

Health and Child Development



Gwasanaeth
Mabwysiadu
Cenedlaethol

National
Adoption
Service

Achieving More Together
Cyflawni Mwy Gyda'n Gilydd

The NAS Post Adoption Training and Development Framework

- ▶ These materials have been developed for the National Adoption Service for adoptive families
- ▶ Their purpose is to provide a learning and development resource for adopters post placement

The NAS Post Adoption Training and Development Framework

- ▶ These tools can be used by groups or by individuals.
- ▶ There is lots of information in the notes below each slide so it is important to read these too as they provide much more information, and some useful ideas for more reading.

Health and Child Development

Issues for children who have been adopted

Learning Outcomes

By the end of this module, participants will have:-

- ▶ Understood what is meant by child development and what 'normal development' looks like.
- ▶ Considered the impact early trauma and neglect can have on development.
- ▶ Understood how to recognise delays in areas of development.
- ▶ Some ideas about how to support children's development

What do we mean by 'delayed development?'

EXERCISE

List all the ways in which children's development can be delayed.

What does it look like?

Evidence from Research

In 2014/15 Cardiff University undertook a cohort study of all children adopted from care over a 1 year period. (374 in total) -

- ▶ Found that 28% of parents were concerned about developmental delay.
- ▶ Nearly 1/3rd were concerned about their child's behaviour.
- ▶ Sleeping, eating and toileting were also mentioned as areas of concern.

Adverse Childhood Experiences

- ▶ Suffering **four** or more harmful experiences in childhood will **increase the chances** of high-risk drinking in adulthood by **four** times, being a smoker by **six** times and being involved in violence in the last year by around **14** times.
- ▶ 47% of adopted children had 4 or more ACEs compared to 14% of the general population.
- ▶ Adverse Childhood Experiences cause toxic levels of stress and that greatly increases the risk of a dys-regulated stress response.
- ▶ Note: ACES only tell us about vulnerability and what we might be more likely to expect – NOT what will definitely happen.

