

Trauma: the long-term impact

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Introduction

"I felt dirty and perverted for letting them do what they did. My mood and personality changed, I became incredibly upset or violent at the smallest thing. I ran away from home so many times and had to be brought home by the police. No one ever asked the question: 'How does an 11-year-old drink into blackout?'"

Tim Hotham's account of abuse is but one of the harrowing testimonies we have collected in "Trauma: the long-term impact". This is the second part of the CSJ report on "[Safely Reducing the Number of Children Going Into Care](#)", and our response to the Government's review of the children's care system, out now.

In powerful and honest words, survivors share their stories, exposing the state's failure to look after the children in its care. Abuse and neglect shaped these children's early years, triggering in many cases horrific trauma -- comparable, according to neuroscientists, to that suffered by our war veterans with PTSD. But while we support soldiers with specialist treatment, we expect traumatised children to survive with untrained strangers and in unfamiliar establishments (often far from home).

Professionals who deal with children affected by trauma point to early prevention as key in overcoming risk factors such as domestic abuse and mental health issues that are exacerbated by poverty. Far too often, however, if and when a programme of prevention is delivered depends on a child's postcode, as Will Millard ([page 18](#)) writes. Our exclusive poll of more than 8000 teachers ([page 15](#)) shows that they are all too conscious of the failure of the present system. This is not surprising: the looked after child who struggles for acceptance and achievement can disrupt classes and threaten, or incite, classmates. The pandemic has increased anxiety among the young: one in six young people now are affected by a recognised mental health disorder. Teachers like Angela Dickinson ([page 16](#)) recognise that to meet increased demands they need to engage with parents, as well as services, as never before. Our poll finds teachers in the Northwest far more critical of government support for looked after children; their experience points to lack of multi-agency collaboration as well as resources. The levelling up agenda needs to start here, with the most vulnerable.

Neuroscience confirms that by failing to address the needs of children affected by trauma we are storing up long term problems. Prof Eamon McCrory of UCL, a member of the CSJ's Commission on Safely Reducing the Number of Children in Care, writes in the Foreword about the "social thinning" that occurs among children who survive in a chaotic home by adapting their behaviour - only to discover that this same survival strategy alienates classmates, teachers and other outsiders. As a result, exclusion, a spell in care or in a young offenders' institution loom. The cost to society of such interventions is huge; as our recent report on safely keeping children from care calculated, a young person with ten years' care experience will cost the taxpayer £800,000. Enlightened self-interest as well as compassion, therefore, should prompt an urgent reform of children's care.

Cristina Odone
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Foreword

By Eamon McCrory, Professor of Developmental Neuroscience and Psychopathology at UCL

Maltreatment in childhood increases children's susceptibility to mental health problems in adolescence and adulthood. Children will adapt to survive a hostile environment. While this adaptation will have some short term benefits it can increase children's vulnerability to mental health problems as they grow older (McCrory, Gerin, & Viding, 2017; McCrory, Ogle, Gerin, & Viding, 2019). Just as in a building a structural flaw may go undetected for long periods, so the neurobiological impact of early adversity can remain 'latent'.

Recent findings from neuroimaging studies have documented altered functioning in several brain systems including the threat, memory and reward systems following maltreatment.

For example, a range of studies now show that childhood maltreatment can lead to increased threat reactivity in the form of hypervigilance to threat cues, such as angry faces, and increased activity in the amygdala and anterior insula, two regions of the brain implicated in threat processes (Hein & Monk, 2017; McCrory et al., 2011, 2013). These changes are observed even in children with no manifest mental health problems, suggesting that there is an important window for prevention, before any clinical disorder emerges. This heightened reactivity of the amygdala to threat has been shown even at a preconscious level, suggesting that the hypervigilance is outside of a child's awareness (McCrory et al., 2013).

Reward processing is also affected by childhood trauma. Experiences of maltreatment and unpredictable caregiving have been associated with reduced or attenuated responses to reward in the striatum, a key region of the brain implicated in reward and motivation. This in turn is thought to increase risk for the development of depression and anxiety, possibly increasing the risk of substance-misusing behaviours (Duffy, McLaughlin, & Green, 2018).

Trauma also impacts memory. Experience of maltreatment is associated with a less detailed recollection of personal experiences. (McCrory et al., 2017; Valentino, Toth, & Cicchetti, 2009). Studies suggest that this "over-general" processing impacts social functioning. There is also evidence that negative memories are privileged over positive ones, thereby increasing the risk of depression and other mental health problems.

It is particularly striking that alterations across these three brain systems implicated in threat, reward and autobiographical are similar to those observed in adults with diagnosed depression, anxiety and conduct disorder (Gerin, Hanson, Viding, & McCrory, 2019). These changes may confer some benefit for a child trying to manage and cope in a dangerous or unpredictable home environment, but come at a biological cost - similar to that proposed by the toxic stress account - as children grow older. Unfortunately, altered threat, reward and memory processing may impact create broader vulnerabilities in the child's social world. There may be an impact on a child's social-emotional functioning reducing their ability to negotiate everyday social challenges and relationships. This can contribute to 'stress generation' where an individual is at greater risk of experiencing new interpersonal stressful events that can add in a cumulative manner to the negative impact of the initial maltreatment experience (Gerin, Hanson, Viding, & McCrory, 2019). In addition, the impact on social functioning may mean that over time a child loses the support of peers or adults, referred to as 'social thinning'. This in turn can increase a child's mental health risk even further by reducing the protective benefit of social support.

Content warning: some of the following testimonies contain graphic descriptions of abuse

Lauren's Story

By Lauren Parker

"What makes life good?" The first person to ever ask me that was my Youth Offending Team officer. My answer then, at fourteen-years-old was simply "friends and family".

I thought I had plenty of friends. There were always twenty to thirty of us together in the park. Like me they weren't really attending school, they drank and most of them had no parents around. Friends I'd once had, those with parents, cosy furniture and home-cooked meals, had long disappeared. Their parents thought I was a bad influence because of my shoplifting or fighting. They thought it would rub off on their children. I didn't blame them.

But I don't think they understood that if I didn't shoplift, I didn't eat. I only ever took bottles of water, sandwiches and occasionally a bottle of wine. I didn't even like the taste of it, but I was more confident when I drank it.

My mother had kicked me out and I was sleeping on buses and in car parks where the rain blew in. I met men who would let me stay with them and on the days where I was unsuccessful at shoplifting, they'd give me food. I didn't know this "help" came at a price, but with alcohol inside me and a deteriorating self-esteem, I'd soon stop caring.

It took me many years into adulthood to realise I was targeted especially. Young people without adults in their lives are willing to do things for acceptance, to feel less lonely and because it can become their normal. I met many children in the same position, caught up in shoplifting, drugs and violence. I can't imagine they would have done those things if their parents had stopped them from being groomed. I was eventually placed into care at the age of 15 after social services realised that I was cutting myself.

As an adult, I've often wondered why I still hung around those people after I went into care and no longer needed them for food or shelter. I think it had become comforting in a messed-up way. I was lonely and my 'friends' were the ones I looked to.

