomes for young people with PDA are not that good.

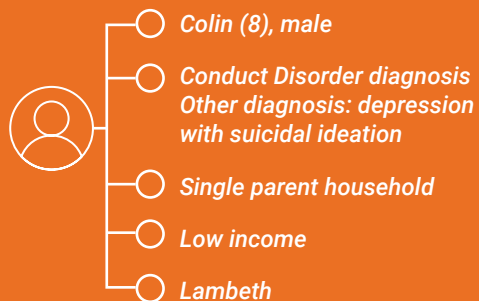
“That cliff edge of support is when she leaves college. It feels like there is very little support once they become adults, and I think young people like Hannah, traditionally if they have a mental illness they could get supported accommodation, but it’s about getting the right help for Hannah.” (Esther)

Esther and her husband would like to have more support from Lambeth Council so Hannah can stay in college for as long as possible and develop in a safe environment. Esther worries that it might be a challenging time for the family when Hannah leaves college, and they are exploring ideas about how to support her as an adult.

Colin (8)

Family 6

OVERVIEW



OTHER FAMILY

Mum: **Rosie**

Siblings:
Two older brothers

Introduction

Rosie lives with her youngest son Colin (eight) in a ground-floor flat with a garden. She has two older sons (16 and 21) from a previous relationship; they live with their dad in the local area. Neither Rosie nor Colin have had any relationship or contact with Colin's father since Colin was three years old.

Rosie was brought up in the area and likes the neighbourhood. She works as a self-employed interior designer. Outside of work she enjoys visiting her local friends and spending time in nearby parks.

About Colin

In 2021, Colin was diagnosed with CD and depression with suicidal ideation.

Rosie thinks that to someone who has never met Colin, he would appear to be a shy and quiet boy. He spends his time playing video games and board games, watching football, and riding his bike. Colin also loves animals and hopes to one day become a vet.

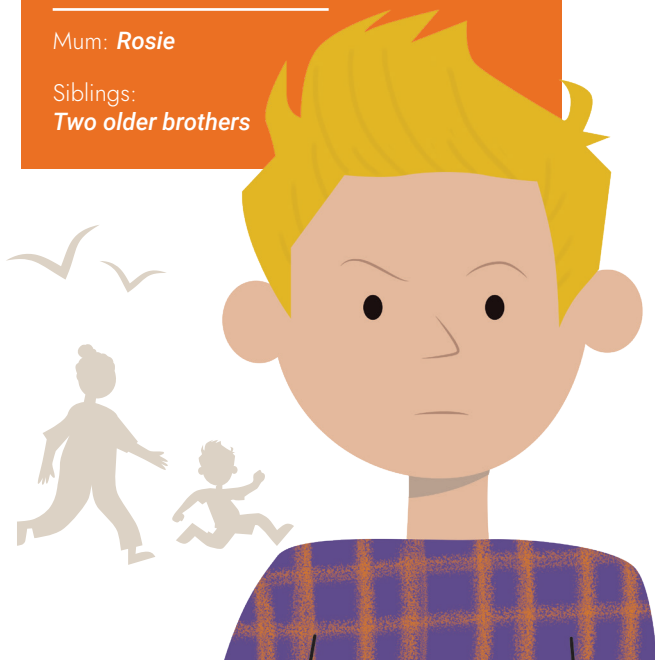
Rosie first noticed Colin's behaviour when he was between three and four years old. He had bad tantrums, suffered from attachment issues, and often physically expressed his anger. For example, when Rosie would drop Colin off at school he would shout things such as, "I hate you."

"He would scream and kick even to the extent where he was throwing his shoes off and running around the playground. The teachers had to kind of grab him off me and literally hold him down, and he would just be in an awful state." (Rosie)

These behavioural issues persisted and got more frequent and severe. Rosie describes Colin's outbursts as rude, controlling, manipulative, and sometimes violent towards Rosie or his brothers. For example, Rosie and her middle son were once watching TV while Colin was sitting in another room. They started singing along to a song on the TV, and Colin asked them to stop. They carried on and then Colin went into a "rage", started pushing both of them and threw a pillow at Rosie's head. This escalated as Colin started to punch his brother who was trying to hold Colin down.

When Colin has an outburst, Rosie feels he becomes a different person. He will be happy, and then when he starts going into an outburst, his demeanour changes and he can't control what he is doing.

"It's like Jekyll and Hyde... I know it's coming from him but it's not who he is. People find it hard to understand... He changes. His eyes dilate really big and it's like he's possessed, like he's being taken over and it's someone else doing it... He always says sorry and he doesn't know why he does it." (Rosie)



Rosie also describes Colin as sometimes displaying “*sociopathic or perpetrator behaviour*”. Colin’s father was a perpetrator of domestic abuse towards Rosie. This started when Rosie was pregnant with Colin and continued until Colin was three years old, when Rosie was able to leave the relationship. Rosie is concerned that Colin has both been impacted by this early childhood trauma and potentially inherited behaviour traits from his father.

Current situation

The frequent (multiple times a week) and unpredictable nature of the outbursts have made it difficult for Rosie to manage social situations and daily life.

Rosie has been unable to see clear triggers for Colin’s behaviour — although Colin highlighted being annoyed by his brothers and being unable to do things he wants to do as factors that make him angry.

As Colin grows older and gets physically bigger, it is harder for Rosie to intervene physically and control the situation to stop him from hurting himself, someone else or her.

“My main concern out of everything going on now is that he’s older and he is getting bigger. I mean he’s only eight and he’s massive for an eight year old. I can’t physically pick him up and he’s only going to get bigger. I can just about hold him back, but he’s got strength. Even my other sons struggle with him.” (Rosie)

Rosie tries to calm down before she responds, and she leaves Colin to have a moment to express what he is feeling before engaging with him. She has found that in the majority of cases, others intervening when Colin starts having an outburst worsens the situation (particularly when it is someone Colin knows).

Impact

Rosie lives with a constant sense of anticipation and anxiety about where and when an outburst might happen, and how others will react.

“My friends always say to me, ‘You never relax.’ I’m always waiting for something to happen. And most of the time, if I’m honest... I’m always thinking is something going to happen.” (Rosie)

This has resulted in Rosie sometimes feeling anxious to go out, and withdrawing from family and friends. She feels that no one understands what it is like for her and Colin.

“When he acts like that, I feel like I don’t want to be around anyone, I just want to get him home and that’s it. My other children understand and we’re all in this together but with my friends... I don’t want to listen to what they want to say, I know they don’t understand.” (Rosie)

Rosie has also struggled to find time to herself. Colin’s attachment issues mean that he does not go to sleep until she does. Rosie is also reluctant to allow Colin to go to visit friends and family by himself.

While Colin and Rosie both have good relationships with her two older sons, she says that they sometimes question how she handles Colin’s behaviour. Rosie feels unable to go to her parents for advice because they live far away, and they tend to recommend punishment that she knows will not work. As a result, her informal source of support is mostly her friends.

Support

Rosie first shared her concerns about Colin’s behaviour with his nursery school. However, as Colin only had outbursts at home, Rosie had a hard time convincing the nursery that Colin needed support. Then about six months later, when Rosie arrived to collect Colin from the nursery, he began physically lashing out and throwing bikes around. It was this incident that first led to Rosie seeking a formal assessment through her GP.

The first assessment led to no formal diagnosis, and Rosie was told that Colin was “*fine*”. However, by the time Colin was in reception class, he suffered significantly from attachment and anger-control issues. His current school arranged an ELSA and a SENCO.

With the help of the ELSA, Rosie was able to take Colin for a second assessment in early 2020, where they were told that he qualified for CAMHS. In summer 2021, Colin started receiving counselling and was formally diagnosed with multiple conditions.

Throughout the process of seeking formal support, Rosie has often felt unheard.

“It feels like I keep repeating myself and it’s like, you know, smacking your head against a wall constantly.” (Rosie)

Rosie feels that she would not have been able to go through the multiple pathways and stages were it not for the support of Colin’s school and the ELSA.

Rosie worries that the current 12 weeks of CAMHS counselling is not enough to fully understand Colin's behaviour or address underlying issues. She feels that there might be another health condition that contributes to Colin's behaviour. The paediatrician has recommended Colin is assessed for autism. Rosie is determined not to stop pursuing these options until Colin is getting the help he needs.

The future

Rosie's fear for the future is that Colin could face serious consequences for not controlling his anger, and that he could unintentionally get himself into serious trouble, hurt someone or end up with a criminal record.

"Right now, at this precise moment, he's doing well academically but if something happens, like if someone makes him mad, it could set him off a different path and he could end up in prison... I don't want him to go down that road just because of the issues he is facing now and that's my worry." (Rosie)

Despite the current challenges that Rosie and Colin face, Rosie feels that they have a close, loving and generally positive relationship. Rosie remains hopeful for the future and wants Colin to be able to fulfil his potential.

"I would like him to do well, I mean all parents want that, but I want him to do well and fulfil his dreams. Because he has them – he likes animals and he wants to be a vet. He wants to do things and I want him to achieve that, and I don't want this to hold him back." (Rosie)

Colin describes and draws his hopes for the future



What are your hopes for the future?

Colin: I want to go on a boat. I want to go to Japan on the boat. I want to go rock climbing and go on a ladder to space. I love planets and space. Did you know that Jupiter has a hole?

Colin's week using the blob tree to explain to the researcher what had made him happy and upset, and what school was like

"I picked this one because it made me feel like I just fell off something. To make me feel better, I like to look at things that make me laugh."

"It looks like he's mad. He's standing outside. I picked it because sometimes I think school is really boring and sometimes I think it's not very good."

"I was the happiest this week when we went to the farm and saw chickens. I picked this blob because he's got peace sitting by himself and looking away."

"And the one in the window. Because in the farm, there was gates around the animals. They look like this window so it feels like it's in the farm."

"This blob is for school. One is helping their friend climb a tree, I picked it because sometimes we help each other at school."

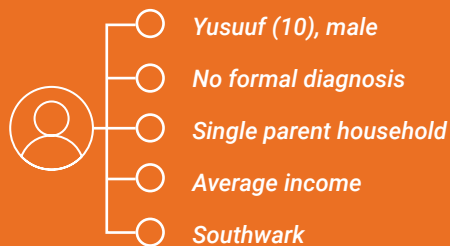
"I was upset on Monday or Tuesday, when we went to the farm. I picked the blob walking into the door because it made me feel like I wanted to run off."

■ HAPPY ■ UPSET ■ SCHOOL

Yusuuf (10)

Family 7

OVERVIEW



OTHER FAMILY MEMBERS

Mum: **Ayesha**

Siblings:

Claudio (7)

Layla (12)

Imani (14)

Another sister who lives abroad (16)

Introduction

Ayesha, originally from Somalia, lives with four of her five children in a three-bedroom flat with a balcony.

The family has lived there for five years, after a year of being homeless. Yusuuf (10) and Claudio (seven) share a bedroom. Their two sisters, Imani (14) and Layla (12), share another room. Ayesha's oldest daughter (16) lives in Yemen.

The children each have a different father. Imani's father passed away when she was a baby. Claudio sees his father regularly, while Yusuuf and Layla see their fathers sporadically.

Imani, Layla and Claudio are currently top of their classes academically. Ayesha is studying to become a nurse. She is currently in her fourth year of studies, after starting at Level 3 in English and maths.

About Yusuuf

Yusuuf has behavioural difficulties. He has not received a formal diagnosis.

Ayesha describes Yusuuf as having a short fuse. He will shout and become violent, sometimes injuring himself by hitting and kicking doors and walls. He has also exhibited threatening behaviour towards his siblings (for example, insisting that he choose what

they watch on TV and refusing to share the remote control), becoming aggressive if they resist.

"His behaviour was really bad. Like really bad... he will break glasses, break plates, everything near him, bang on the door, wall, everything... When he starts to be violent, when he starts to break things, he will start to push me and fight me." (Ayesha)

Yusuuf can bully others around him, and often gets into fights. His school has called the police two or three times because of his behaviour, and he was excluded for a week after running away. He has also hit his teachers.

Ayesha describes Yusuuf as lacking in self-esteem. She says that he is sensitive, doubts his abilities and does not feel confident to express himself, becoming disruptive instead.

"He wouldn't even express his feelings 'cause he doesn't know how to express his feelings. And that is another problem. And I think it builds up, builds up, builds up, until [there is an] explosion." (Ayesha)

Ayesha talks about Yusuuf's mixed heritage, but says that he is rejecting his Black ethnicity. He regularly insults one of his sisters because of her darker skin tone.



Yusuuf does not like leaving the house, even to go out with his siblings. Ayesha says he mainly likes to be left alone to watch TV, play video games or be online.

Context

Ayesha says that Yusuuf has been a challenging child since he was four years old. Back then, when Yusuuf would get upset he would run away from her, break toys, refuse to share, play alone, not talk much and have angry outbursts. This was around the time that the family were homeless.

Ayesha feels that Yusuuf's behaviour has gradually worsened, and he has increasingly struggled with his anger. This makes it difficult for him to engage and interact with others, including his siblings. Ayesha feels that things worsened once he started attending school, though she says he was able to control his outbursts in front of professionals, such as doctors.