Impact of toxic stress



Physical Development and Milestones

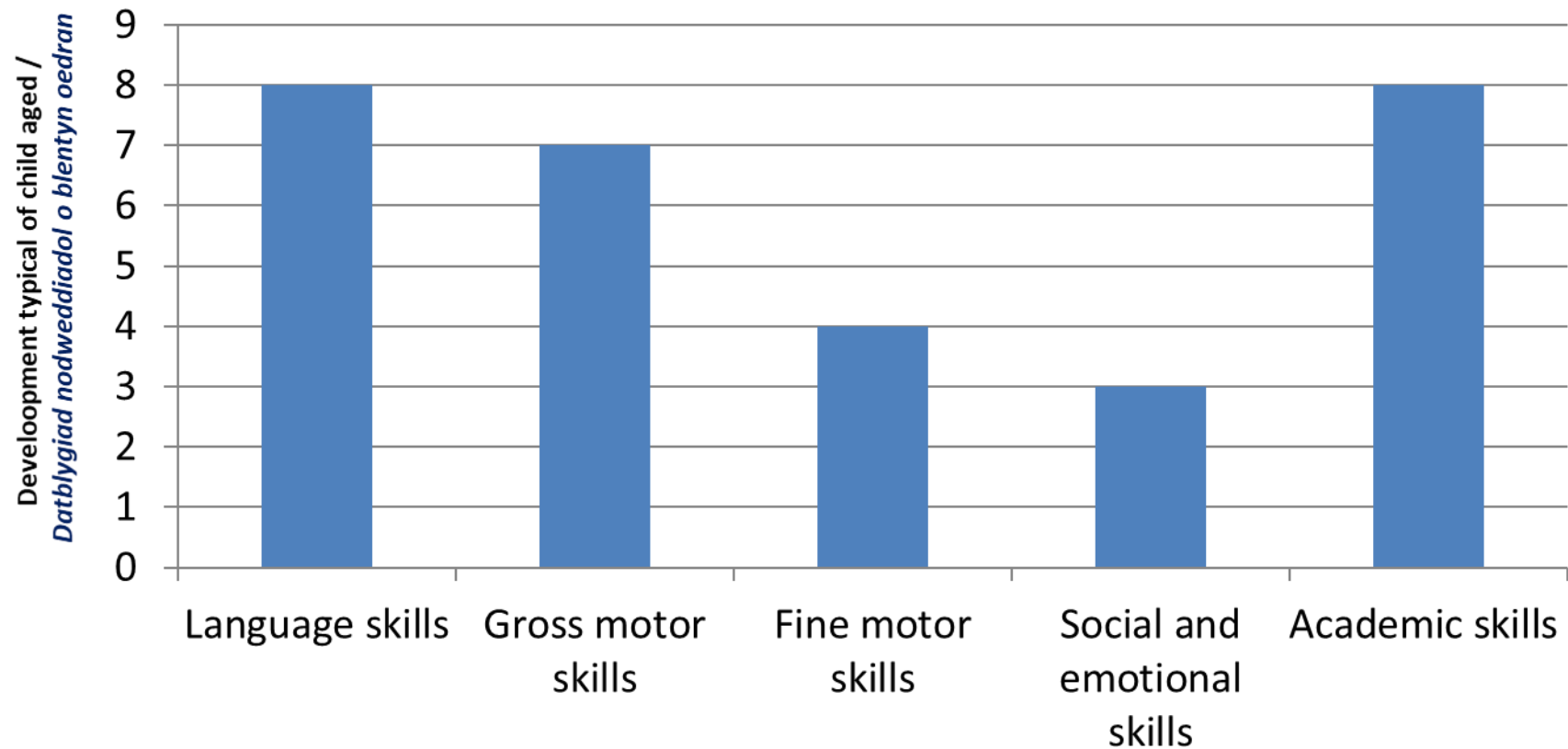
- ▶ Infancy - basic skills of vision, hearing, taste, and touch emerge by six months, as well as the ability to pick up one's head
- ▶ Age 1 - most children can sit up without support and possibly crawl
- ▶ 18 months - moving up stairs or manipulating smaller objects, such as crayons, is apparent
- ▶ Age 2 - a child develops the ability to walk and climb/descend stairs correctly; most have bladder control, though they might not be aware of it
- ▶ Age 3 - a child is able to feed himself and unbutton or button clothing
- ▶ Age 4 - the ability to manipulate devices such as scissors and dress oneself become apparent
- ▶ Age 7 - children are able to play basic sports, while organized sports become more appropriate by the age of nine
- ▶ Age 11 onwards – puberty starts and continues over several years

Spiky Development

- ▶ Children who have had early trauma often show a very 'spiky' profile of milestones. They are advanced in some areas, on target in others and delayed in some.
- ▶ This uneven development indicates that the causes are complex and may be the result of both pre and post birth trauma.
- ▶ Adolescence is a time when there are a lot of changes to the body and brain and developmental delay can become more obvious at that time.