During my time in care, I moved house so many times that I couldn't attend school anymore. With every new placement I'd be moved to a new area, a new school and the cycle would begin again. By Year 11, social services gave up finding me school. 'You'll only fail your GCSE's,' they said. 'You haven't done any practice tests or coursework, there's no way you'll pass.' So I didn't bother taking the exams, I didn't believe I'd ever be successful at anything anyway. Society had drilled into me long ago that if you had a criminal record and didn't do well in school, you'd go nowhere.

My relationship with foster carers was difficult. One placement lasted just nine days. I was the second child she'd fostered, and she spoke about the first like she was an angel. Well-mannered, neat and regularly in touch with her parents. She even did her own washing. 'Good for her', I muttered. I asked to leave because I knew I couldn't compare. When my social worker refused, I kicked my bedroom door in, breaking it. I was glad I did it, because the foster carers didn't want me after that. I was slowly learning how to use manipulation to get what I felt I needed - that's what the psychologist said.

I had refused to see a psychologist at first, but I eventually relented. I was surprised when I met him; I'd imagined an old guy in a suit, but he was young and didn't pretend to know what I was experiencing. He cut to the chase: 'From a young age, you learnt that when you ask for what you need, you won't get it, so now you feel you have to manipulate, lie or use tricks to get what you need,'. This made sense. Asking for food didn't help, so I'd steal it. Social services didn't put me into care until I started cutting myself. My psychologist was also the one who helped me to realise that I didn't feel safe in a home where I thought I was bound to be kicked out eventually. The idea of being moved because I broke something was more palatable than the idea of being moved on for simply being myself. I could handle 'bad Lauren' being moved on, but not 'normal, sad Lauren who didn't know how to use a washing machine'.

I'd go on to push several more foster carers away. I tested everyone's patience, seeing how much I'd have to do to make them get rid of me. I was self-sabotaging and the more I did it, the more foster carers confirmed my deep-rooted feeling of worthlessness. If I stayed in a foster placement for longer than three months, the fear of rejection loomed over me.

It was the same in relationships. I felt at any minute that the man would realise that I was 'nothing', so I'd end up breaking up with partners prematurely just so I could feel safe that I'd made the decision. I stayed with one or two partners precisely because they weren't good for me. The type of instability they brought to my life was familiar.

Things changed when I became pregnant at sixteen-years-old. I suddenly realised that I didn't want my child to go through what I had. That's when I cut out all the 'friends', I didn't want my child around those people. I felt like my inner child was reaching out to protect my baby. My maternal instincts also kicked in and I wanted to both break the cycle for my daughter and give my inner child the much-needed stability that she didn't get growing up.

A new foster placement, my last one at three months pregnant, was a turning point. She was the first foster carer that didn't seem to be in it for the money. She took me out for dinner and took a picture of me and placed it in a frame. She even paid for me to have a 3D scan of my daughter when I was six months pregnant. No one had ever shown me such kindness, and I secretly cried in my room.

Being loved felt wonderful but it scared me; I was convinced she'd see the 'real' me. I'd swear and shout at her for no reason. I'd throw things and refuse to eat dinner. When she'd say my behaviour was unacceptable, I'd scream at her to 'get rid of me'.

At seven months pregnant, she sat me down and told me she was going to contact social services to have me moved. She made it clear that it wasn't what she wanted to, but she felt I was unhappy living with her and all she wanted was for me to be happy. I burst into tears. I didn't want to leave, but what hit me more was that she was willing to move me, not because she hated me or my behaviour, but because she truly wanted me to thrive. I stayed, and my behaviour improved.

I was seventeen years' old when I aged out of care and moved into my own flat with my eight-month-old baby. I thought we'd be free...sort of. Social services were still visiting me once a fortnight to check I was being a 'good' parent. My understanding of bad parents was that they hit their children or didn't feed them. Didn't social services realise that when you grow up with that, you want to be different and break the cycle?

I felt terrified that social services would find an excuse to take my daughter away. Every time they sent me a text letting me know they were five minutes away, I'd throw up, shake and have a panic attack. The first time, I called an ambulance thinking I was having a heart attack.

Even after I left care, I still struggled with anxiety, fear of rejection and low self-worth. I managed, by some miracle, to get a job without qualifications. I started as an apprentice and after 18 months, I was hired full-time. I worked hard and exceeded my own expectations. I felt proud and like a good mother creating a positive future for my daughter. But when I and another colleague went for a promotion and I didn't get it, my rejection issues reared again. I genuinely believed the 'job rejection' was personal. It fuelled my anxiety that my contract wouldn't be renewed, and so I quit my job.

I spent weeks inside the house, holed up with my child who no longer needed to attend nursery. I came across a blog about low self-esteem and the words sprung out at me. I could see how my rejection and trust issues had come from childhood trauma and read about how these issues can follow young people into adulthood. I didn't know that having a criminal record, having a baby early and leaving school with no qualifications were far more common in foster children and care leavers than the general population and this realisation changed my life. For years I'd felt that I was just unworthy but now I was going to beat the statistics.

Gradually, my self-esteem improved, my daughter was thriving, my career was advancing, and I enjoyed healthy relationships. I was a finalist in [Voices 2019](#), the national creative writing competition for care experienced young people, and I went on to receive a grant to study journalism. I am a published writer and I also work as a Care Experienced Consultant for the charity [Coram Voice](#). I am proud to use my writing to push for change and advocate for children in care. Children in care, through no fault of their own, experience trauma and serious disadvantages. Research by the Coram Voice Bright Spots programme has found that care leavers themselves say that having supportive relationships, feeling settled where they live and feeling positive about the future are the things that make life good. Unfortunately, few care leavers actually experience this. But if there is one thing that I have learned, it's that with the right support, beyond trauma there is growth and resilience. All care experienced young people deserve support to be their best selves.

Paul's Story

By Paul Finney

My life didn't get off to the best of starts. I was born on the 13th of August 1969, the day the Troubles broke out in Northern Ireland.

I didn't realise then that the Troubles would just be a backdrop to my childhood - and other traumas would be at the forefront. My earliest memory is climbing on my father's back with a bottle to try to hit him on the head so he would stop trying to kill my mother.

From then on life was just slap after slap after slap and day after day of abuse in every way.

The fear of sleeping in the dark stayed with me into my early twenties.

I had seen my mother and sister being beaten, and then I myself was beaten. There was sexual abuse as well. There were times when we locked ourselves in the bathroom to find knife marks in the door the next day.

My mum took to drink. I guess that it helped to numb the pain of being used as a punchbag.

My father then managed to get my mother sectioned in a mental health hospital so he could bring into our home a woman he had met. Without my mother there to shield us, he could continue to give me and my sister a hiding whenever he pleased.

I'm still raging about that. My life was made into a hell on earth.

It's only since my mother passed last year that I began to open up. I went on a tv show with Ian Wright and have worked with people like Charlie Webster.

Our neighbours used to point at our house and poke fun - we stood out a mile but no social worker ever came to see what the trouble was—if they had, they might have saved my mother from drink. The care system simply doesn't work: at ten I was put on tranquillizers. Later I was offered counselling, but it only lasted six sessions. So by the time I had worked up the courage to open up, it was over. And the door was open and the demons were out, running mad, and I was no longer getting any help.

So many just don't go into counselling out of fear of being left with nothing.