Yusuuf's father lives in Middlesbrough. They speak on the phone but only see each other every three or four months. Yusuuf seems to be losing interest in his father. There have been times when his father has been late or unable to visit, and Ayesha has noticed that Yusuuf is unforgiving when it comes to these broken promises.

Current situation

Ayesha describes Yusuuf as unable to cope with a lack of control. When he feels threatened in this way (for example, by being told what to do), he gets angry and lashes out. He struggles with sudden change.

"If he doesn't take control in anything, anything, he gets angry and upset and he starts to snap. He wants everybody to follow him. He wants to take control. He wants to control people." (Ayesha)

When Yusuuf loses control, he may not remember what happened during an angry outburst, despite often becoming tearful about it.

"And that's what worries me is his anger. Yeah, he could kill you and he will not remember." (Ayesha)

Other triggers that Ayesha has noticed include poor sleep, and eating sugar and processed foods.

Ayesha says that things deteriorated for Yusuuf during lockdown. She discovered Yusuuf had been secretly watching porn in his room. Ayesha was very upset by this, worrying about the negative impact it has had on Yusuuf's behaviour — such as influencing him to use sexually explicit and derogatory language. Ayesha has since put further blocks on his electronic devices.

While there are some periods when Yusuuf is calm, his family and school teachers try not to trigger his anger. Ayesha now encourages Yusuuf to draw when he's angry. She also disconnects his devices and will sit with him in a quiet room to help calm him down.

"If there's fighting like [a] physical fight, I don't take it. I say, 'You know what, just go to your room now.'... Or if he crosses, more like pushing me, or when he called me a prostitute. He called me a woman that [has] different men in her life and different kids. That's how bad he will make you [feel]. That's when I say, 'You know what, that's enough.'" (Ayesha)

Impact

Ayesha describes life at home as like a boarding school where she acts as a friend as well as a mother to her children.

There have been times when she has not wanted to live with Yusuuf and has felt like there is an *"enemy in the house"*. Yusuuf's siblings have also said they can feel unsafe around him.

The situation can leave Ayesha feeling stressed and she has sometimes struggled to keep up with her studies.

"Yeah. It puts stress on me. Yes. Because I couldn't focus on... I had to, well, I signed myself [up] to do an online course and I couldn't focus on that course... I'm paying for it, but I can't do it anymore because of the stress. So, I had to enrol myself to go to normal college instead of doing it online." (Ayesha)

The family as a whole tend to go out less due to Yusuuf's reluctance to leave home and his behaviour when they are out. However, the family do attend church every Sunday, which Yusuuf engages with.

Ayesha worries about the impact on Yusuuf's friendships, and feels that Yusuuf is often not invited to social events. However, his sisters Imani and Layla have a different understanding of his ability to make and keep friends. They say that *"he's actually got a good amount of friends"* at school.

Support

Ayesha says that she receives a lot of support from Yusuuf's school. For example, they allow him to call her when he is upset. She says that they communicate with her regularly, and have instigated a referral to CAMHS and the Early Help Prevention Team. They also allocated Yusuuf a key worker, and called social services after Ayesha said she felt overwhelmed. A CAMHS therapist has helped Yusuuf with expressing his feelings.

In the past, Yusuuf's school has talked about expelling him, but he now attends Summerhouse (a school for children with challenging behaviours) twice a week. Ayesha feels that Summerhouse has built Yusuuf's confidence and improved his behaviour at home.

Ayesha's neighbour sometimes babysits the children, particularly the youngest. Her cousin and aunt also help out.

"I have my cousins and aunts, but you know, everybody's busy with their life. My auntie used to help me a lot, but now she's getting old. She's 76 now and it's kind of like, I'm worried about her anyway." (Ayesha)

The future

Ayesha describes worrying about Yusuuf's future, and she is aware that he is behind academically. He is currently dressing in clothes for boys aged 15-16, and she worries that he will get into more trouble as he gets older and physically bigger.

Ayesha is keen for Yusuuf to receive a formal diagnosis, as she feels it would mean access to further support — such as more time at Summerhouse for Yusuuf, and more respite for Ayesha.



Ayesha's diary task during the research

WEEK ONE

What does a good day look like for me and my family?

If there is no trouble, no problem, no attitude or fighting between the kids. They all sit down and watch TV, or play together in peace. That would be a good day.

What does a hard day look like for me and my family?

If there was trouble between the siblings. If Yusuuf was not happy about something, he doesn't express his feelings. He'll get moody and harass everyone about it. He'll just create trouble between the siblings. "If I'm not happy, everybody's not happy." That's how it works with him.

What kind of a day are you having today?

So far so good. Yusuuf is in a good mood so I'm happy. I feel very good. Because there's no trouble.



WEEK THREE

What has been the most challenging part of the week, and why?

A challenging part of the week was two days ago when my son kicked off; he was screaming and kicking the wall. It was difficult. We were going outside, and he refused to have a shower. He just wanted to go out in his dirty clothes like a homeless person. I was like, "No no no, you must get changed and have a shower." Me and him were arguing, and then he kicked off and broke things in the house because I told him I wasn't going to take him like that.

Has anything been worrying you this week?

Not really, apart from if I'm alive today and he does this. Tomorrow, how is he going to cope? I don't know. That's probably the worry I have about him.

Other than that, I'm not worried about anything else.

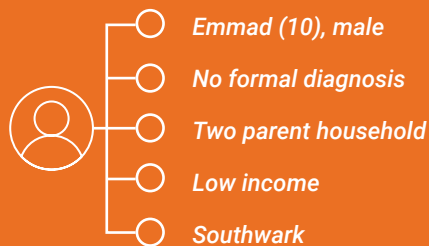
What kind of a week has the whole family have this week?

We had a good and a bad week. The beginning was good. The middle was a bad two days. Then Yusuuf went with his stepdad and his son. It's a bit of a break. When I spoke to my ex he said he's fine and there is no trouble. He's just having fun with them.

Emmad (10)

Family 8

OVERVIEW



OTHER FAMILY MEMBERS

Mum: **Jennut**

Dad: **Muhsin**

Siblings:
Aneesa (9 months)
Rahma (3)
Sabeeha (14)

Introduction

Jennut is a mother of four. She works as a healthcare assistant, and her husband Muhsin is a security guard who works long shifts.

The family live in a two-bedroom flat provided by the council, but want to move as it's too crowded for them. They like to do things together including watching movies and going to the park.

Jennut has lived in the area for more than 10 years and loves it. She feels a deep sense of community with the people who live in the building. They have a WhatsApp group to coordinate support when anyone is facing any difficulties.

About Emmad

Jennut has three daughters (14, three years old and nine months). Her son Emmad (10) does not have a formal diagnosis, but is currently on a waiting list for an assessment to see if he qualifies for CAMHS support.

Jennut describes Emmad as a kind, generous and soft child, even though he likes to come across as tough. He loves to play video games and watch TV, YouTube and movies. He does not like his primary school, but has a few close friends that he likes to see and play with.

However, Emmad's mood can change quickly, and he can stay in a "bad mood" for a long time, struggling to manage his anger.

"He gets emotionally upset very easily... There will be bad days when his mood goes off and that day will be really hard... You can see it literally on his face that day and he will try to get his way, he gets very rude and angry." (Jennut)

Context

Jennut initially started to notice his behaviour when Emmad was around four or five years old. He used to have tantrums and be very emotional. By the time he was seven years old, it started becoming more serious. Jennut says that Emmad started using "bad language" and getting very angry and confrontational.

She initially thought it was because he suffered from attachment issues, and the birth of his younger sister (Rahma) also caused some jealousy.

Current situation

Emmad's challenging behaviour has been increasing in both scale and frequency. This includes outbursts, which involve him being physically aggressive and in some extreme circumstances threatening to hurt people. Jennut feels Emmad gravitates towards negative behaviour.



“With Emmad, if he learns something or hears something that is good, that goes out of his ears. But if it’s a bad thing, it stays and he’ll repeat it. He will go and talk about it... He’ll go to school and start doing things.” (Jennut)

Emmad describes how he can feel:

“Something that makes me angry is when my mum takes away my phone. Then I get more angry when she says I have to do a [chore]. It makes me angry because I don’t like to do stuff and I’m really tired. It makes me the angriest when my sister tells me off because I make loads of noise. I feel like exploding. I think I’ve exploded before, like I was so angry that it felt like my whole body was red. I felt really, really mad and like I just couldn’t control myself. Sometimes I just punch the wall, but it doesn’t make me feel better.” (Emmad)

Emmad finds it hard to follow instructions and authority. A constant challenge at home for Jennut has been around setting rules and getting Emmad to do things he does not want to do — such as his household chores, homework or Arabic lessons. Jennut often feels that it takes several attempts and arguments to get Emmad to do simple things. Emmad becomes frustrated at not being able to do what he wants (for example, when Jennut has put a limit on when he can watch TV or set a parental control on their devices), and this then escalates into more aggressive behaviour and threats to “kill” the person responsible.

Jennut describes how Emmad’s relationships with his sisters can change from being very close and loving to severe fighting. Interactions with his sister Rahma (three) appear to be a common trigger — for example, when she plays with his toys.

“If she goes and touches his stuff, he will start cussing her, start being angry, upset. I know he will use abusive language, like ‘stupid’ or ‘idiots’, or say ‘go and die’ or ‘go to hell’... It sometimes gets violent, especially with the little one. He will just start raising his hand on her. With her, it’s frequent.” (Jennut)

Jennut is trying to figure out how to parent Emmad and discipline him in a fair manner, while ensuring that he feels loved. Her husband Muhsin works 12-hour days and over some weekends, and Jennut has to make a lot of decisions herself regarding the children.

“I know as a mother, the more I’m strict on him, the more he’s going to hate me, the more he is going to do it. And if I’m always behind his back telling him off for doing things then he will start doing the opposite... but sometimes you need to do something.” (Jennut)

Impact

Emmad’s behaviour can leave Jennut feeling low, upset and angry. She is often the target for Emmad’s anger.

Emmad’s behaviour has an impact on family dynamics. Incidents are compounded by the fact that all four children share a room, and they do not always get the space to have time to themselves or to calm down.

“If sometimes he feels like he wants to sit and play by himself, there’s no space to do that. They’re always around each other and that makes them more irritated.” (Jennut)

Emmad’s behaviour has particularly impacted his relationship with his older sister, Sabeeha. As the two oldest children they are very close and have spent a lot of time together. However, when Emmad has an outburst he often says hurtful things.

“When [my parents] were working, it was always me and him against everything. When he starts saying things like ‘I hate you, you are the worst sister,’ that hurts... I’m a kid myself so it’s really upsetting sometimes. When Emmad gets angry at me, my mood changes and I don’t want to talk and I just want to be alone.” (Sabeeha)

Emmad’s experiences of school, and his relationships with his friends, have also been affected. Jennut has received several complaints from the school about his behaviour, including reports of Emmad being disruptive and ignoring instructions. Emmad has been involved in fights with some of his friends. Jennut worries that this will have a long-term impact on his friendships. She has heard from family friends that Emmad’s friends sometimes complain about him.

“What I realise is when he’s around his friends, he’s using [bad] language... He will say, ‘I’ll kill you. I’ll do this, I’ll do that.’ And the other kids, they’re like, ‘Why are you saying that, you’re mean, you’re not being nice.’ So yeah, they kind of try to avoid him.” (Jennut)

Support

When Jennut first started having trouble with Emmad’s behaviour, she looked to her friends for informal support. She would call them for advice and ask them to talk to him, and they would sometimes take him overnight. Jennut still sends Emmad and his older sister to one of their neighbours who lives in the

same building, and is considered to be like a grandmother. This often gives Jennut a much-needed break from caring for all her children at once.

Jennut and Emmad only recently started to receive formal support through Emmad's school. Prior to this, Emmad's school had indicated to Jennut that they thought Emmad required some support, but Jennut held off pursuing this as she hoped that Emmad would "grow out" of his behaviour.

Following an incident with a teacher at the school, Jennut asked for support from the school counsellor. Emmad now has an ELSA and has been referred for a formal assessment, for which he is currently on the waiting list.