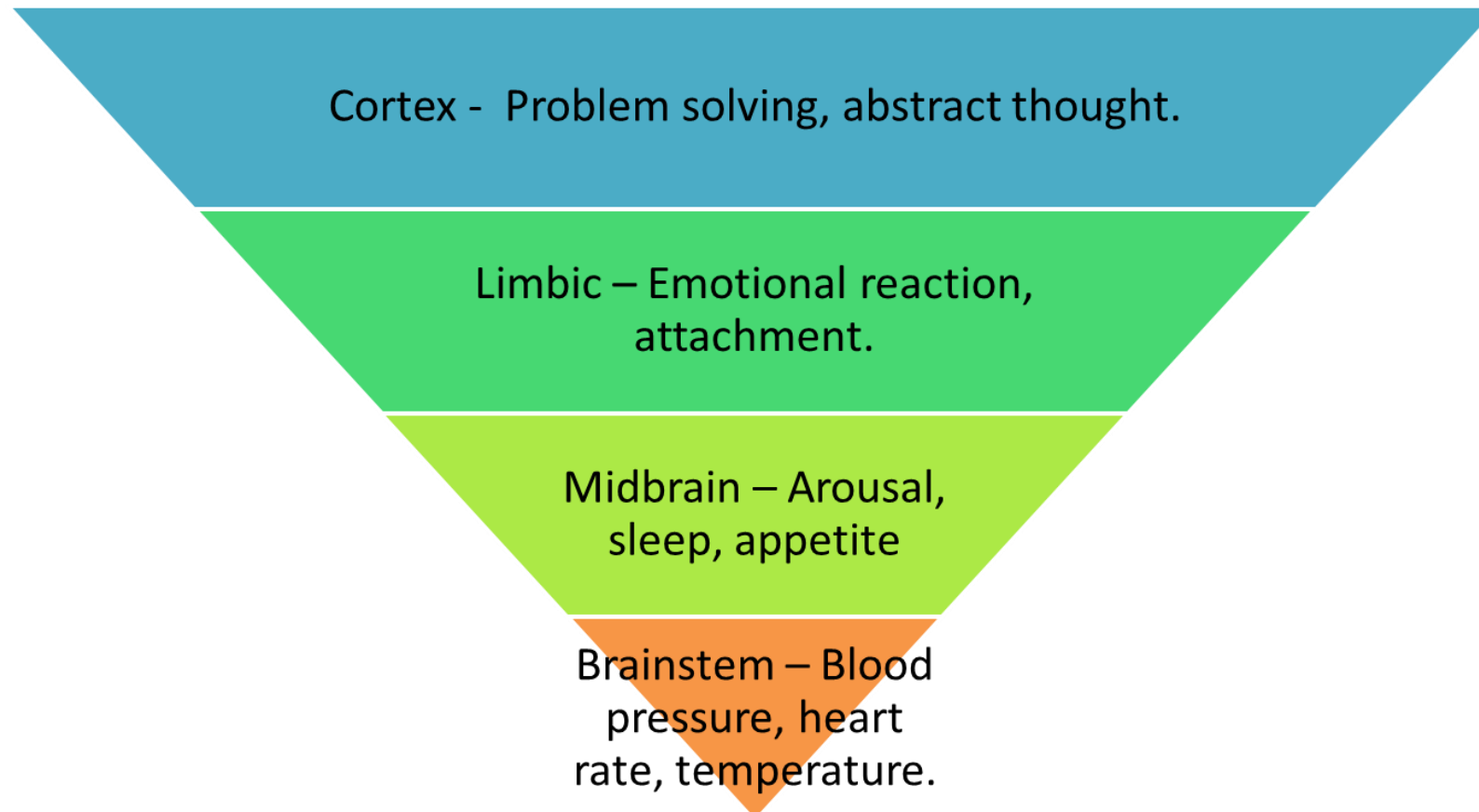
Example

Child Age 7 / *Plentyn 7 Mlwydd Oed*



Stages of Brain Development

Bottom up development.