What helped? My family. My wife Liz always believed in me. She stood by me at every step of my journey: it must have been hell for her, sometimes I'd wake up from a nightmare, trembling and sweat, but she would comfort me. We married when I was 19 and she has never wavered in her support. When I was 31 our daughter Lillie was born - and proved the catalyst in my recovery. You want to stay alive for a child.

The fear of those of us who suffered sexual and physical abuse is that we too become monsters. I was terrified: could I harm her? But my wife trusted me to be a good dad; and my daughter took it for granted. Little by little I realised I had achieved something I never would have believed possible: I had given Lillie a normal life. She is now at university and I am incredibly proud.

This is not to say the hurt has been really fixed. It is still a day to day struggle, to stay on earth and keep the demons at bay. But I love my family and they are the blood that fills my heart.

Tim's Story

By Tim Hotham

I remember being a little boy moving to Manchester age 7. Remembering something is a world away from the flashbacks I was to endure from not long afterwards and remain with me in my 50th year.

That first year my big sister was a constant companion but she was 11 and would be off to big school. The world was scary but I was a happy, intelligent and funny young lad. Our parents both worked so we would play till they got home. We were new to the area and the guy across the road began making friends with our family.

He had everything we didn't: tropical fish, a video recorder, a sunbed, a motorbike. And he was always around. My eyes would widen with delight when I was offered a ride on the back of his bike!! He also ran the local youth club so there were always 'big' kids to admire too.

With my sister off to secondary school, I was left to wander home alone. Ged was always around to chat to (which was good cos I was forever losing my keys), so he would let me hang about with him till either my sister or mum or dad got back. I didn't live close to my friends from school so was quite lonely. Little did I know I was already being groomed.

From age 8 or so the 'friendship' grew. More rides on the bike, trips to the youth club where I was surrounded by kids of 13/14. It began with a puff on a cigarette, then a drink of beer, then a bit of a spliff. This was all engineered to make sure I didn't tell my parents what went on. Next came 18 films, more drink and more often just the two of us. Then x rated videos and 'had I ever played with my dick?'

By the time I was being raped I had probably gone through at least two years of grooming - all absolutely deliberately planned to make me too scared to speak up because I had been such a 'naughty boy'. Once physical touching began, the darker and far more insidious side of grooming was underway.

I knew what was happening was wrong, but I had already been such a bad boy already. The drug and alcohol use was growing, I was being used in crimes from shop lifting to house burglary. I was approaching 10 years old.

The sexual abuse continued and grew, there were a group of men who would all have us round, get us drunk/stoned and put on their sick porn. I remember (still with a shudder) being shown videos of men having sex with younger children/babies of 3, 4 or 5!! "See, they can do it!"

I withdrew, I had worked out by now that it was wrong, but inside - I felt was wrong. I was dirty and perverted for letting them do what they did. My mood and personality changed, I became incredibly upset or violent at the smallest thing.

I ran away from home so many times and had to be brought home by the police. No one ever asked the question: "How does an 11 year old drink into blackout?"

I was expelled from school, sent for anger management, even for brain scans but no one saw the pattern of behaviour as anything other than a 'problem child'. It's a pattern which is pretty much cooky cutter for a child in distress so please - spread the word.

I managed to put an end to the abuse aged 13, but he was our neighbour still, which probably prompted my early exit from home and what was the start of a lifetime of running. I was PETRIFIED that people would find out just how disgusting I was so I was always scared. I was positive that if people found out I had had sex with a man/men they would see me as 'gay' (I had a very hard time distinguishing the huge difference between sexuality and paedophilia and the early 80's were a homophobic place to live in at the best of times).

Running is the story of my life even now. Aged 50, I have lived in (rough calculation) at least 52 places all over the UK, Europe and two other continents. This was not an exotic adventure: I was already an alcoholic, I was also completely self-sufficient -- I just wasn't able to form close relationships, had no trust, was still terrified that my abhorrent inner pervert would be visible.

Another gift from my abusers was constant rage. This manifested itself in various ways that more oft than not ended in a police cell. I had a chameleon-like outer skin and could be one of a few characters - but I was always broody and often incredibly violent. This was a charade (I didn't know at the time) that masked the inner weakling who'd let grown men use him as one of the 'chickens' - a name which only rose to the top of my broken memory a couple of months ago. I was convinced I would die in a fight or get the wrong side of a gun/knife and frankly, I didn't much care.

Life for a survivor of abuse (and I am still here so am still surviving) is like a game of snakes and ladders. If you perceive even a hint of being uncovered, you slide down. The flashbacks hit, down you go. Climbing up the ladders was difficult, always with the fear of discovery or even worse - that well known 'fact' that if you were abused you would abuse. It's known as the 'Vampire Syndrome' and it kept me silent.

The misconception that sexuality has anything to do with a twisted sexual deviance leading to paedophilia also plays a part. Society still harbours a level of homophobia which links paedophilia to being gay.

We don't protect our children. It's harder to get a driving license than it is to get a license to work with children! That's messed up.

Being a father was the only thing I ever wanted. I would make my children feel safe and loved and protected. I had no expectations that I would either find a partner, nor be able to conceive, such was the damage I had inflicted on both mind and body. During one stable period I managed to achieve both things. What followed I can't describe, but every other survivor who is also a parent will understand. I used to constantly ask myself, "What if I AM a paedophile but it's not 'kicked in yet'! What if I'm attracted to my own children?" Can you imagine loving a little person so much, hoping that vicariously, you may have a childhood through/with them. Yet all the while questioning whether I am cuddling my child in the wrong way, changing the nappy and putting cream on made me sweat. Going swimming with them, tortuous (especially the changing rooms). I have no attraction to children other than love, in its purest and most beautiful form - but I was terrified that IT MIGHT CHANGE any day.

My addictions to alcohol, drugs and danger brought an end to my marriage and I was slipping further and further into my self-loathing. I had failed at the one thing I dreamt of - having children, and keeping them safe.

I hit rock bottom and during an alcohol services interview I inquired if there was any help for people who had gone through childhood trauma. I was 40, it had been my secret alone for more than 30 years. I was lucky, I lived in Manchester which had one of the only (at that time) charity specifically set up to help men who had been sexually abused as children or adults.

They met in the Quaker house once a fortnight. I met Duncan in a borrowed office on Oldham Street and for the first time, ever, gave a little detail of my 5 years of hell. I went then to the safe room at the Quaker house, terrified. There were gay men, straight men, family men, hardened tough guys, a real mixture. It began to sink in that it wasn't actually my fault, and that I had been only a child. The backgrounds and stories differed, but almost to a man we had all displayed very similar patterns of behaviour, all carried the same fears and had very little self esteem or genuine confidence.

But some were getting it. I was 40, still drinking, going through divorce, failing at everything - but I was reminded that I was/am a survivor. Survivor Mcr was the name of the charity and they started to glue little pieces of me back together.

I got up the courage to go to the police, and tell them, in detail, all of the twisted things I had been forced to do. The police had never been on my Christmas Card list due to my skewed experiences and the way my trauma made me feel and act. This time however, they were amazing. I never felt doubted, I was kept up to date, they even told me they had gone to arrest him making as much noise and fuss as possible in his little community. He was known to them and the CPS were quickly satisfied and charges were brought.