The future

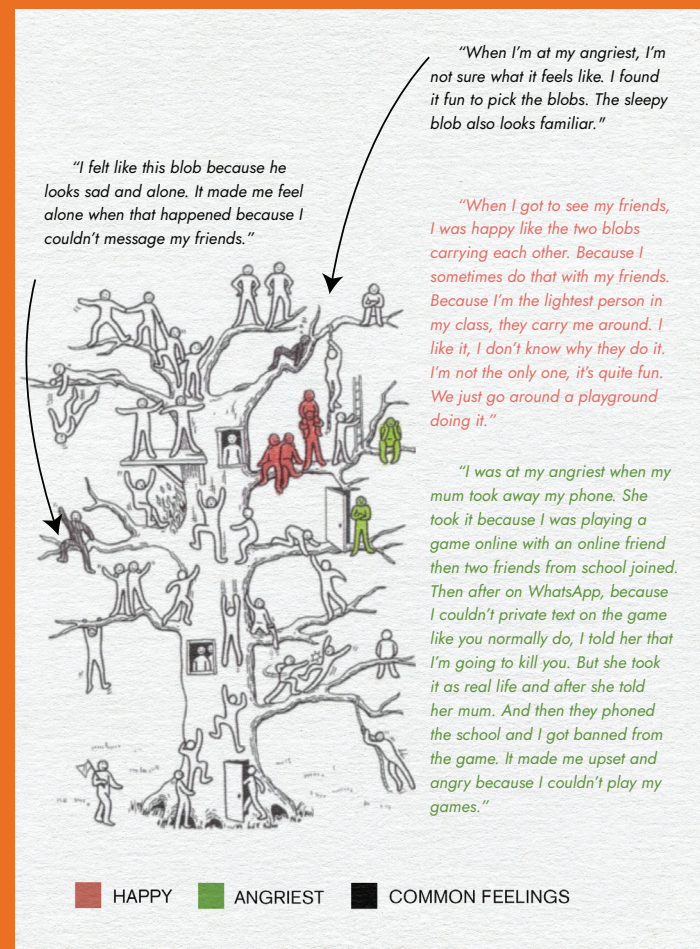
Jennut has some concerns about the process of accessing support. She has therefore not yet made the decision as to whether to actively pursue the assessment, or whether to approach her doctor for further support.

She hopes that Emmad is going through a phase, and is concerned about the potential impact of a formal diagnosis on Emmad's future.

"I don't want anything on his name, as I know that it will affect in his future life. Like if it's on the record... In the future, will this affect him to get work or get his education? That's what I'm still thinking through at the moment. I don't want him to be in the system if it's just something silly or if he's doing this just to play up." (Jennut)

However, Jennut also worries that Emmad's behaviour will escalate and further impact those around him – his youngest sister has started to emulate some of his behaviour.

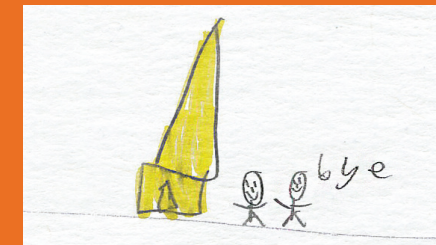
Emmad's week using the blob tree to explain to the researcher what had made him happy and angry, and some of his common feelings



Emmad's drawings and explanations for the different 'houses' (of worries, things that are working well, and dreams for the future)

What are your hopes for the future?

Emmad: The first one is my worry that my friends and family would leave me. It was hard to think of a worry because I have lots of different worries. This one was the worst one. I don't want to draw the other worries.



What is working well:

Emmad: In the second one, the good things are my friends, my family, Minecraft, youtube and bananas.



Dreams:

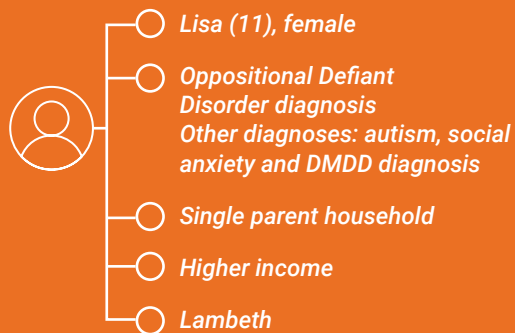
Emmad: For the future, I want to have loads of money, be a volleyball player and a youtuber.



Lisa (11)

Family 9

OVERVIEW



OTHER FAMILY

Mum: **Paula**

Siblings:
Two brothers
(13 and 9)

Introduction

Paula has three children: two sons (13 and nine), and one daughter, Lisa (11). She has been divorced from her children's father for about three years and separated for five. Her children live with her, and see their dad on weekends.

Paula speaks fondly about her house – it is located in a quiet and diverse area, and is close to everything the family need.

Paula is originally from Germany and has lived in the UK for about 20 years. She works full-time as a consultant.

About Lisa

Paula's daughter, Lisa, was diagnosed with ASD, ODD, social anxiety and DMDD in summer 2018.

Her mum describes Lisa as a bright and fun girl. She enjoys skateboarding, doing drama, swimming and writing, and she loves food. Lisa has different phases of what she is interested in, and she can sometimes find it hard to stick to one thing.

The difficult behaviours started when Lisa was about two-and-a-half years old. She struggled at nursery, and any disciplinary measures from the staff would make the situation worse. When Lisa started at primary school, her behaviour deteriorated and

she started to lash out physically towards other children and teachers. Paula worked hard to persuade the school to keep her daughter, but she was later excluded.

"I used to go to the school every single day to try to persuade them to keep her, and to support the teachers and to support the ever-changing teaching assistants." (Paula)

Lisa was then fully home-schooled for a few years. Lisa has had over 25 tutors. Paula describes how many left within the first 30 minutes because Lisa would not engage with any of the activities, or respond if they spoke to her.

"Even with specialist tutors – they can't cope with her. Lisa will speak German to me as a method of self-protection." (Paula)

During this period Paula and her ex-husband had a difficult time, and later separated.

Current situation

Some of the main triggers for Lisa's behaviour are feeling out of control, life transitions, jealousy and unfairness. She is on anti-anxiety and antipsychotic drugs to help keep her anxiety levels down.



Lisa can get bored quickly. Her mum describes the barriers that Lisa can build around her, which include not responding to people speaking to her (especially when she does not like someone) or refusing to do what she is being told. However, Paula describes how this has eased lately. For example, one weekend Lisa shook everyone's hands at a social gathering – something she would normally never do.

Lisa currently attends a residential special needs school outside London two days a week. She has been there for about a year, and overall she enjoys her time at the school. Paula wants her daughter to be in the residential school full-time, as Lisa dislikes change and switching between school and home-schooling can be challenging.

Impact

Paula describes how Lisa's situation has been hard for her personally, and has caused many sleepless nights. She left her job to help stabilise Lisa at school, which is something she regrets. Seeking a diagnosis and getting the appropriate support (which is still in progress) has negatively affected her mental and financial wellbeing.

"I just did not want to get up. I was not looking forward to the day. I would wake up at six thinking, 'Another day,' and it was really, really difficult. And then the overlay of all of that is dealing with the local authority." (Paula)

However, having a child with special needs has also meant that Paula's resilience has increased, and she feels she has become a much better parent.

Lisa's dad has not been part of the journey to seek a diagnosis, as he finds it much harder to acknowledge her needs. He has not engaged with any of Lisa's schools and Paula has struggled to get him to agree on medicating their daughter.

"I don't want to stop her father from seeing her, but if Lisa's needs increase that may become necessary." (Paula)

Paula describes how her ex-husband might have a different experience with Lisa's behaviour, as he spends time with her in the countryside where he lives. This is an environment Lisa loves as she can climb trees, and because her dad sets fewer boundaries.

Lisa's siblings have been affected by Lisa's behaviour. Her older brother is non-confrontational and tries to keep himself out of any challenges. However, the younger brother is often the focus of Lisa's behaviour when her anxiety levels get bad. In the past, she used to throw chairs at him. He has also started to copy her behaviour.

When Lisa is at the residential school, Paula and her two sons have Wednesday evenings to themselves where she can give them her full attention.

"Wednesday evenings I just have with the boys, and that's, you know, that's a completely new thing to have some one-on-one time. To not always think what could go wrong or how to... support her to do homework." (Paula)

Support

Initially, Lisa's primary school encouraged her parents to look for support. It took a while for Paula to wrap her head around the implications of this, so they did not take up this offer immediately. Later, Paula got in touch with CAMHS, and they were able to seek a diagnosis for Lisa. Paula also got access to weekly psycho-education sessions, where she learnt about how to understand Lisa's problems and how she could prevent them.

"When she was finally diagnosed. I was relieved. I knew there was something wrong. And for me it was just, ah, right... Now we knew what we have to read up on. So it kicked me into action, I think it paralysed my ex-husband." (Paula)

The school supported Lisa by providing a one-to-one teaching assistant. However, Paula felt this was not particularly helpful as, in reality, the teaching assistant was supporting the whole class rather than only Lisa. The school used an agency to hire teaching assistants and this meant they changed throughout the week – the new faces every day triggered high levels of social anxiety for Lisa.

Paula has accessed legal support through local charities. She has also been forced to seek private legal advice, which has been critical in turning a corner and getting the support Lisa is entitled to. For example, Paula's solicitor helped her to get Lisa's social care funding increased from 15 to 23 hours a week, which means Lisa now has access to a full-time carer when she is at home.

"You really need to know your legal rights. I think the one big mistake that I have done which has aggravated the situation is that I didn't reach out to get legal advice early enough." (Paula)

The residential school that Lisa attends two days a week is a significant improvement in terms of support, after Lisa spent years at her primary school being criticised for her behaviour. The school has a good teacher-pupil ratio, and teachers have a better understanding of Lisa's needs. In addition to this, Lisa has access to occupational therapy which works well for her, even though she finds it annoying. Paula has noticed Lisa coming home *"bouncing"* and talking about her schoolwork for the first time in years.

The family is currently attending family therapy to talk through and process what has been happening. This is the fourth attempt at family therapy, and Paula is hoping it will work this time around, with all the children involved.

The future

Paula is currently trying to get Lisa into a residential school full-time. The school she is currently in has severe staffing issues and cannot offer a five day a week place. Paula has ongoing legal battles with the council over Lisa's schooling and social care — especially after the carer payments broke down, and Paula had to pay from her savings.

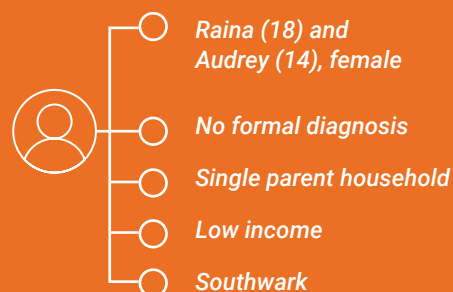
"It has an impact on your family life... because you're just tense and children pick up on it. And you come home, and they say, 'Mum, why do you look sad?' Or you're much more short-tempered with them, you're constantly worried about it — especially where finances are concerned." (Paula)

Paula hopes that Lisa will have an independent life. Right now she would like consistency for her daughter and is worried that Lisa will become a school refuser — which could have negative long-term consequences.

Raina (18) & Audrey (14)

Family 10

OVERVIEW



OTHER FAMILY MEMBERS

Mum: *Belinda*

Introduction

Belinda lives with her two daughters, Raina (18) and Audrey (14), in a two-bedroom council flat. The sisters share a bedroom. Belinda has been separated from their father since Audrey was a few weeks old.

Their flat is fairly central. Raina says that she likes their neighbourhood, but that it is a very “white” area.

Belinda is from Nigeria. She works part-time as a nurse, three days a week, and is also doing a master’s degree in advanced clinical practice.

About Raina and Audrey

Raina does not have an official diagnosis, but she has been described by her therapist as having a form of affective disorder. Her behavioural difficulties manifest as being confrontational, mostly with her mother. Raina also experiences extreme tiredness and a lack of motivation, and suffers from depression. She enjoys spending time with her boyfriend at his house, roller-skating, writing poetry and planning for her YouTube channel on meditation music. Her goal is to move out of the home she shares with her mother and sister as soon as possible.

Audrey also demonstrates behavioural difficulties. She was diagnosed with sickle cell disease at birth, and has access to

a psychologist as part of her care team. According to Audrey, she was recently diagnosed with OCD, depression and anxiety. Audrey’s main interests are playing video games, Japanese culture (food and manga), cooking and roller-skating. She particularly loves watching streamers (people playing video games live).

Belinda describes her daughters as having two very different personalities. Raina is full of energy, and Audrey is harder to read.

“I guess with her [Raina], you can read her like a book, so she wears her heart on her sleeve. Audrey, on the other hand, is more reserved, very calculating, very articulate. Because Audrey has sickle cell disease, so she’s had to, over time, develop some resilience or some sort of coping.” (Belinda)

Context

There were changes in Raina’s behaviour when she was at secondary school: she started dropping behind academically and taking less interest in extracurricular things that she used to enjoy. Raina reflected that it was a difficult time:



“I used to have very bad anger management issues, which used to be aligned to adolescence. I had no patience for anything. The worst was when I got into a fight with a girl. Her and her group of friends were talking about me for no reason, and this was around the time when I was not in the mood for nothing.” (Raina)

Belinda didn't fully understand what was happening, and what was driving her daughter's rebellious and stubborn behaviour. She now attributes this to having witnessed and experienced abuse from Belinda's ex-partner. She describes how her daughters have a lot of anger that is directed towards their mum.

“It's been years of dealing with quite challenging behaviour with my children, especially the older one. As a result of a lot of things that come to light, relating to interactions with my ex-partner – verbal abuse, emotional abuse – things have come up, and anger towards me... It's been a long arduous journey.” (Belinda)

Belinda says that her attention has mostly been on her older daughter, and that took a lot of energy. This means that Audrey's issues largely went unnoticed until last year.

Current situation

The family shared insights into their dynamics and relationships with each other. Belinda recognises the girls are at an age where they don't want to do things together as a family anymore.

Raina admits that she doesn't get along with her mother. She describes Belinda as “stubborn” and “different from regular mums”. Belinda feels as though sometimes anything she says “is wrong” and she doesn't talk much to Raina, preferring to give her space. This is to avoid an argument or any negative encounters.