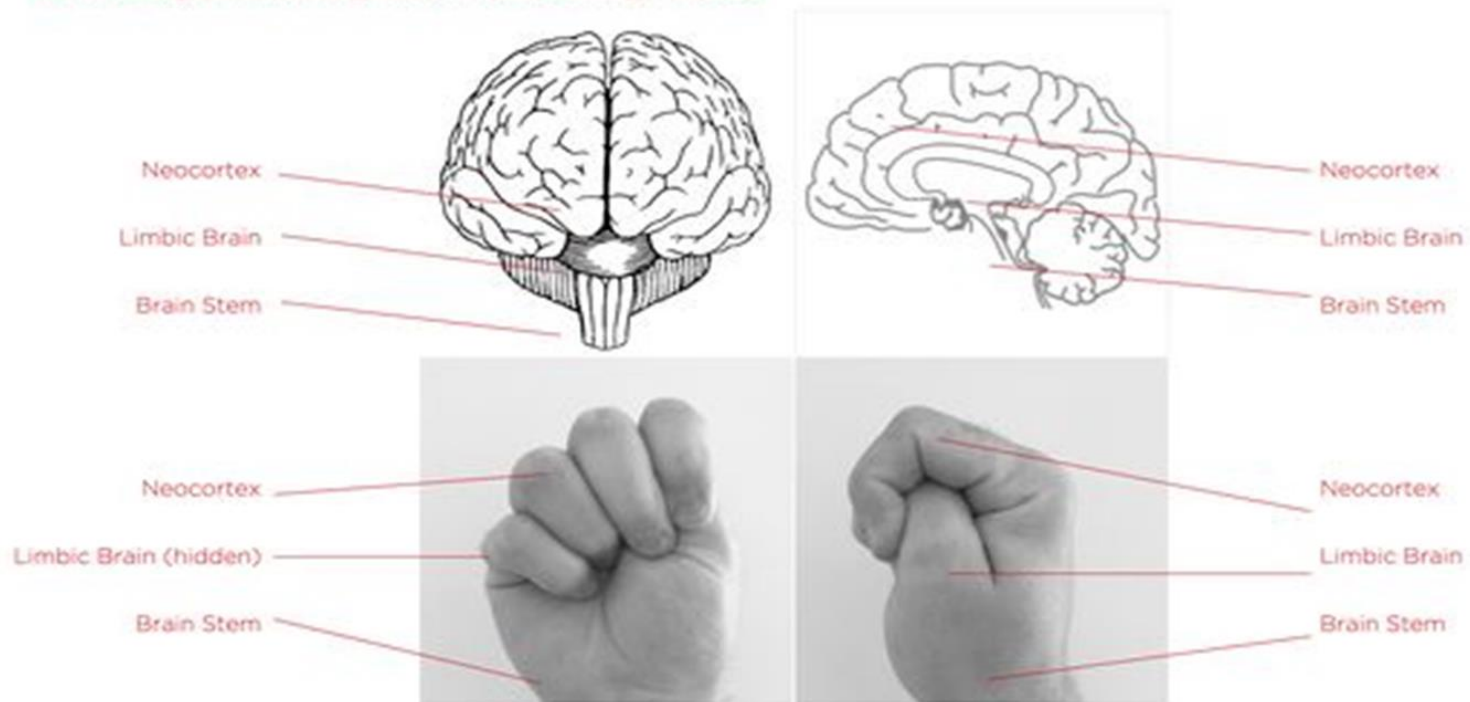
Amygdala

- ▶ The brains fear centre
- ▶ Deep inside the temporal lobe near the centre of the brain.
- ▶ Part of the limbic system
- ▶ Very primitive part of the brain