He pleaded Not Guilty. I was 40 years of age but I was still scared, inside I felt like an 8 year old. As the court date approached I was a wreck. More so when I received the call just before to say that he had committed suicide. No note, no admission of guilt and no apology!

I went into a huge tailspin as I had lost my chance to look him in the eye and tell him I wasn't scared anymore. I ended up homeless, destitute and not far from dead. I was taken in by some wonderful people who eventually got me to AA and I finally accepted that I was an alcoholic. One with many reasons/excuses of course, but an alkie all the same.

Sober, I started to actually get up the courage to speak more openly of what had happened, the abject terror of my youth. I was shown so much love and support from the very people I had expected would shun or beat me. My confidence grew, my kids came back into my life and it was one of the proudest moments about five years later when I was asked to become a trustee and director of the very charity that started this haul up the biggest ladder.

I was so proud. I accepted immediately and did my very best.

The trauma remains ever present, though. This year of isolation during lockdown has seen me stumble and fall. I had to step down as a trustee as it was too triggering and I wasn't doing a good job. I also volunteered to be part of a panel of what I term 'unfortunate experts' to assist in the creation of a recently published report highlighting all the things that could be done better to protect and safeguard what are our most precious resources - our children. Zoom meeting in the day, hug myself tight sobbing at night. It took its toll also, but my justification was that 'if it saves one child'.....

So, 42 years on I'm surviving, sometimes with a smile, sometimes clinging on to the edges of sanity by my fingernails.

Kenny's Story

By **Kenneth Murray**

It's difficult to pick up a paper or browse the internet of late without seeing the life of Prince Harry and Megan broadcast for all to see and give opinion on.

On a daily basis we're all invited into their trauma, asked to sit in judgement.

I'd like to think I know a little bit about that. Prince Harry was, in a way, raised with the support of the state; I too was a child of the state in a completely different manner. My life is so unlike Prince Harry's that it's akin to the Prince and the Pauper. What we have in common, however, is trauma. Harry's the world knows about, mine was my experience of the UK care system.

When I was 11 years old, I was taken away in the back of a police car and delivered to a building with tall, imposing gates. This was a Glasgow children's home, billed as a 'therapeutic environment' for vulnerable young people.

Locals resented our children's home. They'd placed a sign protesting the building's existence right by the gates. As far as they were concerned, the children who called this facility home were young thugs hellbent on intimidating their neighbours. We were criminals who were fire-raising and house-breaking in between committing all manner of sexual offences.

They came to this conclusion as a result of the world portrayed to them by a popular newspaper of the time. Every single bit of it was false and not based on any real understanding of what was going on in the world around me.

I was a sad young boy. I was taken away from my family not because I was a criminal or a trouble-maker or 'difficult', but because of a mental health crisis in the family. A mental health crisis that had resulted from years of poverty and a lack of support beyond sticking plaster efforts to get us over to the next crisis. Years of domestic violence perpetrated by my Father against my Mother exacerbated the crisis. If only we had received some form of support early on, perhaps the violence would have stopped, and we the children would not have been traumatised.

Instead, I was removed from the family home, separated from my four siblings and deposited with strangers, many of whom had been deposited there through similar circumstances. I was ferried to and from school in a taxi, and the only friends I had in my placement didn't stay for long.

Care can become a reality for any family. All it takes is an alignment of circumstances, events you might struggle to imagine but which hit in violent succession, and then suddenly it's your children in care, marked with a stigma that can seem indelible.

We were young, alone and frightened. Yet people were afraid of us. The campaign to shut the home down succeeded after nine years, in no small part thanks to a cross-party effort from politicians across the spectrum. It's nice when people can set aside their differences to take on 11-year-olds!

I know that the moment I tell someone I spent time in care, every single stereotype and terrible narrative will come flooding into their mind and it'll allow them, whether they realise it or not, to judge me.

As a society, we tell ourselves to 'be kind' and be 'trauma aware'; but all these years later, I don't doubt for a second that, given the opportunity to back an ill-conceived 'community protest' against a children's home, people from across the country would fall over themselves to sign up.

We tell ourselves that we want to understand trauma but to understand is not a philosophical nicety, it's something we have to do. It's a verb.

As a young boy, I remember a priest using the aphorism, 'An eye for an eye makes the whole world blind', words of wisdom sometimes attributed to Mahatma Gandhi. It wasn't until I was older that I realised how hard it is to live those words, especially when met with deep-rooted beliefs and assumptions. When it comes to people who have been in care and end up in the criminal justice system, we need to rethink what we mean by injustice and by retribution.

Equally, when we think about our right to sit in judgement on someone's trauma and turn it into a conversation, we need to take heed.

I may be a million miles away from the life that Prince Harry lives but even I understand the need he must feel to explain himself, try to give his side of the story or defend his loved ones from continued public attack. We all have a responsibility to think about one another in the same way.

There can be no time limit on our responsibility to each other or the state's to those who need its support and understanding more than most.

Compassion is not a finite resource. It is replenished every time an 11-year-old dropped off at a children's home is helped to make the most of their life and in turn helps make life better for the 11-year-old who comes after them.

Compassion is not enough though. We need to love young people and create supportive environments where they can be loved. I don't think institutional care works. It never has, if the outcomes are anything to go by and the number of inquiries and investigations and UN resolutions only confirm this. Care needs to be more vocational and focus less on stopping things happening to people and more on making things happen for them.

The best place for children is almost always the birth family. We should be spending our money, time and resources on keeping families together wherever possible. We could start investing in supports they need - financial but also emotional - everything from parenting classes and networks to building good relationships with social workers and the local community.

I look to my friends who grew up with relatives and know that they felt loved. Whether through the simple fact that they were told so or shown physical affection like hugs and kisses. They didn't have to navigate formal processes where they asked to be heard and would be judged by someone putting a degree to use.

We know as a society the cost of growing up without love.

Amy-Beth's Story

By Amy-Beth Miah

Anyone who isn't white will know that the question "where are you from?" has got nothing to do with where you call home. It is about a curious fascination people have with race and heritage.

Where do I come from? I'm not sure I know, as my records have never actually recorded my heritage. I still find difficult the box ticking exercise where we are supposed to record our race and ethnicity because none actually apply to me. I have contacted my biological father who has stated his heritage is Bengali -- but there are rumours I have Brazilian in my blood line somewhere. I've been unable to confirm this, so I am debating doing a blood/DNA ancestry test... but I'm unsure what it could or couldn't bring up.

Growing up you learn about your heritage from your family, from simple everyday activities like cooking and eating together, celebrating religious holidays, speaking the language they do and listening to the music that they play. Families share stories and pass information down from one generation to another. All of which helps you understand who you are and shapes your identity.

I grew up in care, however, and had only intermittent, limited contact with my family. That means the answer to the question of where I'm from is even more complex. I was brought up by white people, in foster homes and institutions that were designed and delivered by white people. Little time was spent supporting me to explore my heritage, or at a minimum, helping me understand that people would treat me differently.

Black and Minority Ethnic (BAME) children in England, as is the case in America and New Zealand, are overrepresented in the care system. Giving children a 'colour blind' upbringing, or making their difference feel like a burden, is wrong - but all too common still.

