

# The *TROUBLE* with teenagers

## – a guide to caring for disturbed adolescents

by Melvyn Rose  
1993

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### Forward

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You can read this book in two hours or so, which means that even busy managers as well as tired residential staff have time to do so.

It is worth finding the time because what the book does is to remind us, at a period when such a reminder is needed, that the kinds of experiences which have led to disturbed and unmanageable adolescents behaving as they do, are unlikely to be changed, except for the worse, by the current cry for tougher measures, more security and market forces being introduced into child care.

The great sadness is that the vivid stories which Melvyn Rose relates are of a therapeutic community which no longer exists. The tragic ending of Peper Harow is a subject for another study but the fact that it is no longer there, does not negate the lessons which can be learned from its experience. To suggest that its inability to continue belies its claims as embodied in the stories and the teaching derived from them, would be to take too facile a view and deliberately to ignore a rich vein of necessary knowledge and skill.

What Melvyn Rose is now proposing is that ordinary schools, and not so ordinary children's homes in local authorities and elsewhere, should benefit by some of the experience struggled for and achieved in Peper Harow in its heyday. As in *Healing Hurt Minds* by the same author, down-to-earth information and advice are given as to how to start setting up a therapeutic environment.

One of the caveats is that this cannot be done overnight. But with an understanding of the needs of young people, the book offers a message of hope: "...if local authorities can devote the ongoing time and attention to thinking about the psychological needs of young people in their care as well as the problems of their behaviour, they should be able to develop truly effective therapeutic structures in the difficult but potentially most rewarding residential sector".

It has been an unfortunate feature of the child care world for more than 20 years that the therapeutic communities have been used by local authorities to sort out their most "difficult" children but they have not sat down together to hammer out what they needed to learn from each other. Even in training, the therapeutic

communities have largely carried out their own in-service development. Local authorities have neither participated in it nor tried to get their own staff trained on more psychodynamic lines. This has left therapeutic communities very vulnerable to economic blizzards and the local authorities open to the charge that they were only containing, not caring and healing children and young people who needed both. There have been many lost opportunities in the separatism which has characterised the relationships between the two systems.

However, it would be too easy for critics to ask why Peper Harow does not still exist if it had been so effective. When some of the most expert and highest quality hospitals are faced with closure; when the price of care is often put above its suitability; and when local authority budgets are being squeezed harder and harder, that question does not deserve an answer.

What this book deserves, at the very least, is that a little time is given by people working in this field to refresh their commitment to the needs of gravely hurt and disturbed young people who are currently not catered for.

Research demonstrates clearly that harsher methods do not work. As this book reminds us, the young homeless have often been in care and we also know that too often deprived children end up in prisons and as patients. *Trouble with Teenagers* is a positive publication which will be useful to students, managers and practitioners as they continue to try to meet the needs of adolescents.

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## CHAPTER ONE

### Introduction

A three-year old has been abducted in a crowded shopping centre. His mother had taken her eyes off him for only a moment. A few hours later his mutilated body is

found. Later that week two ten year old boys are charged with abduction and murder. The story that filled the headlines in 1993 sent an icy chill through all parents and horrified the nation.

Despite appeals by the police and the distraught family of the dead toddler, a large crowd gathered outside the juvenile court when the accused children appeared. They howled obscenities and beat on the closed police vans. One can only imagine what might have happened if the crowd had been allowed to vent their anger on the children whose crimes had not yet been proven. The accused children were reported as expressing no feelings during the court appearance, implying a callousness that no longer entitled them to be seen as human.

For weeks before this event the media had been reporting the competition between politicians as to whose party was the least “soft on crime”. There were many suggestions concerning the need for severe punishments, ranging from the birch to hanging. For offending young people, the reintroduction of Approved Schools would provide the answer. Failed ways of handling crime were meant to reassure the public that politicians could control anti-social behaviour. Prime Minister John Major took the lead in demanding, “a little less understanding, and a little more punishment”.

However, self-righteous appeals for law and order are of little value if the underlying motivation is actually for repression and punishment rather than resolution. In such an environment, human decency and commonsense can easily be overwhelmed. It is a dangerous political gimmick.