Raina feels that her mum lacks understanding and is not able to offer emotional support. This means it is difficult to talk about things that are bothering her.

“Because the way she grew up in Africa, back then they were more tough love... If I look at it from an outside point of view, there are certain traumas that she hasn't worked through... because she wasn't given the space to emotionally work through them, or the emotional support from that parent.” (Raina)

Audrey describes her mother as well-meaning at times, and recognises that she is trying to do the best for her, but says she can also be intimidating. Her mother can scream when she's angry, which Audrey finds scary.

“She has a nice personality, but it can be really confusing sometimes... She's really passionate, but sometimes she's too passionate.” (Audrey)

In terms of the relationship between the sisters, Audrey describes Raina as having a lot of self-confidence. She also characterises Raina as someone she can count on, who will stick up for her. However, Audrey doesn't like to get into arguments with Raina, as she feels it is hard to get her own points across.

Raina finds it difficult to watch her sister going through her current challenges. She feels like she has to contain some of her own current experiences to avoid adversely impacting on Audrey.

Impact

The family's situation is having an impact on different aspects of their lives.

The atmosphere in the house is often tense between Belinda and her eldest child. All three state that they have very few friends, with Raina falling out with her best friend, and Audrey finding that she is increasingly distanced from her only two friends due to her “antisocial behaviour”.

Audrey says she is still coming to terms with her recent diagnoses of OCD, depression and anxiety, which she finds overwhelming. Audrey finds school a struggle, and says it is hard to focus because of the tension at home. There was a recent incident of self-harm that took place at school, which resulted in Audrey being taken to hospital for observation. Audrey attributes this to having “a low mood the whole week, and it got worse”. She says that there was a really bad argument between her mum and sister, which took its toll on her.

Raina had largely negative experiences at her old school. She often couldn't keep awake in class and the school kept punishing her, thinking that she was being rebellious rather than trying to understand what was triggering her behaviour. This meant that Raina would often stay at home instead. Belinda says that the school “failed Raina and... their duty to her”.

Raina had a year out and is now at sixth form. This school has been more engaged in working with Raina to give her encouragement. Belinda feels that Audrey's school also has good safety nets in place, such as counsellors, and can address Audrey's needs if an incident occurs.

Support

Belinda finds it hard to trust people around her, especially when it comes to personal family matters. She tends to avoid people who start *“making comparisons, and making you feel as if you’re an incompetent mother or there’s something you’re doing that is bad”*. She does have two friends who are close confidantes, and who she uses as a sounding board and knows won’t judge her.

It took a long time to get to the point of having appropriate support in place, and Belinda thinks that this should have happened far earlier in her daughters’ lives.

Belinda has attended a parent group, which she found to be the most useful support she has received so far. She has

also recently received six therapy sessions through her work. However, these are now coming to an end.

Belinda has access to two support workers from CAMHS and she contacts them whenever she needs support — to vent and to seek advice on handling situations. However, the hardest thing is not being able to reach out for support after working hours.

Raina and Audrey both see the same therapist, which they feel is beneficial as it’s an opportunity to speak freely about how they feel and what they are going through. However, Raina is a little less trusting of the therapist, as she believes he spends more time with Audrey. The MASH team have also been helpful for Audrey, especially as they have a named worker.

The future

Raina wants to take money she earns, and invest in the stock market and anything to do with artificial intelligence. When she finishes sixth form, she will apply for an apprenticeship to earn money while at university. She also wants to self-publish a book, be a mini-influencer, and grow a following to promote her poetry. She spoke about wanting a family of her own in a nice environment.

“I want to be that family that can bring friends over and wish that they were a part of my family.” (Raina)

Audrey hopes to overcome her challenges and become a game programmer.

Excerpts from the ‘support journey’ exercise with the family. The post-its were typed onto a Jamboard by the researcher as the family were speaking.



01 What encouraged you to seek help?

- Challenging behaviour
- Poor attendance at school and not being able to stay awake — was called to a meeting



02 How did you find out about what support was available?

- Mostly did own research — quite overwhelming
- Through the GP
- From the school



03 What was the experience of seeking help like?

- With the school, it wasn’t straightforward. They fell short in terms of pastoral care

04 What support have you received?

- GP making a referral to a psychiatrist
- Counselling at school
- Private therapy
- Emotional support from two friends
- Counselling through work (for mum)

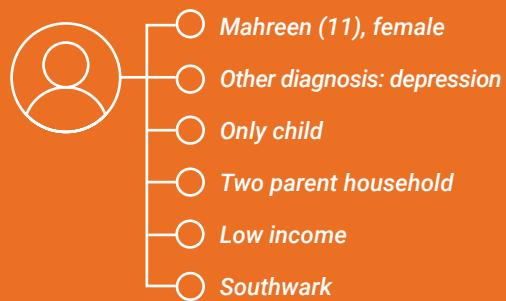
05 What support have you received from the school?

- Mum accessed a parenting programme but is no longer in touch with the group
- For Raina: current school is better — they have good care. There is a range of support including mentoring and it isn’t punitive
- For Audrey: there is a good safeguarding and early help team at school. They also communicate well with parents

Mahreen (11)

Family 11

OVERVIEW



OTHER FAMILY MEMBERS

Mum: **Sania**

Dad: **Yasir Ali**

Introduction

Sania and her husband Yasir Ali, both from Pakistan, live with their daughter Mahreen (11) in a two-bedroom council flat with a garden. Sania and Yasir Ali are in the process of divorcing.

Yasir Ali was diagnosed with multiple sclerosis in 2015. He had a heart attack, and lost part of his eyesight and mobility. When Yasir Ali could no longer work, the family were moved into a hostel, and eventually into their current home. As Yasir Ali's room has had to be adapted to meet his needs, Sania and Mahreen currently share a bedroom.

Sania is asthmatic and was diagnosed with blood cancer in 2018. She is a stay-at-home mum, and Yasir Ali's registered carer. She is diagnosed with depression and has been on the waiting list for talking therapy for two years.

The family were granted asylum status in 2016 and have no family in the UK.

About Mahreen

Mahreen (11) can be violent towards her mother Sania. When upset she breaks things in the house (for example, her iPad, Sania's make-up, doors at home), and shouts and swears at her mother. This takes place at home, as well as in public.

"She tried to ... just throw on me, or she's tried to, you know, push me on the sides and stuff like that. She [has] tried to annoy me too, you know, take out my make-up or take out any expensive stuff to spoil it. I don't think that we have one thing left which is not damaged." (Sania)

Mahreen does not like Sania telling her what to do (for example, trying to restrict her use of social media), which leads to screaming and crying.

Sania describes Mahreen as originally having been a "happy child" who was thought of as kind, confident and outgoing (she was talking at nine months). Sania describes Mahreen as very talented at art.

Context

Mahreen was diagnosed with depression by CAMHS in year 3 (she is now in year 6).

Sania noticed a change in Mahreen's behaviour about three years ago, when Mahreen experienced racist verbal and physical bullying at school from some of her classmates.

Sania also says that Mahreen was bullied by one of her schoolteachers, who Mahreen felt would pick on her over various things. Sania approached the school at the time about



this bullying, but feels that her concerns were dismissed – the headteacher promised to investigate but never called her back.

At the time, both Sania and Yasir Ali had serious health problems and the family was in a difficult financial situation. Sania and Yasir Ali's relationship was also deteriorating.

These experiences contributed to knocking Mahreen's confidence. Mahreen started to talk less due to a fear of being judged, and would often become very tearful. Sania says that Mahreen changed fairly quickly into a child who is unhappy with who she is: her looks, her skin and hair colour, and her background.

Sania says that Mahreen now frequently talks about wanting to change her appearance so that she can look more Caucasian, because she feels other skin types are "bad".

"She is not feeling good about herself from the past few years. She is thinking that her skin colour is not good. She wants to look like a white person. She wanted to colour her hair white... She wanted to bleach her skin... Her confidence absolutely impacted a lot recently after... other children bullied her." (Sania)

Current situation

Sania says that Mahreen blames her for the divorce. Mahreen often complains that her family is "broken". When asked to provide something for this project, Mahreen chose the following photos from the internet, saying: *"I dreamed that my parents would live with me, and we would live together like a prosperous family. But it did not happen so this thing means a lot to me. 😞"* (Mahreen)



Sania describes how Mahreen's behaviour has worsened over time, and that her daughter expresses her anger on a daily basis. When Mahreen is angry, she says things that Sania feels her bullies would have said to her, such as, *"Your haircut is ugly."*

"She says 'I can only [make myself] happy by watching TV and these things, why are you taking that away from me?'] So she shouts a lot with me and she thinks that I am the only person in this whole world who she can shout on, [who] she could be maybe take her anger out on.'" (Sania)

Mahreen is better behaved at school, but she is two terms behind academically. The family cannot afford private tutors to help her. Asking Mahreen to do her homework is one of the triggers for her anger.

Impact

Sania has been feeling very depressed in the last couple of months due to their overall situation. She says there are days when she feels so low she cannot stop crying, get out of bed or eat. Sania has been to her GP to ask for help.

She says her best moments are when she feels that Mahreen is happy:

"I guess for me, that's the best moment of my week or my life. When my daughter is around me, she's happy. And she wants me to [be] involved with her in her things. That's the only thing for me that makes me happy." (Sania)

Sania believes that Yasir Ali is also suffering with depression due to his illness and disability. She says that he struggles to cope with Mahreen's difficult behaviour, and therefore tends to stay out of things when Mahreen is upset. Sania describes having to be responsible for all of the chores at home, such as cooking and cleaning.

As the family are currently struggling financially, they can no longer do some of the things they used to do, such as shopping or going out for meals together. The family currently do not spend time together at home either, and tend to all be on their devices. Sania feels Yasir Ali has been increasingly distant with both her and Mahreen, which has been difficult for both of them.

Support

Sania explains that she initially spoke to Mahreen's school teacher in year 3, due to feeling scared and overwhelmed.

This teacher instigated a referral to Southwark CAMHS and then Early Help, who helped provide Mahreen with a mentor for a year via The Kids Network. Early Help also signposted Sania to a two-week parenting class.

“The mentoring worked really well for her. And some sessions with the CAMHS really helped her... If something helped Mahreen’s behaviour, that was CAMHS sessions and [if] something made her happy, that’s mentoring.” (Sania)

Sania describes the overall support they have received as sporadic. She says that while some professionals were helpful, it could be very dependent on the individual. One of the Early Help keyworkers was “really nice”, while the other was “cold-hearted”.

Sania says that although Mahreen has been in the CAMHS system since year 3, it is only a recent block of psychology sessions that she feels has started to make a difference.

Mahreen has been engaging well with the therapist, and her behaviour has tended to improve for a few days after each session.

“When she was asking questions, people could judge really quickly that she’s a trained person. She knows what she’s doing, you know, that’s why. And my daughter was always excited to see her.” (Sania)

This latest therapist has supported the family by writing letters to the council about Mahreen’s need for more privacy at home. Mahreen has been signed up for a variety of classes (part-funded by a charity) that she seems to enjoy, including photography, piano, drama and horse riding.

Sania also says that while Mahreen did not previously have any friends, she now plays with others online and has some friends at school.

Sania also describes benefiting from the support of a good friend who regularly takes Mahreen and her out to do fun things, such as cycling.

The future

Sania’s understanding is that, in the future, CAMHS and Early Help will no longer be involved in Mahreen’s care.

Sania describes being worried for Mahreen’s future, and especially the transition ahead with her ex-husband moving out. Sania wants Mahreen to have a good career, but is worried because she has disengaged from schoolwork.

“I am really, really worried about her future because of her constant sadness, because she is not completing her homework on time. And school is not helping on that criteria, you know? So I’ve heard that school should help her, like one-to-one or something. But even though that I asked them thousands of times, they’re not doing it.” (Sania)



Sania’s diary task during the research

WEEK ONE

What kind of day are you having today and why?

Same day as every day from the past four to five years! Even worse, the heart does not want to get out of bed. I haven’t cleaned the house in a while. I am feeling exhausted physically and mentally. Feeling powerless, hopeless and unable to look beyond the worst-case scenario.

WEEK TWO

Has anything been worrying you today or this week? What and why?

A few days ago I found out that the council has found a house for my ex-husband and he is leaving soon! I was shocked, numb, fearful, [full of] tears, extremely sad, angry, guilty, very low. There was mix of emotions. I was feeling grief and sorrow – I still am! It’s not easy for me. Or we as a family!

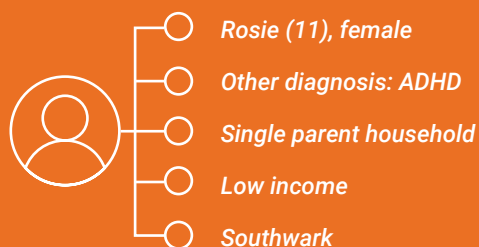
How do you think Mahreen is feeling this week?

Mahreen was feeling good because one of our really good friends took her out over the weekend. They had bubble tea, and after that they went on cable cars which made Mahreen happy. And [we] arrange play dates for Mahreen so she can see her friends, and spend more time around her friends than at home while the environment is quite sad.