Due to a lack of BAME foster carers, children who are not white typically end up being placed with white families, a process referred to as transracial placements. It is suggested these placements often have a negative impact on us. The intervention of being removed from our homes is often traumatic, which can be intensified by being placed with a family of a different race or heritage. Unintentional actions of carers that go against our cultural beliefs and norms, for example being given, or being deprived of, certain foods, can be deeply upsetting.

My social work records allude to me being known to social services in London prior to my mum fleeing to Scotland due to domestic abuse. I don't know the exact date I went into care but I do know I went into long term foster care three days before my 8th birthday, due to the neglect I suffered as a result of my mum's mental health.

For some Care Experienced People, living with carers who have a different religious, ethnic or cultural background can make them feel like an outsider : creating their sense of self is difficult. In many foster and adoptive families, assimilation is key. I know that adults have encouraged young people away from their religious practices and refused to take black children to anyone but the local barber.

My foster family did try to understand my heritage, but given there was no record of it, they found it a challenge. As I'm brown skinned, my mum looked out for bollywood movies to rent out from Blockbusters. A year after I moved in with my foster parents, *Bride and Prejudice* was released and my mum would rent it out and we would watch it over and over again. The same with *Bend it like Beckham* and *East is East*.

School was hard: I was bullied because I had a mono brow and upper lip hair. My elbows and knees were darker than other people's. I'd come home crying and my foster parents didn't know what to do. Even getting a hair cut had to be formally requested to a children's panel and consent obtained by my biological mother who was more often than not sectioned and unable to provide consent for her own self, let alone me.

My foster parents were stuck between helping me, by taking me to get waxed like I wanted, or getting into trouble.

My social worker hadn't provided my family with the tools or basic knowledge to even know my heritage let alone embrace it.

I don't know anyone from Bangladesh. I've never tried the food. I've never visited. Taken part in the celebrations.

But I never felt at home, in my foster family. I remember when I wanted to get my ears re-pierced. They'd already been pierced, so my mum felt there was no real need to request permission of my biological mum.

Mum took a few of us to Claire's Accessories. Everyone got their ears pierced without question but when it came to my turn, the woman in the shop refused to do it. My mum questioned why and was challenged on how I could be her daughter. When my mum explained I was fostered, she was told they wouldn't be going ahead without seeing proof.

We had to leave the shop because my mum explained she wasn't willing to bring paper work detailing my trauma to a random woman in Claire's Accessories.

I bought a piercing gun with my pocket money when I went into residential care. It was pretty common for me to have a new added piercing every other week.

When I lived in residential care, phrases like black bastard weren't uncommon. I was known across the children's units as "Paki Amy" even though I've never been told my heritage traces back to Pakistan. Staff called me Pocahontas and when I'd wake up in the morning if my hair was curly a senior member of staff would sing Shaka Khan at me.

I wasn't given extra money to be waxed so lip hair came back as did my mono brow. I asked for it to be covered in toiletry money but was told no.

I was slagged by staff for chafing and told it was due to my diet rather than people understanding that naturally my thighs were bigger than my peers. Meaning I'm left with scarring on my inner tighs from trying to navigate my body by myself.

Having a strong sense of race and heritage goes beyond being sure of ourselves. Studies have shown that when we're comfortable and confident in ourselves, we're better equipped to deal with racial discrimination and enjoy mental wellbeing.

In order to thrive, every child needs love, safety and nurture. The key factor, when living away from our own culture, is that we be supported to explore who we are without fear, judgment or the dogma of other people. What matters too is that someone loves us as we are and doesn't try to create us in their own image.

Carers of any background should be prepared to learn and understand the culture, heritage and beliefs of the child they are looking after. That means social services should ensure that paperwork clearly includes the ethnic background of all children. And anyone working in social services should undergo training to ensure children in care can remain connected to their heritage and identity.

Ensuring that all children and young people can remain connected to their heritage will help us address the systemic racism that still characterises so much of the care system in Britain. It also will avoid the trauma of having no identity. I want to know where I come from - so that I can find out who I really am.

Sam's story

By Samantha Smith

Childhood trauma is complex to understand, and even more complex to present to those that have not experienced it themselves. Children are often raised to believe that abuse is something they must simply accept. If the abuse takes place within the home, some of the only relationships they form in those crucial early years are wrought with neglect, manipulation and fear.

As a child, I had plenty of friends and a wide range of extra-curricular interests. I went to church twice a week with my grandmother and tended to the family farm. I excelled in school and began reading the Harry Potter series at age six. By all appearances, I had an incredibly happy childhood.

However, just beneath the surface, I was suffering greatly. My father was a lifelong alcoholic. I remember him being dragged out of the house by the police during one of his alcohol-induced episodes and speaking to him on the phone while he was in 'hospital'. Within six months of his relapse, he had committed suicide by jumping in front of a train. I was four years old.

I would only find out the true cause of his death over a decade later, after stumbling upon a newspaper article that detailed the inquest and ensuing court case. Until then, I had believed that he died of multiple organ failure due to his alcoholism. This revelation shattered my fragile reality and made me question everything I had accepted as fact.

If I had to pinpoint a single event that defined my childhood, it would be my father's death.

After that, I was no longer allowed to be a child. Even the smallest mistake was a grave offence. Anything less than perfection meant that I was stupid, selfish and made everyone's lives difficult. I didn't realise that the hand in my underwear and the sexual comments were not normal. It didn't feel right, I didn't like it, but I truly believed that I had brought it all on myself.

I was too young to understand that abuse was not normal.

During this time, reading was my escape. It allowed me to immerse myself in a world that was not my own, where there were little girls just like me who overcame the adversity they faced. Roald Dahl's tale, *Matilda* - a survivor of interpersonal trauma who found happiness in a world that was nothing but unkind to her - was one of my favourites.

Her relationship with her teacher, Miss Honey, gave me hope that perhaps some adults wanted the best for me. Like Matilda, I found solace at school. It was a place where I excelled and received praise in return. When I had nothing else, school was always there.

I had several inspiring teachers throughout my childhood, who provided support, praise and affection where I previously had none. They couldn't eliminate the abuse, but they made it bearable. Without social support, trauma-experienced children often form highly pathological attachments to abusive individuals because they simply cannot tell the difference between affection and abuse.

In *Matilda*, rather than remain alone, Matilda discovers reading and spends her time at the library to escape her suffocating home life. At school, she forms healthy bonds with Miss Honey and her classmates to replace the abusive influence of her familial relationships.

In the real world, the social care system employs a multi-disciplinary approach in their attempt to replicate the family unit. Social workers form a partnership with teachers, mental health services, accommodation providers and GPs to meet the needs of a young person.

However, no matter how pure their intentions may be, the state is not a substitute family. My own experience on the 'edge-of-care' made that fact abundantly clear. With such broad intervention from multiple agencies, I was stuck in a constant cycle of seeking support only to be told that an area of concern was 'not their responsibility'. The prospect of jumping through hoops every time I wanted help was so unappealing that I simply stopped asking.

Trauma-experienced children need stability above all else. My experience under social services provided the exact opposite. Rather than fleeing from a toxic environment and finding happily ever after, social care often only creates a different type of toxicity.