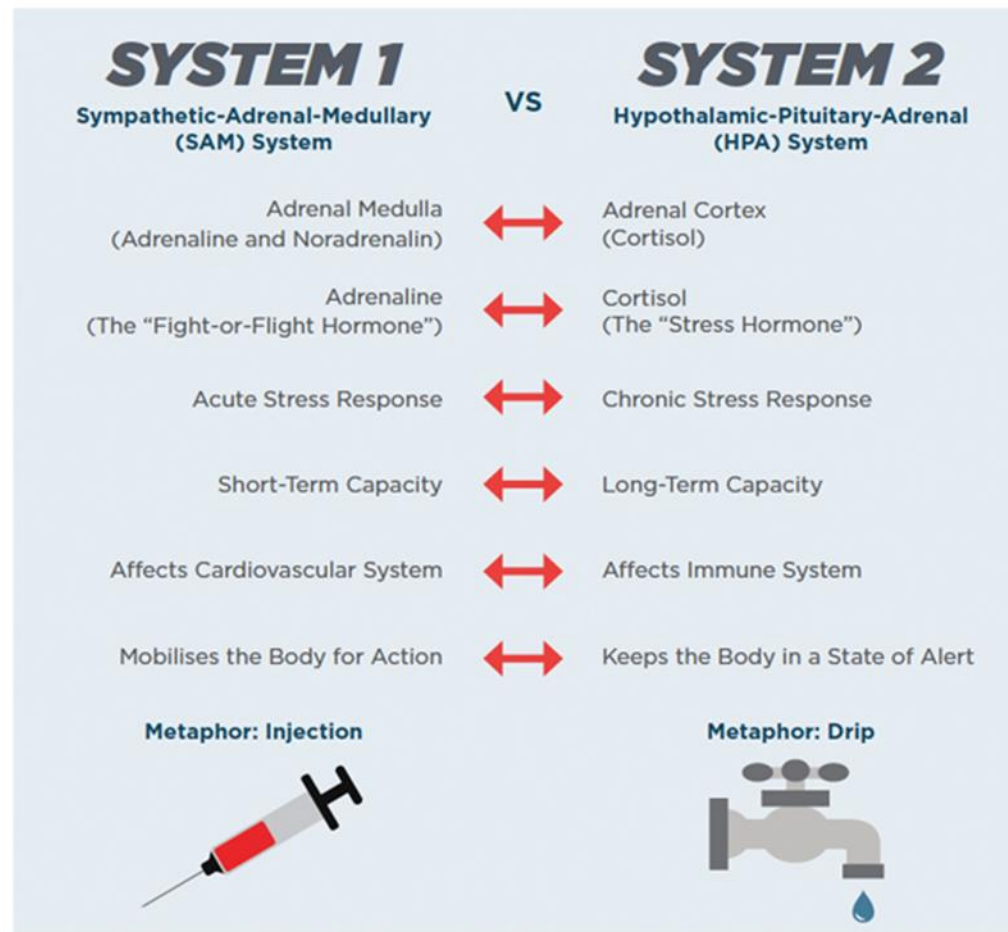
Dan Siegel

Hand Model of Brain

Dan Siegel's handy brain anatomy model



Stress Systems



Nervous System

	Parasympathetic (rest and digest)	Sympathetic (fight and flight)
Eyes	Constricts pupils	Dilates pupils
Heart	Beat more slowly	Beats faster and stronger
Lungs	Constricts airways (shallow breathing)	Relaxes airways (allows you to breath more deeply and slowly)
Digestion	Stimulates digestion	Inhibits digestion
Muscles	Reduces blood flow to leg and arm muscles	Increases blood flow to leg and arm muscles.

Brain Development

Pre birth	Formation and specialisation of brain cells, formation of spinal cord.	Effected by stress during pregnancy, drug and alcohol use by mother.
0-3 years	Connections form and limbic system matures. Memories are made.	Effected by attachment breaks, abuse and neglectful care. (toxic stress)
3 plus	Some connections develop strongly and others are lost.	Effected by attachment breaks and care.
Pre adolescence	Growth spurt in frontal lobe where impulse control and reasoning lie	Opportunity to build new connections and develop impulse control
Adolescence	Unused connections are lost and increase in white matter. Frontal lobes are last to develop into adult form.	Opportunity to build new connections.
Up to late 20s	Continuing brain development.	Opportunity to develop problem solving and planning parts of the brain.

Other useful things to know

- ▶ There are stages in development when it is easier to learn some skills than at others (e.g. language at an early age)
- ▶ When a new skill is practiced repeatedly it becomes embedded and a habit or memory
- ▶ Stress can be useful in short bursts but toxic if it lasts too long or is repeated too often
- ▶ Anxiety is a very common feature in children who have experienced toxic stress / early trauma. It is also associated strongly with Autism Spectrum Disorder(ASD) and Attention Deficit Hyperactivity Disorder (ADHD)