Rosie (11)

Family 12

OVERVIEW



OTHER FAMILY MEMBERS

Mum: **Kathryn**

Siblings:
Amber (1)
Megan (3)
Amelia (7)
Liam (15)

Introduction

Kathryn lives with her five children in a two-bedroom flat.

The two youngest girls, Megan (three) and Amber (one) share a room with Kathryn, while her son, Liam (15) has his own room. Amelia (seven) sleeps on a sofa-bed, and Rosie (11) sleeps on a mattress in a cupboard.

In their current place, the family are *"all on top of each other"*, and Kathryn has been trying to move to a larger council house without success.

Kathryn likes to take the family on excursions to the Kent coast, where she'd ideally like to live one day, as she feels it would be safer and better for her children.

Kathryn suffers from depression and is not currently in paid work. She has a partner who lives in East London, and visits two or three times a week.

About Rosie

Rosie, 11, was diagnosed with ADHD about four years ago. At this time, her behaviour was becoming increasingly disruptive and defiant. Rosie would hit other children and teachers, threaten and make racist comments to black students, and unplug computers in the teacher's office.

"[She was] running around the classroom, trying to jump out a window, taking her shoes off and running around the playground... She was on her feet all the time, so much energy, she wouldn't listen to a word anyone said." (Kathryn)

Rosie's behaviour has changed dramatically since her ADHD diagnosis. She is on medication, and currently attends a school for children with special needs. Her mum says that Rosie is still *"talkative, loud and argumentative"* and often absent-minded, especially as the medication can wear off by the time Rosie gets home from school. But Kathryn says she is also now *"kind, polite and caring"*.

"She's calmed down a lot with the medication and the help that she's getting and the schools that she's going to, it all helps. So she's like a different child." (Kathryn)

In her free time, Rosie likes to watch music videos by Little Mix and The Weekend, and sometimes to dress up as a boy and do dance routines on TikTok.

Context

Kathryn first became concerned about Rosie's behaviour when Rosie was three years old. After her sister Amelia was born, Rosie began acting maliciously toward her. Kathryn described an example where Rosie forced a lollipop stick into Amelia's ear and burst her eardrum.



“She would be spiteful to her... It was horrible. I had to always keep Amelia where I could see her. They weren’t allowed to go in the bedroom together and play.” (Kathryn)

When Kathryn would confiscate something of Rosie’s as a punishment, Rosie would throw herself onto the floor and make noises for hours, or run all over the furniture. Kathryn says that Rosie’s behaviour was due to Kathryn’s attention shifting from Rosie to Amelia.

Kathryn separated from Rosie’s father when Rosie was still a baby. Kathryn says her ex-partner had mental health issues and was physically abusive to Kathryn when they were together. When Rosie was a baby he used to smash her baby bottles if she wouldn’t go to sleep.

Until recently, Rosie’s father had been an unreliable presence in her life, often standing her up when it’s been his weekend to see her. This would leave Rosie, who would wait by the front door in her coat for hours, in tears. For the last year and a half, they have seen each other more consistently.

Current situation

While there have been improvements in Rosie’s behaviour, there are still circumstances where she can be aggressive and explode. Typically, the triggers are when Rosie is irritated by another student, or if they’re making a noise or getting on her nerves.

“Someone was tapping on her arm and she’s said: ‘Don’t do that please.’ And then they’ve done it again. And she went: ‘Don’t do that.’ And then the third time she got really angry and she punched them.” (Kathryn)

A few months ago there were two separate incidents where Rosie kicked two boys: one between the legs, the other in the face. After the second time, the police were called in by the school, to talk to her about the dangers of her behaviour.

Rosie says she doesn’t mean to act the way she does when she has a flare-up. She often *“can’t help it”* and feels bad afterwards. When there are problems at school, Rosie will usually deny that it happened, accusing the school or others of lying. Kathryn will then threaten to take Rosie’s personal devices away, at which point Rosie will admit what happened, and say something like: *“I may have done that, I may have done this, but I didn’t mean it.”* And it’s just, *‘Sorry, sorry Mum.’* (Kathryn)

Recently, the school called Kathryn to let her know that Rosie had refused to sit down and had run out of the classroom. Rosie explains: *“I just wanted them to leave me alone, and let me just sit outside.”*

Impact

When Rosie’s behaviour worsened from seven years old, Kathryn often felt stressed and upset.

“It was a nightmare because, when we didn’t know what was wrong with her, I was always in tears, because I was always getting called to the school saying: ‘Rosie’s done this, Rosie’s done that.’... I was always crying. She would always make me cry... She was just that really bad.” (Kathryn)

Although Kathryn says she feels much calmer now, there are times when Rosie’s behaviour can still be frustrating. Often when Rosie is refusing to do something that she has been asked to do, Rosie pretends not to hear and Kathryn has to ask her again and again.

The family generally get on well at home. Despite Rosie’s maliciousness toward her sister Amelia, when Amelia was a baby, Rosie’s behaviour at home improved by the time her next two sisters were born. Kathryn says this was because Rosie *“just got used to there being more kids”*. Kathryn says Amelia and Rosie now have a good relationship, and that Rosie gets on with her older brother because she is herself a *“tomboy”*.

Kathryn prefers not to let Rosie out on her own, as she finds it hard to trust her with potentially dangerous situations such as crossing the road. Rosie doesn’t go to schoolfriends’ homes either.

“I think once she starts secondary school, then I’ll start letting her do more things. But at the moment she says she doesn’t want to go out on her own yet anyway... I’m gonna start letting her go out with her brother, just downstairs to the shops and back, just to try to give her that bit of confidence...” (Kathryn)

Support

Rosie was slow to learn to speak and received support from CAMHS from the age of five years old, initially meeting a speech therapist.

Until Rosie’s ADHD diagnosis, Kathryn didn’t know whether Rosie was just naughty or whether there was something else going on. It was the school that suspected Rosie might have ADHD and referred her to Sunshine House, who made the formal diagnosis.

Rosie subsequently started attending Summerhouse (short-term educational provision for children at risk of exclusion). This was a more positive experience.

**“[Rosie] loved it and she was good. She had the odd fight now and again but from that moment, her going to Summerhouse was the moment that I noticed a big difference in her attitude and her behaviour, [that] was when it started getting better.”
(Kathryn)**

After around a year at Summerhouse, Rosie moved to a permanent place at a special school. Kathryn says that the school knows when Rosie is in one of her moods and will engage with her in an effective way. For example, they will ask Rosie if she wants to step outside for a few minutes to think. This is in stark contrast to her previous school where she’d just be labelled *“naughty”*.

Kathryn doesn’t have a wider network of friends or family to offer support. While Kathryn’s mother now regularly helps out with childcare, when Rosie was much younger she didn’t help out or babysit at all. This meant that Kathryn found life *“difficult, stressful, lonely”*.

The future

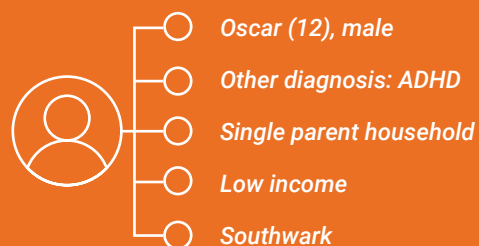
Kathryn is feeling *“positive”* about Rosie’s future. She hopes that when Rosie moves to her specialist secondary school in autumn 2021, her needs will be met there as well as they have been in her current school.

**“I hope she don’t act like the big woman, because they’ll all be older than her, whereas she’s older than everyone in her primary school. I just want her to go there with a good attitude. Not getting into any fights and just do the best that she can.”
(Kathryn)**

Oscar (13)

Family 13

OVERVIEW



OTHER FAMILY MEMBERS

Mum: **Charley**

Dad: **Cameron**

Siblings:
Alex (14)
Callum (15)

Introduction

Charley lives with her three sons – Oscar (12), Alex (14) and Callum (15) – in temporary accommodation, a two-bedroom flat.

The children's father, Cameron, lives in another part of South London. Charley and Cameron ended their relationship five years ago and share an equal parenting role.

Charley works Monday to Thursday as a receptionist at a physiotherapy centre. Cameron ordinarily works as a mechanic, but has been signed off sick for several months due to stress.

About Oscar

Oscar is the child experiencing behavioural difficulties. He received an ADHD diagnosis in March 2020, with suspected ODD and autism.

Oscar can be spiteful, aggressive and violent. He will often throw tantrums and break things such as furniture in response to being disciplined.

"I can remember ordering him McDonald's one day and I think I ordered him an Oasis [drink] or something. He literally trashed his room and I mean trashed: bed over, smashed everything, all that sort of stuff." (Charley)

Oscar recently slashed Cameron's tyres, then acted as though nothing had happened. He rarely shows remorse or concern for his behaviour.

The police are regularly involved when Oscar's behaviour gets out of hand, but this doesn't seem to faze him:

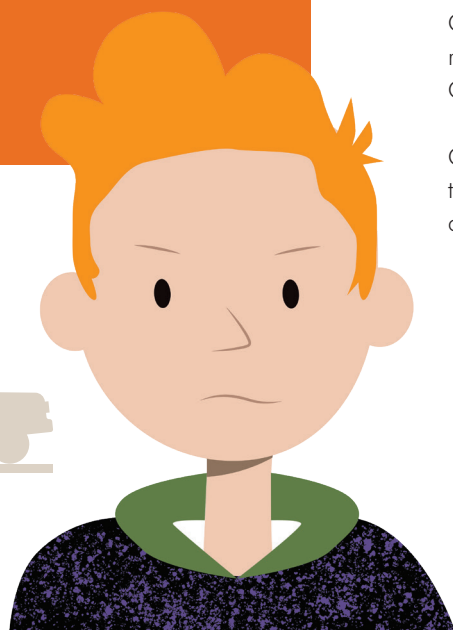
"He's not really bothered, or he'll play ball until they're gone and then start up again." (Charley)

Both parents describe Oscar as unpredictable. He can be sweet, but then display the worst kind of behaviour to those who know him best. For example, Oscar may do chores in order to get something (such as new equipment for his bike), then suddenly become agitated and accuse his parents of not caring about him, and start swearing.

Oscar really enjoys riding his bike and taking things apart. He has an interest in making things, and this is something that he and Cameron do together. Oscar tends to spend most of his time alone, but has recently been going to a skate park near where Cameron lives and has friends there.

Context

Oscar's behavioural difficulties began around five years ago when his parents' relationship ended. Behaviours included throwing things; lashing out when he did not get what he wanted, or if he did not get his own way; and breaking things. Oscar often refused to go to school, and would deliberately try to get



excluded by playing up in class or trying to leave the school premises.

Cameron says that, as an infant, Oscar was the centre of attention (as the youngest child) and may have been “spoiled”, but that he does not necessarily feel this has contributed to Oscar’s current behaviour.

Current situation

Charley explains that Oscar’s behaviour calmed down a bit, but then got worse again in year 6 (he is currently in year 7). Oscar does not like attending school, and he currently goes three to four times a week in the mornings only. He is often late and is still receiving detentions and exclusions.

Both parents have had to develop strategies to try and cope with Oscar’s behaviour. Cameron says that he “*can’t win the battle*”, so he tries to diffuse it by walking away, ending the conversation, or stopping what they are doing.

“You just get used to it... If he’s there and he’s having a fit or whatever, what can you do? You just say, well, that’s him. Sorry. You just have to get used to it. But obviously you don’t want to actually have... It’s easier to just sort of, like, walk away.” (Cameron)

Similarly, Charley has found that arguing back or standing her ground makes Oscar’s behaviour worse. She generally finds that ignoring the behaviour calms Oscar down more quickly. If in public, Charley will pacify Oscar by, for example, buying him things.

Impact

Charley and Cameron both feel that the situation is having a big impact on Oscar’s education. Oscar doesn’t enjoy learning and is about two years behind where he should be, although he is good at maths and enjoys technology. Charley feels he lacks confidence (for example, with his reading) and can kick off at school because he’s embarrassed about this.

Missing so many lessons is causing Oscar to fall further behind. Charley also worries that Oscar is missing out on forming friendships at school.

“I just think because these are the times of his life, his childhood, he should be enjoying... The way he is, he’s just completely not getting an education and you think, it’s not until you are going to be older, you’re going to look back and think, you know, ‘I really shouldn’t have been like that.’” (Charley)

Charley explains that home life is quite tense and that she is walking on eggshells. She feels she cannot make her accommodation more homely because of the risk Oscar poses to furnishings.

“I’m in temporary housing so I can’t do too much decorating-wise, but I could, like, have some nice things to make it look nice. And I just think, what’s the point? Because if he has a flip, he wouldn’t care twice about breaking stuff. So I kind of think to myself, when will I ever be able to just have a nice place with nice things?” (Charley)

Oscar can deliberately go out of his way to wind up his brothers. Charley says this tends to be unprovoked, and the brothers retaliate with name-calling and fighting. However, Charley also described how Oscar’s eldest brother, Callum,

will often go and help Oscar calm down by doing an activity together, such as playing on the PlayStation or going to the swings.

Cameron says that Alex and Callum’s friends avoid coming to his house if Oscar is there, because they do not know if an argument will start. When Oscar is not there, Cameron says that the atmosphere completely changes. He feels relief and the children are calmer.