Indeed, where proper intervention does not take place, the long-term impacts of childhood trauma can significantly impact emotional development and psychosocial wellbeing. This puts young people at greater risk for substance abuse, mental, physical and behavioural problems, delinquency and criminal behaviour.

I am incredibly lucky that 'the system' was not the only form of support available to me. In secondary school, my own Miss Honey washed my clothes, ate lunch with me in her office, wiped my tears and listened to me when no one else would. Without her (and the other teachers who supported me in my formative years) I dread to think where I would be today.

I suppose I resonated with the plight of young Matilda because she represented everything I wanted for myself. She transformed her pain into something constructive, lifting herself out of darkness to find her happily ever after. By overcoming her attachment to her abusers, she was able to form relationships with people who truly had her best interests at heart and heal the wounds of her past.

Children don't want complex care plans or a dozen trained professionals analysing their every move. They want to be cared about, not just 'cared for'. They want someone to notice when they are upset, tell them they are valued and listen to them when they speak. The social care system is not currently equipped to provide this, and therefore cannot be relied upon to truly support young people who have faced trauma or abuse.

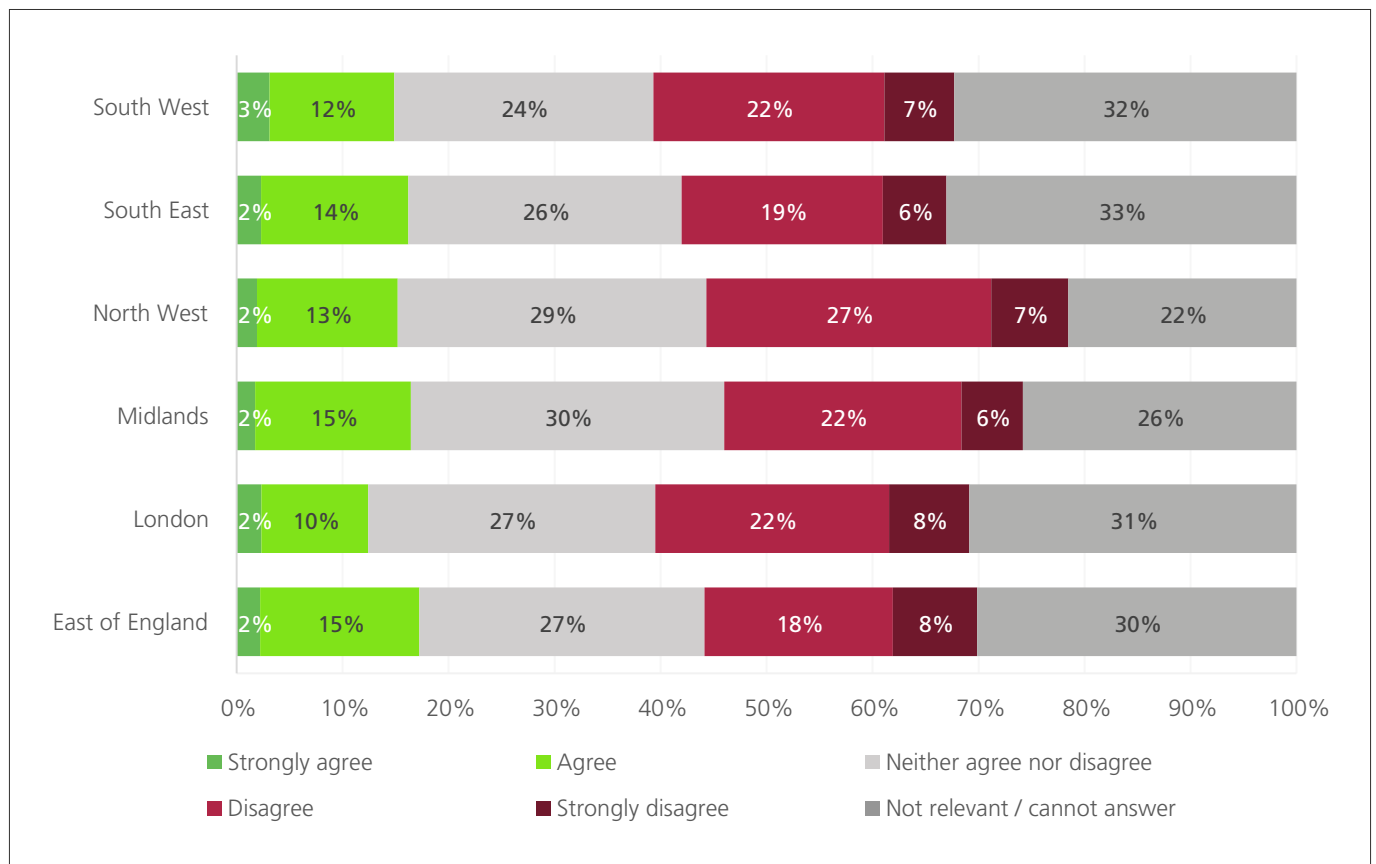
The system should prioritise the promotion of healthy interpersonal relationships between children and responsible figures. If the state is to serve its purpose, it must look further than simply removing young people from abusive situations; it should create an environment that supports the child in its growth and development.

Matilda's story is one of hope, survival and healing. She helped me come to terms with the abuse I had experienced and showed me that it is possible to take back control of the narrative. It demonstrates the complex needs of trauma-experienced children and the need to address these in a way that does not cause further damage.

There are many lessons to be learnt from children's stories, and the message delivered in Matilda's relationship with Miss Honey is simple: abused children should not be left to survive their trauma alone.

Teachers Survey

Is the government making adequate provision for the Looked After Children in your school?



Just over half of teachers selected the central category on the Likert scale (neither agree nor disagree) or the 'not relevant / cannot answer' response option. This suggests that teachers have low awareness about government provision for LAC.

Overall, where teachers did have an opinion, a greater proportion disagreed than agreed that the government is making adequate provision for the Looked After Children in their school.

Whilst there was limited variation in the characteristics of those agreeing with the statement, there was greater differences between those disagreeing.

For example, around a third of teachers in the North West disagreed or strongly disagreed with the statement, compared to around a quarter in the East of England.

Teachers can prevent Covid becoming an ACE

by Angela Dickinson, Social Science Teacher and Team-Lead for Vulnerable Learners at Canterbury Academy

Last term, as schools started to settle back into something like normal routines after the UK's second-wave lockdown, I experienced a few strange and strained minutes in the classroom which have radically changed my view of my job.

It was a one-off lesson, covering for a colleague, when I discovered that Jack (not his real name), a tiny, floppy-fringed, 11-year-old was creating homophobic and crudely drawn pornographic materials instead of a 'leaflet about computing'. I challenged his behaviour, according to policy and he stormed out of the room, skateboard under his arm, swearing and kicking over chairs, leaving me and his classmates gaping in his wake. It was only when I opened his details on the system to report his outburst that I got a clue as to the source of his behaviour: the three letters on his profile -LAC - looked after child. I was given a glimpse into Jack's traumatic life and a realisation of my own professional limitations, dispelling my irritation and replacing it with a need to understand more.