Sensory Processing Differences

Hyper (over) sensitive

- ▶ Fear of heights
- ▶ Dislike of touch experiences e.g. nail cutting, messy play, hair cutting
- ▶ Dislike of loud and sudden sounds
- ▶ Avoidance of playground equipment (swings and slides)

Hypo (under) sensitive

- ▶ Appears to have no fear or doesn't feel pain
- ▶ Seeks movement or touch opportunities (fidgets, rocks, runs about, leans on peers)
- ▶ Mouths or chews things
- ▶ Poor attention to the environment or people around

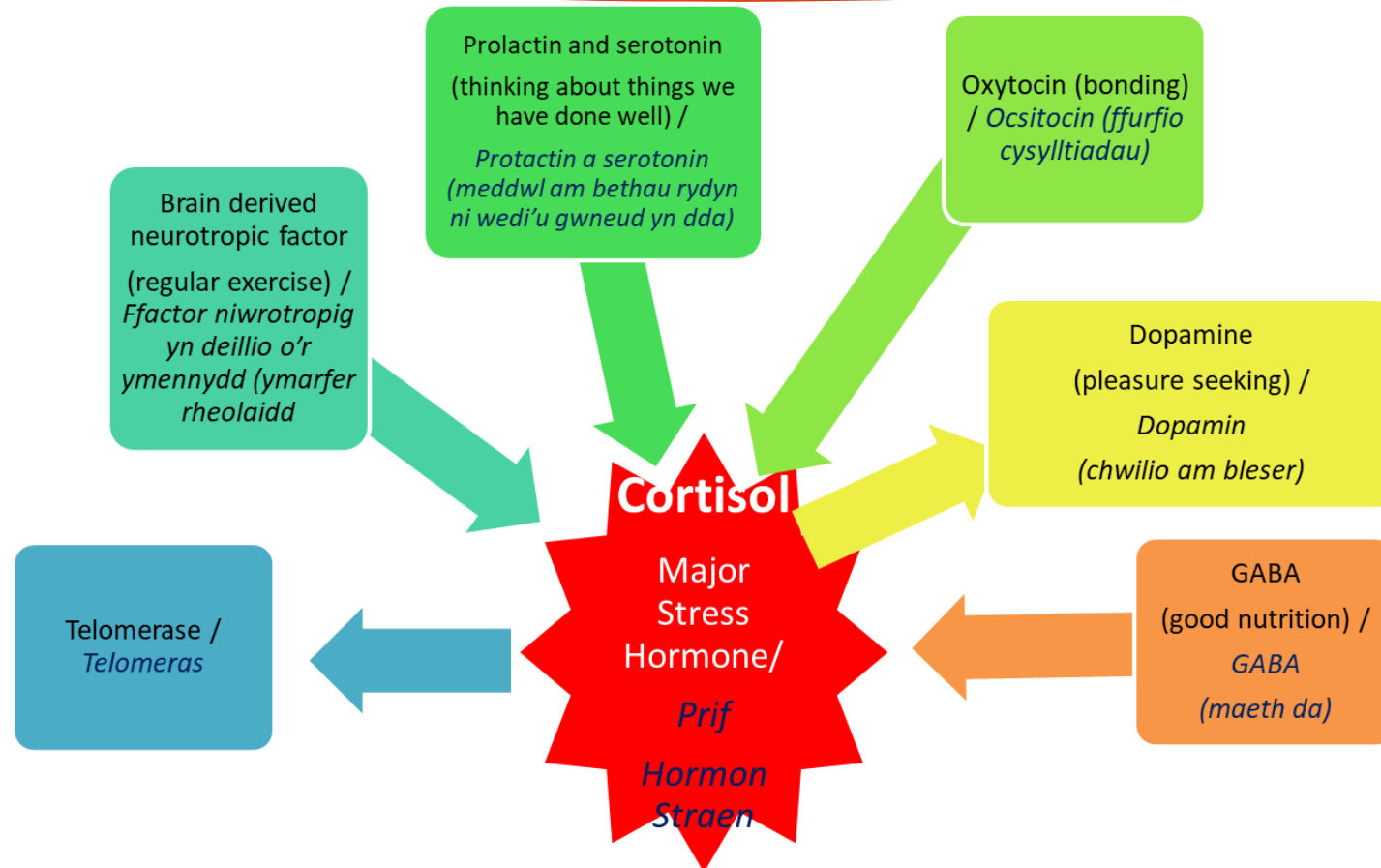
Motor Planning (praxis)