When we used to hang ten-year old children for stealing we did not stop juvenile crime. Neither has juvenile crime ceased since we became more “civilised”. All crime and especially juvenile delinquency, is a problem which requires not the reduction of understanding, but its advancement by every means possible. Any political party which really wants to reduce crime should attempt to understand what motivates anti-social and intolerable aggressive behaviour. Only by doing so can political decisions be made that will prevent and manage deviancy.

Three major problems obstruct the search for understanding. The first is that tackling the various causes of crime would be enormously expensive. The second problem is that witch hunting is always more popular than rational enquiry. The third is that we like to be considered honest, but our personal attitudes are rarely so. Thus we regard infringing traffic or tax laws as trivial compared with burglary or rape, but if we were to raise our children’s standards of honesty and so change the society of the future, we would also have to look at our own attitudes with greater honesty. We might find that changing aberrant human behaviour would actually begin with the need for maturation within our own relationships.

This book can hardly address tasks as all-embracing as these, but it hopes at least to underline a few relevant issues. It will also make some practical suggestions about the actual treatment of disturbed young people.

No one likes disturbed behaviour, whether it arises from serious mental illness, like schizophrenia, or from delinquent attitudes. In both cases disturbed behaviour

should be seen as a consequence of damage to the complex psycho-social processes involved in normal growing up. A young “villain” who attacks a vulnerable old lady may have suffered an exceptionally traumatic infancy at the hand of his mother. A deceitful adolescent girl wilfully starving herself to death may actually be expressing her deeply buried feelings about having been sexually abused many years earlier. Both these young people are unlikely to be aware of the connection between their behaviour and its source. Of course, concerns we have for what young people have suffered, does not mean that we should view their disturbing behaviour as acceptable.

However, moral judgements alone will not change disturbed functioning. It is important to understand that the self-interest of a disturbed youngster neither motivates nor satisfies them. The class clown or the inveterate thief remain deeply unsatisfied either by their attention-seeking or their ill-gotten gains. The behaviour of such young people is driven by forces beyond their conscious awareness – let alone their self control. When the roots of an individual’s being have been injured and twisted, their later life is bound to reflect it.

Wilf was fifteen when he was admitted to a senior approved school. His compulsive smile flickered nervously as though he was driven to please everyone he met. In the school’s brutal subculture his senior peers took advantage of this subservience by demanding his share of food at mealtimes, or by humiliating him through well-targeted insults. However, baiting Wilf eventually became boring because of his compliant responses. Some staff also felt that Wilf was a “creep”, although his servility earned their approbation. Most approved schools practised sophisticated systems of rewards so that good behaviour, rather than changed personality, could earn much earlier release. However, as a common feature of emotionally disturbed people is their inconsistency, there had to be a stick to match the carrot. Thus how long they stayed seemed a bit like Snakes and Ladders. However, Wilf’s compliance was exceptionally consistent so in no time he was judged ready for an early release.

To the anger and frustration of the Headmaster, Wilf, who had come to personify how successful the system and those who operated it could be, suddenly did something uncharacteristic. A few days before he was due to be released he absconded. Wilf did not run far. A mile or two down the road he hid in a ditch, popping up like a Jack-in-the-box from time to time, until he was spotted and re-captured by patrolling police.

During Wilf’s stay at the approved school, he had received what was called counselling as well as training. In some units this only consisted of the avuncular advice that a housemaster could offer. However, in Wilf’s unit counselling was jointly managed with a visiting psychiatrist and was intentionally psychotherapeutic. Wilf had received such counselling for a year prior to his absconding, but it had been ineffective because it had been impossible to make any genuine emotional contact with him.

It was known that Wilf had lived in a single parent family with his morose father. Neither spoke to each other, nor had they seen much of each other, for Wilf had only returned home infrequently from the series of children’s homes and special

schools in which he had been placed since his early childhood. Once he became a teenager he started to steal and had appeared many times in the Juvenile Court. A series of non-custodial sentences were designed to warn him of worse consequences if he did not stop offending. Yet despite these he inevitably arrived at the approved school. It was also known that Wilf had an older sister who had left home early to marry. She visited Wilf and had intended to offer him a home as an alternative to the depressingly silent and cold relationship with father. However, her conscientious concern for Wilf seemed stern and as though it too arose from a compulsive need to protect and care rather than from genuinely loving feelings.