Childhood trauma is documented by health professionals using the indicators of Adverse Childhood Experiences (ACEs). These range from neglect and abuse to household dysfunction such as witnessing domestic violence, substance abuse or a parent sentenced to prison. The effects of these experiences are cumulative, and children with 4 (or more) such experiences have been shown to be *twice as likely* to leave school with no qualifications, with further negative implications for their health and employment outcomes in later life. Children, like Jack, in local authority care, by the very nature of their situation are right here -- at this pivotal point in life. The way they are handled by the adults in their lives - teachers - may be the critical factor for their future. And right now, in the wake of the Covid 19 pandemic, these looked after children and many of their peers outside of the care system are even more vulnerable.

The Covid19 pandemic experience, while not recognized as an ACE in itself, surely will have been an exacerbating factor. Evidence points to increases in abuse and neglect, when schools were closed, tensions high and children had no-one to turn to. The BMJ reported a huge increase in child abuse cases in 2020, describing it as an epidemic. As substance abuse and problem drinking statistics climbed throughout the stresses of lockdown, so did the number of children living with the consequences.

This epidemic of traumatic experiences is bound to have an effect on children and school. The Education Secretary, Gavin Williamson noted in April that pupils were "out of control" on their return to the classroom. Solid research points to a direct link between 'bad' behaviour and trauma. A child with multiple ACEs will experience difficulties with trust, relationships and authority - an unhelpful start for a classroom teacher. This child may also be affected developmentally, with cognitive difficulties, abnormal physical stress responses and chronic pain disorders. Added to this, a traumatized child may have developed a defensive and disengaged behaviour, to shut out stresses; they'll be the one zoned out rather than engaged in a task. Finally, ACEs can lead this child, unable to regulate their emotions, to misbehave, lashing out, or throwing a tantrum. I now recognize these patterns of behaviour in Jack and in many of the children I have cajoled through gritted teeth over the years.

There is a role here for schools to help. Studies show that ACEs need not determine outcomes. Children *can* rise above their trauma, with the right support; and education settings are among the best places to reach and help our vulnerable young people.

This may mean that we need to 'reset' the way many schools function. There is a traditional divide in schools between pastoral care and learning. In many ways this has been created as a defensive line by both teaching staff who opine, rightly, that they do not have enough time to be social workers; and diligent pastoral managers who maintain children's dignity and privacy while directing them to appropriate support services, with no wider-school involvement or follow-up. One support worker described the approach as 'putting trauma in a box'. A euphemistic message may be passed to an exasperated teacher -- 'there's stuff going on at home' -- and then everyone stays in their lane.

As we learn more about the impacts of trauma, and how to counter it, this strategy makes little sense. Instead we need a holistic, whole-school approach. Studies have shown that a Trauma-Informed (TI) workforce, trained to recognize and understands ACEs can help children build resilience, attendance and behaviour. Positive teacher relationships have been found to protect against emotional and behavioural problems among victims of abuse and neglect.

Teachers, generally, are wary of treading into this territory; we're already overstretched, trained to be fearful of abuse accusations and classroom time is precious. Several providers offer whole-school TI training packages (costing a couple

of thousand pounds). The key to this approach is that everyone is on board--- from the leadership team, through the teaching team and even the support staff, such as caretakers and lunch assistances... anyone who will have interactions with young people. Such investment in workforce TI training, followed by breaking down the pastoral/learning divide may well be the intervention that the Covid-cohort needs most.

Finally, through schools, there are opportunities to protect children from trauma, as well as tackling its effects. Using our schools as communities, we could and should support our families more, as a prevention strategy. Parents tell us time and time again in studies and surveys that they need more support. Schools should engage with programmes which support parenting classes and peer-to-peer groups through schools and nurseries, offering the support of a community to isolated families. At the same time this builds positive associations with the education system, healing some of the negative baggage brought about by parents' own experiences of being let down and humiliated in the past.

The extent of the damage wreaked by the pandemic has already shocked us. We must now move quickly to make sure its legacy is not one of a cohort of *more* traumatised children left to flounder and fail when the tools to help them are before us.

From the Front Line

By Will Millard, Head of Engagement, The Centre for Education and Youth

I have worked in education for over a decade, first as a teacher then in research and policy. My research, for The Centre for Education and Youth's recent book, *Young People on the Margins*, included interviews with social care workers, children's care home managers, academics, and people with experience of being in care.

Many of the children coming into contact with the care system have experienced trauma. Three issues recur among the most vulnerable families: poverty, the single biggest reason families need additional support; the "postcode lottery" whereby children in different localities receive varying levels and quality of support; and the failure to prevent issues from escalating into crises.

Children who come into contact with children's social services, whether taken into care or not, generally experience considerably worse outcomes than their peers educationally, and in terms of wellbeing and employment prospects.¹ This not a peripheral issue: rather, 1 in 10 children has been 'in need' (that is, in need of support from social services) at some point in the last six years, meaning most schools will serve pupils who have needed a social worker at some point.²

Some children are more likely than others to come into contact with children's social services.

Poverty is arguably the single most important factor leading to the involvement of children's social services in families' lives. Children living in the most deprived 10% of neighbourhoods in England are over ten times as likely to be looked after or on a child protection plan, compared with children living in the least deprived 10%.³ Local authorities with higher levels of deprivation face higher rates of child social care issues, with government data showing this affects the North East hardest.⁴

Annie⁵, a former children's care home manager, told me that poverty was present in the lives of many of the children she looked after. She told me about Karl,⁶ a charismatic and funny boy who enjoyed a loving relationship with his mother and siblings. Karl however had grown up in a house where the threat of domestic violence was ever-present. He became prone to violence and aggressive behaviour, and by age 15 was sent to a young offender's institution for assaulting his girlfriend. Karl entered Annie's care home upon his release aged 16. Domestic violence - one of the most common reasons for children's interactions with social services⁷ - is, together with parental substance abuse and poor parental mental health, known as the 'toxic trio',⁸ significant risk factors that push children into social services. Poverty is inextricably linked to these factors, making them more likely, and also stemming from them.

I learned about the importance of a child's postcode from Ruth⁹, a children's social care worker in London. She explained that local authorities in poorer areas often face more entrenched and stubborn social challenges including poverty and the 'toxic trio' of factors mentioned above. Yet research has shown it is local authorities in the poorest areas who have made the largest cuts to their social care budgets.¹⁰

Further stress is added by sheer demand. The number of families in need of support, and the rates of children entering care, has been steadily increasing since the 1990s.¹¹ Concerns about discrepancies in how local authorities respond to children's needs led the All-Party Parliamentary Group (APPG) for Children to highlight a 'postcode lottery', showing

1 <https://www.routledge.com/Young-People-on-the-Margins-Priorities-for-Action-in-Education-and-Youth/Menzies-Baars/p/book/9781138360464>

2 <https://explore-education-statistics.service.gov.uk/find-statistics/outcomes-of-children-in-need-including-looked-after-children>

3 https://www.tortoisemedia.com/2019/04/27/punished-for-being-poor-what-the-numbers-tell-us-about-family-separation/?sig=PWFRkx_gA14akpVdLdOYqQU40HX1B-Root8pgV5rWjqY&utm_source=Twitter&utm_medium=Social&utm_campaign=27April2019&utm_content=Family_separation