Both parents have been signed off sick in the past due to Oscar’s behaviour. Cameron says that the behaviour has grounded him down over time, and describes the mental impact as “*like putting your head in a vice and crushing it*”. He comments that he thinks he hears the phone or doorbell ring in the middle of the night, concerned it will be about Oscar.

Support

Charley gets informal support from talking to friends who she says are like family and don’t judge her.

Charley describes begging the school to help for over three years. Cameron says that their involvement and referrals to other agencies only came about once Oscar’s behaviour became “extreme”. When support has been put in place Oscar is often not receptive, or it has been hard to engage given his frequent absences from school.

CAMHS were involved initially, and this did result in the ADHD diagnosis. The case was closed at the start of lockdown, but after this the family successfully pushed for another assessment; they are currently awaiting news of the outcome. Early Help supported virtually during lockdown (mostly for Charley), but this recently came to an end.

Oscar receives support from a social worker, but Charley does not feel this has been much help so far. The provision will be

for 45 days, and it is unclear what will happen after that. Oscar has recently seen an educational psychologist, who has been trying to set goals such as attending class on time three days a week. An EHCP has also been submitted to the council, and Oscar is getting one-to-one literacy support when he is at school.

“Well, I think only time will tell at the minute, it’s been such a struggle getting it. I’m just sceptical about if it’s actually gonna really help us in the long run. It’s made me realise how awful things end up happening to people because there just isn’t the support, it’s not there and it’s so hard to try and get it.” (Charley)

The future

The family are keen for Oscar to get as much support as he can. They hope that if there is an ODD diagnosis, Oscar will have more appropriate one-to-one help to manage his emotions and anger. Cameron is also keen to see Oscar’s ADHD medication adjusted, as he stopped taking it because it didn’t help.

Charley hopes that Oscar learns to like school and can make something of his education, but she worries that he won’t get any qualifications. She would like Oscar to possibly attend a specialist school more suited to his needs, where might feel less embarrassed about experiencing some academic difficulties.

“I always say to my kids, just do your best. You

don’t have to get top-notch marks and whatnot, just go and try your best. And as long as you try, it’s something... I just feel that he might look back one day and just like missed out. They’re the best years of your life really.” (Charley)



Charley’s diary task during the research

How’s this week been without Oscar being around as much?

He’s back with me tonight, as it turns out he was excluded. 😞

Oh no, what was he excluded for?

He was excluded playing music, swearing, etc. 🙄

Oh no. Hopefully he’ll be allowed back to school soon. How long will he be excluded for, and how have you and Oscar reacted to this?

He’s back tomorrow. He doesn’t really care about it, thinks he’s not done anything wrong. I just feel like I don’t see a solution to fixing it all.

In light of the situation where Oscar has been excluded, has there been anything that has helped you or Oscar cope with how that may have made you both feel?

He’s not bothered whatsoever. He didn’t bother to go to school today, and just carries on as if it’s all OK.

Jaxon (6)

Family 14

OVERVIEW



OTHER FAMILY MEMBERS

Mum: **Michelle**

Siblings:
Ronnie (10)

Introduction

Michelle lives with her two sons, Ronnie (10) and Jaxon (six) in a two-bedroom council flat with a small balcony, close to a park.

Michelle is on good terms with her neighbours and has close friends among them. She lets her boys play out on the estate, and the parents all keep an eye on each other's children.

Michelle has been diagnosed with EUPD and is not currently employed. Jaxon and Ronnie have different fathers, and Michelle now has a new partner of a few months.

About Jaxon

Jaxon (six) has not formally been diagnosed with behavioural difficulties. Michelle describes his behaviour as *"up and down"*. Some days Jaxon can be an *"amazing child"*, and on others display challenging behaviour – mostly in family situations.

At home, on being denied something he wants, or asked to do something he does not want to do, Jaxon can become physically agitated and violent. He will kick, slam and punch doors; headbutt walls; throw his arms around; and scream.

"He's like a machine that you put 50p in, that jams and never stops... You tell him no: that's it, it's the end of the world. I am the worst person in the world; he hates me; he doesn't want to live with me. And then once he doesn't get a reaction out of me, he gets violent." (Michelle)

While Jaxon generally isn't a troublemaker outside of the family, when out in public he will often ignore his mum's requests, run into the road, or lie in the street refusing to move. If he feels threatened, he can respond aggressively. Recently, when some older boys were picking on Jaxon and his brother, Jaxon retaliated by punching one of the 11-year-olds.

Jaxon loves school, and within the school boundaries he's a model student, often awarded "pupil of the day". His hobbies include maths puzzles, comics, YouTube, riding his new e-scooter and playing in the park.

Context

Michelle says Jaxon's behaviour changed two years ago. He went from behaving like a *"normal kid"* to being uncontrollably angry and defiant.

"It took about six months for him to go from being like an angel child, to a child that I didn't recognise... It was like someone flipped a switch." (Michelle)



This happened a few months after Jaxon's paternal grandmother passed away. Within the same period, Jaxon's older brother Ronnie was diagnosed with ADHD, and Michelle received her EUPD diagnosis following a breakdown and repeated suicide attempts, triggered by the end of a traumatic relationship. Although Michelle's ex-partner was not Jaxon's biological father, Jaxon saw him as his "dad".

Jaxon had been born 11 weeks early, and nearly died of sepsis at six weeks old. This meant he had been used to receiving a lot of attention.

"He was adored by absolutely everyone... Then when he got to a point where people had to stop wrapping him in cotton wool, when their attention started coming off him, and Ronnie started getting more of the attention because he was going through these assessments, Jaxon was like: 'No, no, no, no, not today. Not today, Satan. This ain't happening.'" (Michelle)

Michelle also speculates whether Jaxon's volatile emotional state is due to him having witnessed her breakdown and absorbing some of her anger.

Jaxon's biological father is currently serving a long prison sentence for violent crime. He has met his son once, when Jaxon was two months old. Michelle says that Jaxon's biological dad calls infrequently, and he and Jaxon do not have much of a relationship. Michelle is, however, concerned that she is seeing a similar emotional volatility and anger in Jaxon that she has seen in his father.

Current situation

Michelle describes how she and Jaxon can trigger each other's behaviour. For example, Michelle often gets migraines, and will then need quiet time or to go home if they're out. This can cause an aggressive, defiant response from Jaxon:

"As soon as you tell Jaxon no... he's kicking and screaming. He's literally resisting walking home, resisting holding my hand... I'll try and stay as calm as possible.'" (Michelle)

After they get home, Michelle may punish Jaxon by not allowing him to see his friends. Jaxon will then usually say sorry profusely. When Michelle asks Jaxon to clarify what he is sorry for, he becomes frustrated and violent again.

"As soon as I say: 'No, you have to remember what you did,' that's it, all goes off again, he's kicking, he's screaming, the doors get slammed, he's punching his door..." (Michelle)

Michelle can then become angry and upset herself, which leads to Jaxon trying to console her. Jaxon's behaviour can change quickly again and the cycle continues.

Recently, out of exasperation, Michelle has tried a collaborative approach to getting Jaxon to do what she wants, with some success.

When challenged by Jaxon's behaviour in public, Michelle feels extremely self-conscious and anxious:

"Sometimes I literally just want to stop in the street and cry because you know, the embarrassment... That's where my anxiety goes mad... In the back of my mind, all I'm thinking of is, 'Oh, that person thinks you can't handle it, that person thinks this, that person thinks that.'" (Michelle)

Impact

Jaxon's behaviour has had an impact on his relationship with Ronnie. The two brothers share a bedroom, and have been increasingly fighting with each other. As a result, Ronnie has recently been staying with Michelle's mum, who lives nearby. Michelle says that Jaxon is more often the instigator of the physical fights. These fights can be clashes over things such as control of the TV, or disputes when walking to school.

Michelle's overall feeling when thinking about Jaxon is tiredness. She can often feel alone and frustrated. She finds it challenging to raise her children without appearing constantly negative, which in turn makes her feel bad about herself:

"You're drumming into your kid: don't do this, don't do that. And I just think that it just makes everything negative... and that for me feels like a constant battle... It makes me feel quite shitty that I can't communicate with my children without always appearing negative." (Michelle)

Michelle also says that it has been hard for her new partner to witness Jaxon's difficult behaviour, and to see the impact it is having on Michelle's mental health.

Support

Michelle receives support from her mother in the form of shared childcare. She also feels supported by her new partner, and by her social worker, Rose. Michelle thinks of Rose like a family member who, unlike her previous social workers, genuinely cares about her.

“Rose being put into my life was an absolute blessing. [She] has completely just shone a different outlook on my life. Like, up until her, all the professional people that I’ve been involved with were kind of, they were jobsworths.” (Michelle)

However, Michelle has found it difficult to receive formal support or get a diagnosis for Jaxon. She says that because of Jaxon’s relatively young age and his model performance at school, without further evidence of challenging behaviour CAMHS will not diagnose him.

Michelle feels at her wits’ end, and hopes for a diagnosis so she can research how to better to handle Jaxon.

“When there’s no diagnosis, and it could just be a case of Jaxon is just a naughty child... then I’m a bit scared, because I feel like it’s only gonna get worse.” (Michelle)

Aside from this, Michelle says the school have been generally supportive. They have always listened to her, and they helped her with her elder son, Ronnie.

The future

Michelle is concerned that if Jaxon does not receive help with managing his *“emotional balance”*, he’ll end up in prison when he’s older. She fears this will be down to his violent behaviour and getting into a more serious confrontation or fight, rather than being drawn to criminal activity.

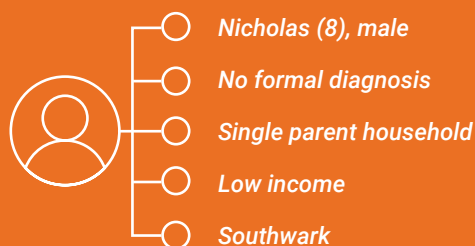
When thinking ahead, Michelle doesn’t see much opportunity in South London for either of her sons. She is worried that there is a huge social divide.

“You’re either like a proper boffin, and you get a massive high-paying job, or you are like a scum-of-the-earth criminal. And I just don’t see that changing [in] all the time that we’re here.” (Michelle)

Nicholas (8)

Family 15

OVERVIEW



OTHER FAMILY MEMBERS

Mum: **Nyla**

Dad: **David**

Siblings:
Nova (2)
Walter (10)

Introduction

Nyla has three children: Walter (10), Nicholas (eight) and Nova (two).

The family live in a newly built high-rise flat with two bedrooms. There is a park opposite the flat, and when the weather allows, the family often go there together. Nyla and her children moved there after she separated from the children's father, David, about two years ago. David works outside of London during the week, and returns to help with looking after the children over the weekend.

Nyla is originally from the Middle East, and does not have any other family members living in the UK. Nyla was a maths teacher; after moving to the UK, she worked at a nursery while studying to get her early years practice qualifications. Nyla had postnatal depression after giving birth to her youngest child two years ago, and she has not been working since.

About Nicholas

Nicholas is the child that Nyla describes as showing challenging behaviour. Nicholas does not have a formal diagnosis.

Nyla describes Nicholas as being short-tempered, and says that when he gets frustrated he throws things. Nicholas is currently attending school for half-days only, as he fights with other children at school and refuses to stay in the class, sit down and listen.

"He's not doing the work... He's going to school, but he's not staying in class and sitting down and listening... He knows that he's really behind, like he's now in year 3." (Nyla)

Nyla highlighted early indicators of Nicholas's behaviour. At school, when Nicholas was six years old, he started to mimic the behaviour of autistic children in his class (such as throwing chairs) and did not understand why this got him into trouble. This was the first time that Nicholas got excluded, and he thought it was funny.

Nyla feels that Nicholas tends to show challenging behaviour when he is in a situation where he needs help but does not feel confident to ask for it. For example, Nicholas set off a fire alarm when he was told he would have to do a maths test. Again, he was excluded for this. Nyla thinks that Nicholas does not like to appear as though he is weak.

"He doesn't have the confidence to sit down and try, and he doesn't like to say 'I don't know this', and asking for help is also not easy for him. So instead of saying, 'I don't know' or, 'I need your help,' he went out and he pressed the fire alarm. Then he got excluded because this is a serious thing, to press the fire alarm." (Nyla)

Nyla describes Walter and Nicholas as being quite different from each other, but one thing they do have in common is that neither likes to be treated unfairly. Nicholas enjoys physical activities,



such as football, boxing and colouring. When Nicholas grows up, he would like to be in the military. He is confident that he does not want to be a soldier that has to follow rules. Instead, Nicholas would like to be a general, so that he can lead and tell others what to do.

Context

Nicholas has experienced a few life changes and challenging circumstances, and Nyla thinks these have had an impact on his behaviour.

“If there is a child is acting [up] and you haven’t changed anything in the setting... there is always a reason for his behaviour. This is what I’ve learned. That’s why I’m telling you he has been through a lot... I’m not giving him an excuse, but I am [trying to understand] why this happened.” (Nyla)

Nicholas had periods of illness when he was younger (including anaemia and scarlet fever) and had frequent visits to the GP and the hospital. He had surgery on his teeth, which makes it hard to bite. Nyla says this has made him picky about his food.