All the sensitive psychotherapeutic attempts to draw Wilf out in his sessions had failed. They all inevitably lapsed into uncomfortable silence. At that time I was a comparatively inexperienced housemaster, but I was given the task, on behalf of the frustrated institution, of discovering why Wilf had thrown away all his success – at least according to the approved school's value system.

The interview began in the usual way....silently accompanied by the usual nervous smile. Eventually, I felt compelled to try to find the answers myself, by struggling to verbalise the questions that would magically unlock the adamant silence. The responses remained monosyllabic, though punctuated by the grin that became increasingly like a desperate grimace as the interrogation proceeded. Having reached a *cul-de-sac*, I questioned the consequences. "Will your sister still be prepared to offer you a home, when she hears how you throw your good opportunities away?...Will she feel like trusting you if you can't even explain to her what you feel about the things you do?...Come on, Wilf!...What does your sister feel about you?" A very long silence and then...."My sisters don't want me", in a barely audible voice.

"Sisters? He doesn't have sisters...only one. Why did he say that? This suddenly feels very important... like something I've never felt from him before. Yes, that's what it is, he's just said something real to me for the first time. I mustn't get it wrong, but have I really remembered the file correctly...? Well, here goes... 'Wilf, you said, sisters...but you've only got one sister'."

"Once I had two!" He collapsed into tears. He sobbed in apparent agony for some minutes until I couldn't bear it any more. "What happened to your other sister then?" There was nothing in his records of another sister, but as Wilf had not been able to mention her before, it was not surprising that no one had been able to ask him the key question. Through intuitively exploring questions about his sister's reliability, I had stumbled across Wilf's early family history and triggered the breakthrough. Out of the silence of a lifetime the terrible story poured.

Apparently, when Wilf was less than two years old and hardly able to speak, which later turned out to be a significant reason for everyone's failure to understand why he was so emotionally trapped, Wilf had two older sisters. Mother left the children in the house occasionally to meet her lover. Father was out at work. One day as the three pre-school children played on their own, the middle child's dress caught fire and the eldest girl ran into the street to find help. Eventually a coalman came and put the flames out with a sack. Wilf had stood there helpless while his screaming sister had died in front of him.

Afterwards, the family broke up and Wilf began his series of surrogate homes. He joined his older sister in her foster home on one occasion, where he was dressed by her and the similarly aged girl of the family, in girl's clothes. They giggled at his penis and he was terrified. One day, the foster parents caught the children doing this and Wilf was sent back to the children's home accompanied by a new notoriety.

Who initiated these games? Was it the older sister, who was herself only a very young child? Was she symbolically trying to bring her younger sister back to life by dressing her youngest sibling in her foster sister's clothes? Had she felt responsible, in mother's absence, for her sister's death? Did she later feel that Wilf had also gone away, because of her own bad activities? Was the nature of these activities expressed sexually, because of her incomprehending awareness of her mother's illicit sexual activities, that had given rise to the appalling trauma in their respective infancy and early childhood?

Later investigation established that the facts were correct, but for unknown reasons they had never appeared in the children's files and so the need to respond skilfully to their terrible experiences was never recognised. All that was required was the behaviour of good children. Wilf had "forgotten" the past, because he did not have words to express the shock, or even to make sense of what had occurred, but also because he, like anyone, would not want to remember the horror of that incident. But he needed to do so to regain his freedom to grow up.

Discovering the correct treatment for such children requires constant enquiry into the hidden meaning of their behaviour. That meaning will not simply be revealed by tracing the events of the past; these, like the behaviour itself, can only offer clues. It is also necessary to understand what those events meant to the child at the time, for that is where his or her emotional growth became stalled. The child, of course, could not have understood these events as an adult but, as in Wilf's case, there were many unanswered questions about the adults' responses to the children's behaviour. Was Wilf's banishment from the foster home a reflection of the anxieties of the foster parents and social worker about the sexual games? Instead, should the children not have been helped to make sense of their terrible experiences, in order to avoid the confusion and torment which festered within their unconscious?