4 <https://explore-education-statistics.service.gov.uk/find-statistics/children-looked-after-in-england-including-adoptions/2020#dataBlock-da196229-008f-4552-ba4b-a9f-36430b72a-charts>

5 A pseudonym.

6 A pseudonym.

7 <https://explore-education-statistics.service.gov.uk/find-statistics/characteristics-of-children-in-need/2020#dataBlock-0247c828-2398-4d34-8b98-08d884b70554-charts>

8 https://adcs.org.uk/assets/documentation//ADCS_Safeguarding_Pressures_Phase7_FINAL.pdf

9 A pseudonym.

10 <https://www.theguardian.com/society/2018/sep/12/almost-all-cuts-to-social-care-in-england-are-in-the-poorest-areas>

11 <https://explore-education-statistics.service.gov.uk/find-statistics/children-looked-after-in-england-including-adoptions/2020#releaseHeadlines-charts>

children with similar needs receive differing levels of support depending on where they live.¹²

Postcode can also affect placement location. For children such as Karl, physical separation from his family contributed to his regularly going missing and ultimately dropping out of college. Wider evidence indicates that children in care are more likely than their peers to run away, and that visiting family and friends is often a reason for this.¹³

Both Ruth and Annie spoke of the need for early, preventative support to families - and how this was affected by local authorities' budgets. An analysis by the National Audit Office confirmed that local authorities, in seeking to maintain spending on statutory children's services, were scaling back preventative provision.¹⁴

Annie believed that greater availability of early support, such as counselling, parenting skills programmes and home visits for expectant or new parents, might prevent more families from reaching crisis points. This is something that plays out in the evidence, with the What Works Centre for Children's Social Care showing how early support can be effective in reducing more severe familial problems further down the line.¹⁵ The Centre for Social Justice has also emphasised the importance of early intervention.¹⁶

For some children social care provides a lifeline, helping them escape circumstances that have caused trauma and pain. For others, however, interactions with the social care system manifestly fail to meet their needs, adding to the pain that led to these interactions in the first place. Addressing the three "p"s of poverty, postcode, prevention would reduce trauma - and the failures of our children's care system.

12 <https://www.ncb.org.uk/sites/default/files/uploads/files/NCB%20Storing%20Up%20Trouble%20%5BAugust%20Update%5D.pdf>

13 <https://www.childrensociety.org.uk/sites/default/files/2020-10/no-place-at-home.pdf>

14 <https://www.nao.org.uk/wp-content/uploads/2019/01/Pressures-on-Childrens-Social-Care.pdf>

15 <https://whatworks-csc.org.uk/evidence-store/>

16 <https://www.centreforsocialjustice.org.uk/wp-content/uploads/2021/04/CSJJ8864-Children-In-Care-INTS-WEB-210422v.pdf>

Annex

		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not relevant / cannot answer	Unique responses	Respondents (weighted)	Maximum margin of error
All	All	2%	14%	27%	22%	7%	28%	6474	6474	1%
School phase	Primary	2%	12%	26%	23%	7%	29%	1781	3028	2%
	Secondary	2%	14%	28%	21%	6%	29%	4450	3016	1%
Funding	Private	1%	5%	13%	6%	2%	73%	486	788	4%
	State-funded	2%	15%	29%	24%	8%	22%	5979	5674	1%
School phase-funding	Private Primary	2%	4%	14%	9%	2%	68%	87	306	11%
	State Primary	2%	13%	28%	25%	8%	24%	1693	2722	2%
	Private Secondary	1%	4%	12%	3%	2%	78%	359	460	5%
	State Secondary	2%	16%	30%	24%	7%	20%	4084	2550	2%
Ofsted rating	Outstanding	4%	16%	30%	20%	7%	24%	1222	1144	3%
	Good	2%	14%	29%	25%	7%	23%	3228	3090	2%
	RI/inadequate	1%	16%	29%	25%	8%	20%	965	808	3%
Free school meals quartile	Q1 (affluent)	2%	15%	30%	21%	5%	27%	1410	1179	3%
	Q2	2%	15%	30%	26%	7%	21%	1340	1193	3%
	Q3	3%	13%	30%	24%	7%	23%	1214	1124	3%
	Q4 (deprived)	2%	15%	27%	27%	9%	20%	1125	1142	3%
School governance	LA community	3%	14%	29%	27%	6%	21%	1112	1401	3%
	LA non-community	2%	15%	27%	21%	9%	26%	820	876	3%
	Large MAT (N>3)	2%	14%	31%	24%	7%	21%	2067	1777	2%
	Small MAT (N<=3)	2%	14%	26%	27%	8%	22%	541	428	4%
	Stand-alone Academy	2%	15%	33%	21%	6%	24%	1081	818	3%
School region	East of England	2%	15%	27%	18%	8%	30%	846	807	3%
	London	2%	10%	27%	22%	8%	31%	826	976	3%
	Midlands	2%	15%	30%	22%	6%	26%	1172	1066	3%
	North West	2%	13%	29%	27%	7%	22%	707	688	4%
	South East	2%	14%	26%	19%	6%	33%	1139	1133	3%
	South West	3%	12%	24%	22%	7%	32%	615	538	4%
	Yorkshire and North East	2%	15%	28%	25%	6%	24%	819	841	3%

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not relevant / cannot answer	Unique responses	Respondents (weighted)	Maximum margin of error	
Age	Age in 20s	2%	12%	29%	23%	5%	29%	1150	1449	3%
	Age in 30s	2%	14%	27%	23%	8%	27%	2276	2114	2%
	Age in 40s	3%	14%	26%	21%	7%	29%	2057	1846	2%
	Age in 50s+	2%	14%	27%	19%	8%	30%	980	1053	3%
Gender	Female	2%	14%	27%	21%	6%	29%	4782	4753	1%
	Male	2%	14%	27%	23%	9%	25%	1669	1693	2%
Experience	Less than 5 years	2%	13%	28%	21%	7%	29%	1550	1773	2%
	5 - 10 years	2%	13%	30%	22%	5%	28%	1496	1669	3%
	10 - 20 years	3%	14%	24%	23%	8%	29%	2056	1813	2%
	Over 20 years	3%	16%	26%	20%	8%	27%	1329	1163	3%
Seniority	Classroom Teacher	2%	12%	28%	21%	6%	31%	2171	2578	2%
	Middle leader	3%	13%	28%	21%	8%	27%	2451	2470	2%
	SLT excluding head	3%	18%	27%	24%	7%	20%	1247	848	3%
	Headteacher	5%	14%	21%	26%	8%	26%	356	262	5%
Teacher subject/class	English	1%	13%	28%	23%	8%	27%	941	612	3%
	Maths	3%	15%	27%	17%	4%	33%	892	673	3%
	Science	1%	14%	26%	19%	6%	34%	906	671	3%
	Humanities	2%	14%	27%	23%	8%	27%	978	665	3%
	Languages	2%	14%	32%	18%	4%	30%	262	181	6%
	Arts incl D&T	2%	17%	33%	20%	8%	19%	250	180	6%
	Other incl PE	2%	16%	30%	22%	6%	24%	264	188	6%
	EYFS/KS1	2%	10%	26%	23%	9%	30%	411	822	5%
KS2	2%	13%	27%	24%	6%	28%	1078	1947	3%	

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