When Nova was born, Nicholas would refuse to come home from school. Nyla thinks that Nicholas could not understand why she needed to spend more time looking after Nova, and was jealous of this.

“She’s a baby. She gets my attention. He sees that, and I try my best to divide myself between them... With Nicholas, he started saying ‘You love her. You don’t love me.’” (Nyla)

When Nyla separated from her partner, she moved into shared accommodation with the children. This was difficult as they experienced abuse from her neighbours. The family moved to their current flat and initially had no basic furniture, such as a fridge or a cooker.

Last summer, the family went on a holiday back to Nyla’s home country. During the holiday, Nyla’s sister had a serious road traffic incident where the car flipped over three times. Nyla and her children witnessed this incident; she feels that it had an impact on Nicholas, who would afterwards throw up anytime he went into a car.

The current situation

Nyla describes some of the frequent battles that can take place because Nicholas finds it difficult to follow instructions. For example, Walter and Nicholas are often late to school because it takes a while for Nicholas to get ready. Nyla has to beg Nicholas to get dressed, and when she tries to help he refuses her assistance.

If Nyla plans for the family to go to the park, even though Nicholas enjoys being outside, she has to talk him into going. The same happens when it is time to leave the park. Nyla says that she must plan for the additional time (at least 30 minutes either side) it will take him to accept they have to leave.

Nicholas has a strong bond with his dad. However, when David returns to work, Nicholas may refuse to go to school, finds it difficult to focus and cries for long periods of time.

Nyla has learned that it is better to respond positively when Nicholas shows good behaviour, rather than responding to his challenging behaviour.

“It’s not every time you can be relaxed to speak to him calmly. Sometimes I do go home or I shout. Then I feel bad about it. This is really hard. Being a parent isn’t easy and it’s not like there is some guide. Tell yourself, ‘Have a breath,’ before you answer him.” (Nyla)

Impact

Nyla has not been able to return to work or continue her studies, and she feels this is partly due to needing to be on call in case there is an issue at school with Nicholas.

Nicholas’s behaviour has also had an impact on his siblings. Nyla feels that Walter gets jealous that he gets less attention than Nicholas; and that she has to spend a lot of time managing Nicholas’s behaviour and looking after Nova.

The other main impact has been on Nicholas’s education. Nyla feels that there is a cycle: Nicholas shows challenging behaviour (triggered by situations where he is unsure of how to ask for support, or lacks confidence); then he is excluded or attends school on reduced hours, which has a greater impact on his confidence; and the cycle begins again.

Support

Nyla first decided she needed support when Nicholas was six years old. She currently has access to a family support worker, to whom the school referred her in November 2020. Initially, Nyla saw the family support worker weekly or fortnightly, but it is now less frequent. Nyla took part in a parenting programme in January 2020, but this was cut short due to the pandemic.

Nicholas's school did provide some access to mental health support, which Nicholas engaged well with at the beginning. The mentor then changed, and Nicholas found it hard to build a relationship with the new person. Nyla feels that the support from the school has not been particularly tailored to the family's needs. She feels they could be working together more to consistently manage Nicholas's behaviour.

"For the school, they had to do that referral. It wasn't like, we want to help you by doing this referral. It was like, this is the next step after each child has been expelled two or three times. So, they were just following protocol of their job. It wasn't about helping me or my son." (Nyla)

Despite it only being for a few days at a time, the support Nyla receives from David makes a difference to her because she has time to herself to relax. David is more financially able to take the children on holidays or to activities.

The future

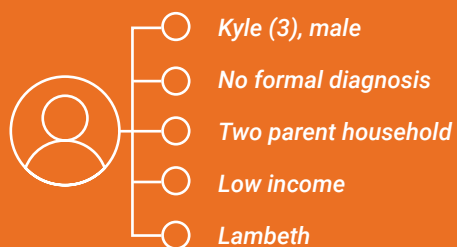
Nyla is worried about what Nicholas's future might look like, and struggles to talk about this. Her hopes are that she can do enough to support him for him to achieve his aspirations.

"It's painful for me... and I do have this fear, what will happen [to Nicholas when he grows up]?... I don't want to think about it because I'm trying to be hopeful. Nothing is showing any positive signs, which makes me really worried." (Nyla)

Kyle (3)

Family 16

OVERVIEW



OTHER FAMILY MEMBERS

Mum: **Kiana**

Dad: **Leon**

Siblings:
Kevin (6)

Introduction

Kiana and Leon have two sons, Kevin (six) and Kyle (three). They live close to Brixton and they love their area. The family like to spend a lot of time in Brockwell Park and Max Roach Park.

Kiana works in childcare and enjoys travelling and playing football in her spare time. Leon enjoys spending time on his PlayStation with the boys and taking them to the park.

About Kyle

Kiana and Leon are concerned about Kyle's behaviour. Kyle has a bubbly personality and loves learning about new things. However, Kyle can get very upset when he is asked to do something he doesn't want to do, or if things do not go his way, which can often lead to him having a meltdown. These can involve a lot of screaming, crying, running, throwing, kicking and hitting. Kiana is particularly concerned about how long these can last.

"A really bad one can be a full 40 minutes where he'll just be screaming and crying. If I don't give him any attention towards it, he will try and ride it out as long as possible, which can be, like, 40 minutes... If anybody gets in his path or if anyone talks to him while he is in his full-blown meltdown, he'll hit you. He'll kick." (Kiana)

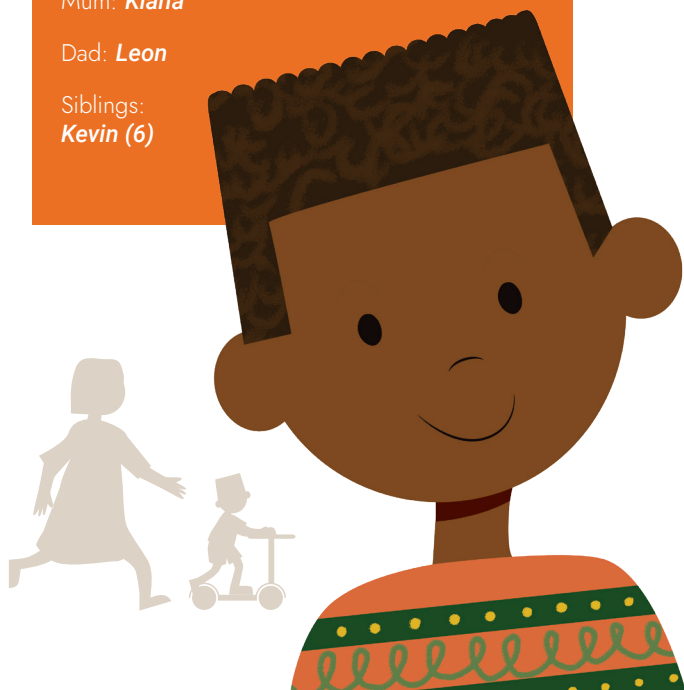
Kyle is also not very good at listening or following instructions. He often laughs when Kiana asks him to do or stop doing something. When they are outside of the house, this can lead to dangerous situations.

"If he's riding a scooter to school, and then I say to him, 'You have to stop here because it's a road and it's dangerous,' he'll just laugh. And then when he gets to the road, he'll just ride through it. So it's not having the trust in him while we're outside – it's a little bit scary." (Kiana)

Kyle tends to follow rules when he is at nursery. Kiana and Leon feel that at this stage some of Kyle's behaviour at home and out in public can no longer be explained by his age (three).

Context

Kyle was born prematurely, and when he turned one year old, he suffered from bad asthma attacks. Kiana and Kyle spent a lot of time in hospital over the first few years of his life. Kiana says that, looking back, it was a traumatic experience for them both. Kiana thinks this has led to her "mollycoddling" Kyle. She felt that she was stricter with her eldest son, Kevin, and set down more boundaries.



"I've kind of let all those boundaries go because I felt like he needed a bit more love and a little bit more time to get used to being out in the world by himself... I do feel like it has affected him where, now, he's so used to getting away with it... It's got to the point now where I feel like he's just confused with what are the rules and what are not the rules, because he hasn't had rules for three years of his life, and now we're trying to put rules in." (Kiana)

Kiana believes that her protectiveness towards Kyle has led to him being overly attached to her, and feeling very anxious when she drops him off at nursery or with a family member. A typical drop-off can involve Kyle crying and shouting, grabbing Kiana's clothes and sometimes even hitting the teacher. Often the teacher has to physically remove Kyle from Kiana.

Current situation

Common triggers can be when Kyle is tired, or when he's told he can't have sweets or can't wear the same thing every day (for example, he really loves wearing his wellies or his Spiderman outfit).

"Tiredness is definitely one of them. Sometimes he comes out of school absolutely shattered. And I know if I say the wrong thing or if the wrong thing happens, if he falls over, I know it's just, he's not going to be able to cope." (Kiana)

Dinner times can also be hard because Kyle doesn't enjoy eating things he doesn't like (and there is a lot he doesn't like). Once Kyle is in a bad or sensitive mood, anything can trigger him. For example, if his brother Kevin presses the lift button before him, or beats him in a race on their scooter, it can often

lead to a full-blown tantrum. What Kiana finds most difficult is that Kyle cannot bring himself back once he has entered that space, and it is hard to comfort or calm him down.

"The not-being-able-to-come-back bit... if that's happened on our way to school, that means now we've got to spend 10, 15 minutes getting Kyle out of this tantrum, and the knock-on effect is that everyone is late for school." (Kiana)

At home, Kiana find it works to let Kyle ride out his tantrum. However, in public she feels pressured to try and stop him crying and screaming, which can often make it worse.

Many of Kiana's family members also respond to Kyle's behaviour in different ways. While Kiana does not mind other people trying different strategies, it can be frustrating when this happens at the same time. It can then make Kyle feel even more overwhelmed and prolong the meltdown.

Impact

Kyle's behaviour can impact on Kiana's whole day. If he has a meltdown in the morning it can leave her feeling overwhelmed, stressed and upset. Kiana hates being in a bad mood at work, and worries that the stress can lead to her being short with colleagues. Kyle's behaviour has also had a significant impact on her social life. Apart from Kiana's mum, no one wants to babysit Kyle.

Kevin finds Kyle's behaviour difficult to deal with, and sometimes thinks having a younger brother can be really hard work. The two brothers fight a lot and Kevin thinks that sometimes Kyle gets him into trouble.

"He has had numerous amounts of arguments with his brother, which ended with his brother saying comments such as 'That's why I don't like little brothers,' and 'He's always getting me in trouble,' or 'Leave me alone, Kyle.' It's made me very anxious from the second I wake up, as I never know what mood Kyle will be in when he wakes up." (Kiana)

Leon works six days a week, leaves the house before the boys are awake and often gets home once they are in bed. For a lot of the time Kiana is taking care of the boys alone. They also have very different parenting styles, so can often disagree about the best approach for managing Kyle's behaviour.

Kiana and Leon have recently decided that Leon will start to pick Kyle up from nursery a couple of days a week. Kiana wants to see if Kyle behaves in the same way with his father — and hopes this will help them to discuss things more effectively and be on the same page.

Support

Kiana's mother helps out with childcare. She sometimes picks the boys up from school and has them at the weekends. Kiana finds this support really helpful. It allows her to attend important meetings at work, catch up on housework, and get a bit of time to herself to play football at the weekend. However, even her mum has struggled at times to take care of Kyle.

Kiana and Leon have not sought support from any source other than family. Kiana is keen to join a support group for parents, which would help her feel less alone.

Kiana is concerned about Kyle getting labelled as a naughty

child, and this being adopted by teachers throughout his time at school. She also thinks that formal support tends to put children in boxes and fails to assess a situation holistically or over time. What Kiana wants is longer-term support that helps her to try and understand Kyle's behaviour.

"If I'm looking at formal support, it would be talking to somebody. Fortnightly or every week about how his behaviour has been for that week. And then we both look at the triggers or the reasons why he's having these tantrums... It wouldn't be so much as you telling me what to do, but I'm just telling you what's happening and you can then support me through it... And doing that over a long period of time might let us see connections into what he's triggered by." (Kiana)

The future

Kiana is worried about how Kyle will react when he starts reception class. She is concerned that this will trigger his difficult behaviour even more. She worries that Kyle will spend a lot of time feeling miserable, and will get bullied by other children if he continues to cry and have meltdowns.



Kiana's diary task during the research

How has Kyle's behaviour been this week?

He had three major meltdowns that consisted of 25-40 mins of crying, hitting, throwing things and shouting. The first one was because he wasn't allowed sweets for breakfast (he's never had sweets for breakfast). The second one was because he wanted crisps before dinner (even though he had already had [some] when he got in from school). The third was because he wanted to play on the Nintendo Switch (a handheld console) but it needed charging, even after explaining 100 times that it won't turn on.

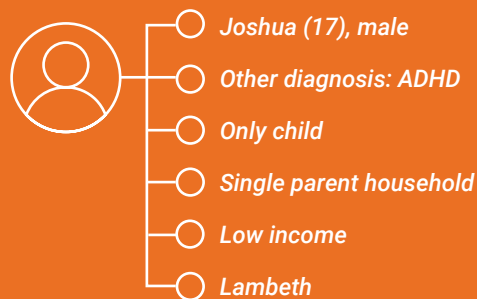
How has Kyle's behaviour made you feel this week?