Although the complex task of understanding the meaning which underlies the disturbed child's behaviour is an essential component of successful treatment, so is the management of his or her behaviour. If a youngster runs away whenever anxiety is aroused, then treatment will hardly be possible. It is equally unacceptable to ignore the effect of violence and stealing on innocent bystanders. In addition, unchecked behaviour adds to the weight of self-hatred, shame and guilt which crushes many young people making a positive future seem impossible to them. An essential part of treatment must be to exercise control, which the youngster cannot bring to bear independently.

The springs of everyone's feelings and behaviour are inevitably complex, but fortunately, we do not need to be constantly conscious of our hidden motivation. Most mothers get it right spontaneously enough of the time. (See Winnicott's "good enough Mother", in *The Child, The Family and the Outside World*.) Their

relationship with their children feels sufficiently secure to be trusted with fears and anxieties and their commonsense sympathy and personal experience provides a “good enough” response. That “good enough” relationship will have been developing from the child’s birth. It becomes increasingly confirmed by widening observation and experience both within and beyond the family. Though everyone faces frustration, disappointment and bitter hurt in their lives, the loving solidarity that surrounds most growing children as they encounter misfortune, is enough to nurture their emotional resilience. So when in adulthood, we lose a loved one, our inner strengths will have been sufficiently developed to enable us to recover. Even though children who encounter serious loss and injury need extra help most do have enough loving people around them to ensure they receive it.

Being a “good enough” parent is not always easy in our complex society. Parents whose upbringing was not itself well-nourished will find it harder to respond consistently to their children’s emotional needs. “You should have seen what I had to put up with when I was your age,” they tend to say. Indeed, in the face of their own deprivation, which must still hurt, parents can find it difficult to accept the sublime self-centredness of their children.

Adults with depleted emotional resources, who were themselves neglected or abused, also have to cope with the same and often serious, emotional stresses that all parents experience within our society. There can be few children today whose parents are not worried about the roof over their head, or whether they will receive the medical or social care they might need should they fall ill, or become infirm.

These kinds of stresses insidiously undermine parental self-confidence. Indeed, the appalling and hitherto unexpected things to which we might fall prey are paraded before us on television in our very homes. Despite this, our children still need us and the adult world to remain buoyant; to prove that life’s emotional and material pitfalls can be overcome. Even when as adolescents they play the archetypal devil’s advocate with us through their shocking behaviour and attitudes, their real hope is that we will confound their rebelliousness and enable them to join us in secure adulthood. At the same time, adolescents also know that the adult world continues to make a hash of its social and personal responsibilities and that many values to which we wish them to adhere are not what adults practice.

When unemployment and long-term material hardship affect an extraordinary proportion of the population, it is not surprising that optimistic expectations are fewer and despair is more pervasive. How then are children and adolescents to be reassured that they will be able to cope with being adult themselves? From puberty onwards, an adolescent’s natural inclination is to strive for his or her notion of adult freedom. The siren song of television life-styles is inevitably exciting, but reality contradicts their chances of achieving their desires and adulthood these days seems almost equally as fearful as attractive.

In a society besieged by complex issues that make the transitional years of adolescence more vulnerable than ever, we are fortunate that so many young people have developed resilience. Those who best find their way through the maze, are those who have received a greater proportion of security and personal esteem in their infancy and childhood. Those who receive these gifts at birth are

able to augment them as they grow through the reinforcement that their emotional investments provide. Those who have received least, will have the most difficult journey to maturity. For some, problems of social class, or ethnicity, or physical handicap, will add to their difficulties. Those who have psycho-social problems that arise from neglect and abuse are more likely to have some kind of social or psychological collapse. For them, with little self-esteem, often self-hating, the necessary determination to achieve what they would most want is almost impossible to sustain. Their path towards social rejection becomes increasingly steep and their chances of restoring hope in their lives and self-confidence are negligible, without very skilled help.

A skilled diagnostician can see the relationship between what has happened to children in the past and the way they experience people in the present. If a girl has been sexually aroused at a very early age, physically hurt and frightened, by people she trusted, it is not surprising if she rejects others who attempt to care for her. In fact, she may well be anticipating a fresh arousal of the chaotic feelings caused by the original abuse. However, other children whose developing understanding of themselves and the world around them has been foreclosed by abuse, do not immediately demonstrate their psychological injuries. They may not seem very bright but not obviously disturbed. They may not be violent, delinquent, or behave in a bizarre fashion. It is therefore difficult to prognosticate who will break down in some way and who will make a success of their lives despite all.