- ▶ Appears clumsy
- ▶ Difficulty creating movement ideas
- ▶ Difficulty planning and executing new movements

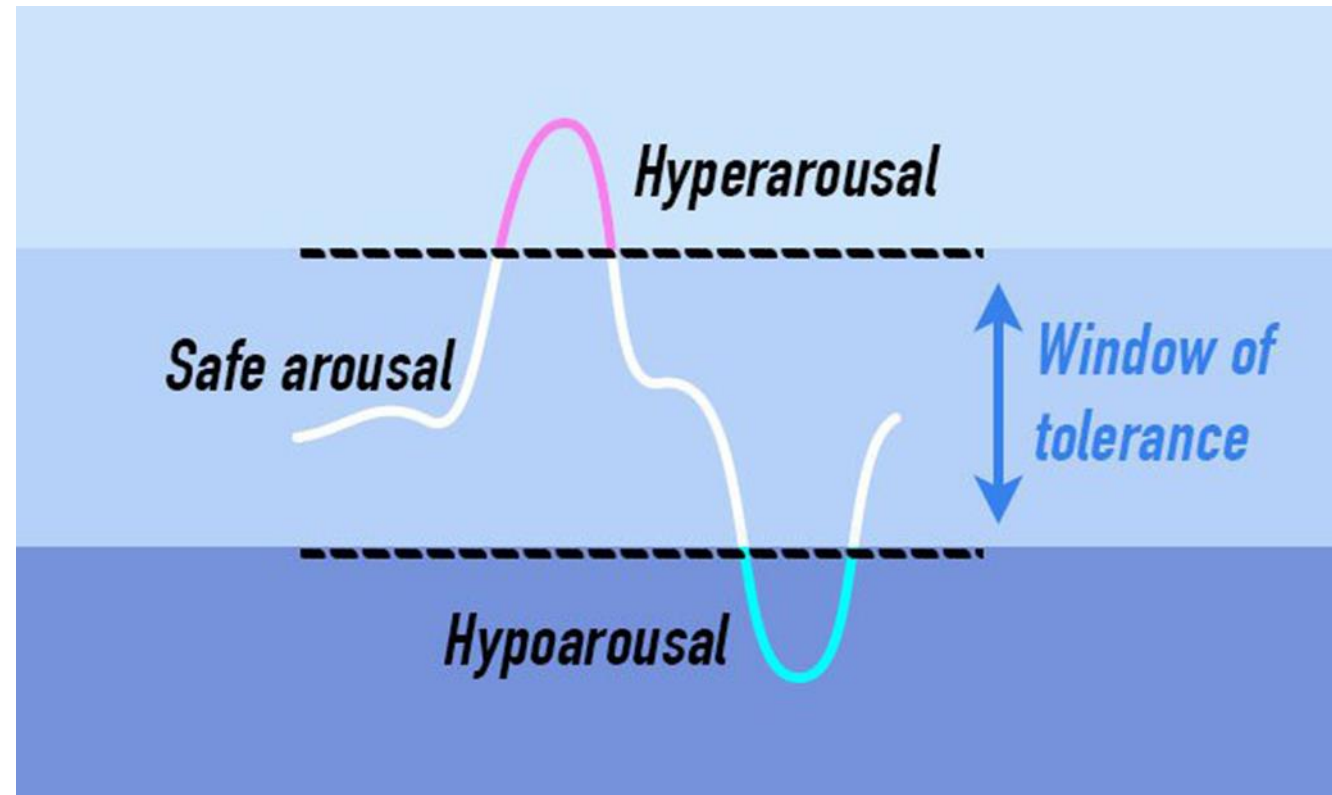
Poor posture

- ▶ Slouches at desk
- ▶ Fidgets/difficulty sitting in one position for extended period of time
- ▶ Impact on fine motor coordination & ball skills
- ▶ Poor balance