Different times of the day make me have different emotions to his meltdowns. The meltdown he had before breakfast about sweets was very frustrating as we needed to get ready for school and leave. This was the 40-minute meltdown that caused both him and his brother to be late for school and I was late for work, which now has made the beginning of my day very stressful, and it takes me a while to get back into work mode.

Joshua (17)

Family 17

OVERVIEW



OTHER FAMILY MEMBERS

Mum: **Angela**

Introduction

Angela has a son, Joshua (17). Angela works for a government department.

Angela and Joshua live in a two-bedroom flat. Angela likes the area, but she does not have time to do much locally because her job can be quite stressful. She values her friendships, and socialising is an important outlet for her.

About Joshua

Joshua is at college studying construction, and resitting English and maths GCSEs.

Angela thinks she and Joshua are quite similar in some ways — he is outgoing and can make friends easily. When he was younger, Joshua had a few hobbies including swimming, taekwondo and football, but he lost interest in these towards the end of primary school. Now Joshua likes to spend time with his friends, and is often out late.

Joshua was diagnosed with ADHD when he was six years old. Angela had started to notice, when Joshua was three years old, that he was behaving differently. Initially, she thought that it was a case of extended terrible twos. When he was in reception class, it started to become more apparent that he was struggling to follow instructions.

Joshua has a temper that he sometimes finds difficult to control, and he has been excluded from school several times for fighting.

“It’s changed. He’s got older, so he’s more resistant. He resists more boundaries and instructions, whereas I could probably cope better at a younger age. Even though he didn’t listen as much then, it was more managed.” (Angela)

Angela feels that Joshua also makes poor choices when it comes to his friends. He has come into contact with the criminal justice system for his involvement in alleged common assault and robbery.

Current situation

A recurring challenge at home is with setting rules — Angela often has to repeat a request to Joshua several times, and it usually ends in an argument. Joshua sometimes takes his frustrations out by using physical aggression, and damaging furniture in their flat. One occasion that Angela remembers is when she repeatedly asked Joshua to clean his room. This turned into an argument, and eventually Joshua got angry and punched a hole in a door.



Over time, Angela has become more concerned about Joshua's behaviour. Joshua often stays out past his curfew, and he is not open with Angela when she asks him what he has been doing. This can leave Angela feeling concerned for his welfare, or fearful that he is engaged in criminal activities.

They are currently on a waiting list to be moved because of some of the things Joshua has got involved with.

"It was Joshua deciding to mix with the wrong crowd and getting involved in the wrong things. Like owing people money. And they want their money back and if they don't get their money, they target our house." (Angela)

What usually helps Joshua when he is frustrated is allowing him to show his frustrations, and find his way back to a place of relative calm. Angela feels that interjecting can often make things worse.

Impact

The main impact of Joshua's behaviour has been on Angela's wellbeing. She feels that her personality has changed over the past few years, and she has been in contact with her doctor about her anxiety. She sometimes feels alone and overwhelmed by stress of managing Joshua's behaviour and balancing her job.

"If he's been going off on one, and then I go off on him for going off on one, I feel bad too. I feel strained, I feel weak. I feel like I want to disappear and go somewhere to recoup, or recharge. But I can't do that because he is still... dependent. But I have to think about me, I don't have any respite." (Angela)

Another impact of Joshua's behaviour has been on his education. Angela applied to several mainstream secondary schools. Her applications were rejected because they said they could not support Joshua adequately, based on a report he received from his primary school that outlined his behaviour and exclusions. Angela described this report as *"a prison sentence"*.

Eventually, Joshua was accepted to a SEN school, but he kept getting into fights with other children so Angela took him out of the school. It took 10 months to find another school. However, this new SEN school was an improvement – it specialised in supporting children with similar behaviour difficulties to Joshua, and the headteacher had ADHD. Angela felt that this lived experience made a profound difference to the way that they supported Joshua.

Support

Joshua's dad is not really involved with supporting him. Angela has reached out to family for help, but feels that they have their own lives, children and work to manage.

"I'm being Mum, I'm being Dad, I'm being Grandma, Grandad. I'm being all of them but there's only me. That's why I've only got one child, it's a lot of work." (Angela)

Angela has described the formal support she has received as being largely inconsistent. She reflects that if support for Joshua had started earlier in primary school it might have helped avoid the problems he had at secondary school.

"I do say to myself if certain things were different I don't think Joshua would be in the position he is now. If I got a lot more support back then when he was young. I'm not talking about only education, I'm talking about family, I'm talking about his dad, I'm talking about probably even me." (Angela)

After Joshua's diagnosis, Angela arranged an EHCP – she did this independently, after the school were taking a long time to sort it out. It was a stressful process, as she had to gather a lot of documents and evidence.

Joshua was referred to CAMHS after his diagnosis and he still has an open case with them. However, the only offer of support is medication to help manage Joshua's ADHD. Joshua does not take the medication because he says it makes him feel funny. Now that Joshua is 17, he will be transferred to adult mental health services.

Angela took part in a parenting class when Joshua was about 12, but she did not complete it. It was difficult for her to relate to the behaviour management strategies that were offered, because the children were different ages to Joshua.

Angela started receiving support from a social worker when Joshua was 13. It stopped last year when the case was closed. During this period, Joshua had three different social workers, and did not engage well with them as it can take some time for him to get comfortable with new people.

At the moment, Joshua is in contact with the Youth Offending Team because of his involvement with criminal behaviour. The aim of the support is to find ways that help Joshua stay away from crime. It includes help with finding employment and providing access to a gym.

The future

Angela's fear for the future is that Joshua will find it difficult to manage day-to-day life. She is also concerned that he might continue to engage in criminal behaviour, which could get him a criminal record and then he may lose out on potential opportunities.

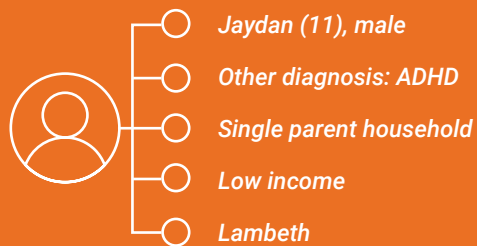
Angela feels that as Joshua is nearly an adult, it might be too late to change him.

"It's 21st June 2021 and I'm sitting here at 12.20 and I don't think there is anything that can help right now. My son is the age where he is – I'm just going to use the Caribbean term – moulding. It's better to mould him when they're younger or bend him when they're younger. He is at the age where he has already got his ways, and nothing is going to change it. I can only just try my best right now, without support... I'm left on my own so just got to manage on my own." (Angela)

Jaydan (11)

Family 18

OVERVIEW



OTHER FAMILY MEMBERS

Dad: *Daryl*

Siblings:
Teddie (7)

Grandmother:
Karen

Introduction

Daryl has two children: Jaydan (11) and Teddie (seven).

The family currently lives with Daryl's mum in her three-bedroom house with a small garden. Daryl has been there for two years, after his relationship with Jaydan and Teddie's mum ended.

Jaydan and Teddie used to live with their mum, but in Christmas 2019 they moved to live with their dad. They still see their mum at weekends. Two of Daryl's siblings also live in the house, along with a dog and a cat.

Daryl has lived in Lambeth all his life. He likes the area and how close by his children's schools are, but has recently been aware of increasing reports of drugs, gangs and stabbings.

Following a suggestion from the Jobcentre, Daryl recently went through an assessment of his own and was diagnosed with ADHD, autism, dyspraxia and dyslexia.

About Jaydan

Jaydan is the child that Daryl describes as showing the most challenging behaviour. Jaydan was diagnosed with ADHD while he was living with his mum, and is currently being assessed through CAMHS to see if he has autism.

Daryl describes Jaydan as a quiet and bright boy who has a heart of gold. He likes to ride his bike, play football and spend time with his friends. He also loves to play video games such as Fortnite.

However, Jaydan can lose his temper and be argumentative, loud, rude and violent. Jaydan has smashed things such as his own smartphone and a Nintendo Switch. He has also stolen money.

"He's a combination of a good guy and a bad guy. All wrapped into one. Sometimes he lashes out using physical violence at his brother — sometimes he'll break or smash something." (Daryl)

Teddie is following in his brother's footsteps. During lockdown, Teddie smashed the family's TV when he was not allowed to play on the computer. Daryl is currently trying to get Teddie assessed for his behavioural problems.

Context

In the past couple of years, the family has experienced several difficulties. Daryl had a stroke in 2019 and had to stop working as a bouncer.



"It made things harder. And now... my children living with me, it threw everything to the side. From working full-time for the past seven-and-a-half years to being told I have dyslexia and dyspraxia – it was heartbreaking. I have channelled my anger and frustration to just thinking, there's always a positive to a negative." (Daryl)

In late 2019, the children's mum was abusing drugs and alcohol, and inviting people to the house to join her drinking when the children were around. Daryl also described an incident where his ex-partner called the police making "fake accusations", and his children witnessed him being arrested.

Daryl describes how the behavioural issues started around this time, particularly for Jaydan. He started pushing boundaries, became more argumentative and had regular tantrums.

"They were heartbroken, they were distraught, they were very angry and upset with their mum, because she didn't have a reason for doing what she did." (Daryl)

Daryl decided the children should live with him after their mum had left them at her friend's house to go drinking with her friends. He was adamant that he wants to be able to give them the chance to be away from drinks and drugs, and to "not see that life".

According to Jaydan and Teddie's grandmother, Karen, Jaydan started to behave in a more aggressive way when he was around four-five years old. She agrees that his behaviour has worsened since late 2019. Karen has taken care of Jaydan since he was little. She saw similar signs in Jaydan that she had seen in her other son, Daryl's brother, who has an ADHD diagnosis.

More recently, the children's great-grandmother and Daryl's cousin both passed away – as did their family dog of 15 years, which has been traumatic for the children.

Current situation

The main trigger for Jaydan's behavioural issues is feeling out of control. This includes situations where he is not allowed to finish a video game or does not get the food he wants, or when things do not go to plan. However, Jaydan has been on ADHD medication for the past three months, which the family feel has helped to calmed him down.

The family have been using different strategies to respond to Jaydan's behaviour. Jaydan's aunt describes how she ignores Jaydan when he has his tantrums – she lets him deal with it in his own way. His grandmother likes to engage Jaydan in household chores to get him to stay focused and calm. Daryl feels that playing video games is helping Jaydan to let out his anger, instead of focusing this on his family.

Impact

Daryl never saw himself being a full-time single dad, and it has come with its challenges. The rude language, the fighting and screaming at home, dealing with the children's school and simultaneously looking for employment have all been hard on him. The house can feel crammed when everyone's at home, so Daryl is currently looking for a new place.

Jaydan has had issues at school where he has been bullied and blamed for a lot of things in class. Daryl has had to fight hard to convince the school that Jaydan needed support for behavioural issues and wasn't just a naughty kid. The bullying

has now stopped, and Jaydan is dealing with his friendships better after going on the ADHD medication.

Jaydan and Teddie still see their mum, but talk about not liking the visitors that come to her house.

"When we're at our mum's, if someone comes over and if we don't like them, we just go upstairs, but if it's for food we only come downstairs to go and get it. Or if we don't eat food, we just wait for the person to leave." (Teddie)

Support

Since the children have been living with Daryl, Jaydan has received support at the Mary Sheridan Centre.

Following some of the issues Jaydan had been experiencing at school, Jaydan now has a mentor, attends weekly group sessions with children who have similar needs, and has access to a teaching assistant. He also has a teacher he gets along well with, who supports him to get on with his schoolwork out of class when he has been punished, so he doesn't miss out on learning. Daryl is trying to get an EHCP in place so Jaydan can have appropriate help when he gets to secondary school.

Daryl currently attends two parenting courses that focus on supporting children with similar behaviours to Jaydan.

"These classes have helped me to understand the moral dilemma of going forward with behavioural problems, with the destructiveness, with the attitude, with the way things go forward because of how destructive Jayden was. The way he is now is completely different." (Daryl)

Daryl has a close-knit family, from whom he gets a lot of support with Jaydan and Teddie. Jaydan is particularly close to his grandmother, and Teddie is very close to his aunt. Daryl's family has been there for him and his children since the children were little.

"My family and I are there to pick up the pieces for them when their mum didn't do what a mum should do. My family stepped in to take care of the boys, and that's why I think my family and [my] sons have such a strong bond." (Daryl)

The family enjoy spending time in their local park which Daryl describes as helping to *"give everybody a break"*. They also like getting out of London to visit family members — Daryl has a sister who lives in Folkestone, and who they are hoping to visit this summer.

The future

Daryl feels he has all the support he needs at the moment. The only thing he is lacking is financial support that would help him respond to the children's needs more. At the moment, he is spending money from his Universal Credit to pay for broken items around the house.

Daryl hopes that Jaydan will find a job that he enjoys.

"I just want him to be the best he could ever be, and get a job... I will not have a say in what he can or can't do when he gets older. Anything that his heart desires, I will support him." (Daryl)