Hormones and Stress



Play can increase the window of regulation



RESPONSIVE rather than REACTIVE Parenting: Secure Base Model

- ▶ **Available** – making sure there is enough time for the parent - child relationship even if that is time spent doing boring activities as you might with a much younger child.
- ▶ **Sensitive** – being aware of the developmental phase the child is at and responding to that not the child's age.
- ▶ **Accepting** – that the child can't help behaving like a much younger child at times and that they may experience the world in a different way.
- ▶ **Cooperative** – finding ways for the child to be effective and competent which are developmentally rather than age appropriate. Help them get the sensory diet that they need.
- ▶ **Membership** – Creating a sense of membership of the family group and roots in the roots of the family.

What can you do to help your child at school?

Children's education in Wales is divided into four sections or stages.

Primary school

1

The Foundation Phase caters for children aged between 3 and 7.

2

Key Stage 2 is from 7 to 11 years.

Secondary school

3

Key Stage 3 is from 11 to 14 years.

4

Key Stage 4 takes learners to the age of 16.

This guide describes the curriculum as it applies to children in secondary schools aged between 11 and 14 in Key Stage 3.

You can find information about the other phases of your child's learning at www.gov.wales/educationandskills

What can you do at school?

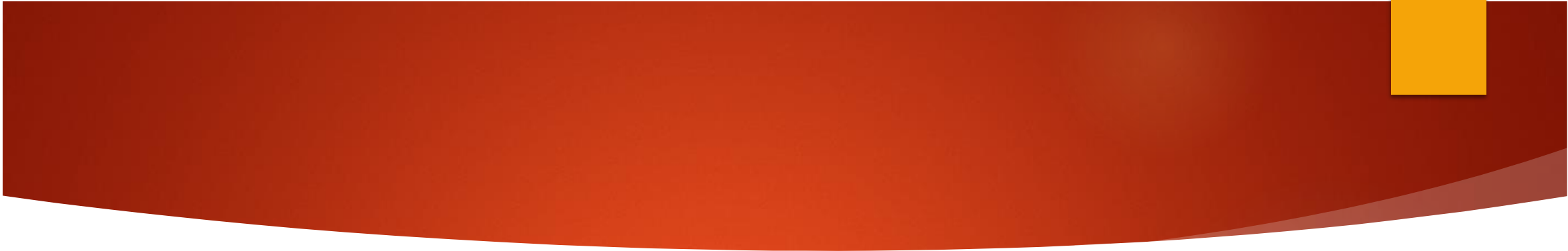
- ▶ Be aware that the school curriculum is based on a child's chronological age and not on their developmental stage.
- ▶ Make sure that school staff are attachment aware and aware of the impact of Adverse Childhood Experiences and attachment difficulties on children.
- ▶ Communicate effectively with school staff and help them think about what adjustments they might need to make to help your child access the curriculum.

Talk about adoption in developmentally appropriate ways

- ▶ As children grow older their ability to understand complex ideas develops through a number of stages.
- ▶ When we talk about adoption to our children we need to be aware of which stage they are in.
- ▶ If they are developmentally delayed this may affect when they are able to absorb this information.

Social and Emotional Development

Age	Major influence on social and emotional development
0-5	Parents
5 - 10	School and teachers in particular, other adults in out of school settings.
11 onwards / 11 ymlaen	Peer group and other adults in out of school settings

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- ▶ This course is part of a series developed by the National Adoption Service to support adopters after approval.
 - ▶ These can be accessed at the National Adoption Service website.
 - ▶ Please talk to your adoption support team for further information.