Increasingly, however, those children and adolescents who are cared for by local authorities rather than by their own families, are fostered in as normal a family environment as is possible. Unfortunately, these placements frequently fail if the local authority is unable to provide sufficient support and skill development to the foster parents. Some breakdown would occur anyway, because the youngster's pathology actually prevents them from settling in a family environment. They may be socially disruptive and physically and psychologically threatening to foster parents, their children and neighbours. They may be excluded from school, take drugs, run away. In short, they may be uncontainable, which is why they often end up in the residential setting. If their consequent experience is containing, nurturing and healing, they may at last be able to make up their lost development and leave care as adjusted young adults.

However, containing, nurturing and healing are not the simple panaceas that we would wish. To become more than catchwords, they need to be underpinned by the staff's creative intelligence and psychological strength. A social services director and staff, trying to provide truly therapeutic residential provision, would need great courage, for they would have at times to fly in the face of ill thought-out professional attitudes. Many of these are restrictive rather than encouraging of growth, but a therapeutic community may also highlight practical problems which will need greater financial resources to solve.

For instance, in order to simulate normality, most children's homes are situated in ordinary neighbourhoods. However, neighbours have a right to demand a peaceful environment from their local authority. Yet if very disturbed children are to find ways of expressing their hurt and anger, they may first have to work through a period of inappropriate behaviour. While a therapeutic staff group has elected to

take on the strain of such behaviour, the neighbouring population has not. Therapeutic homes for such children need some privacy where acting out can be contained.

Size is an additional problem. Homes were often designed for small numbers on the principle that this would make them more like a family environment. However, attempts to make such places what they can never be, can divert the professional focus from making the best of the very opportunities which such a home could offer. Small may not be appropriate for such children, whose greater need may be for a large enough group to provide a sense of security. Location or size need not *per se* create an institutionalising process. This rightly feared diminution of individuality depends on how studiously the organisation has set out to stay sensitive to individual need. It is essential that the residents themselves feel that they and their peers are in a continual state of growth and change. Gradually, the community meeting develops into the kind of forum in which this can be both reviewed and demonstrated. But the way the young people receive pocket money, visit hairdressers, buy clothes, are inevitably important symbols of whether institutional convenience is valued more highly than the residents' individuality.

A large group of young people may always make the staff feel like the old woman who lived in a shoe. As some of the residents mature, continuing to live with disruptive newcomers, they will share that feeling. However, it will also compel them to share the "parenting" and to examine their own response. The experience will be particularly important for those whose own parenting model was inadequate but who still want to give their own children what they had missed. There are rewards too. Having one's struggles to choose maturity in the face of temptation recognised by peers and adults is immensely encouraging.

Occasionally, a desperately unhappy youngster can say thank you for the tender understanding offered by someone a little further ahead and this too nurtures real and needed self-esteem.

Demands that every youngster in such a home have their own bedroom also fails to recognise the value of a group situation at night. Many isolated young people need the fellowship of their peers at night-time. Again, it is not the defensible space of their own bedroom that protects individuals from abuse, but the nature of the psychodynamic life of the community. This is developed by providing esteemed opportunities for positive relationships rather than by endless interdict.

Whether young people are suppressed or not depends to a large extent on the way the local authority treats staff it attracts. If an employer allows professionals the room to take initiatives and pays them a salary that reflects their responsibility, staff of the right calibre will be attracted. Such staff should have the ability to argue professional need with anyone in the hierarchy. Inevitably, they will encourage the young people to do likewise by ensuring a structure which nurtures the voice of the individual.

The integration of an educational programme with the therapeutic process enhances both. Unfortunately, most social services community homes see education as the responsibility of another local government department. This

wasted opportunity is made worse because an increasing number of disruptive children are being excluded from schools altogether. Treating an individual holistically is not helped if the staff group is divided into teachers and care staff.

Problems have also emerged over the use of physical restraint in children's homes. However, a raging sixteen year old will not be guaranteed the security he or she needs if a total embargo is placed upon physical restraint. No one would dispute that it is difficult for staff to remain objective about the youngster's needs when they themselves are being physically threatened. Many parents know how determined you have to be to restrain even a two year old who lapses into a primitive rage. If disturbed teenagers have not developed greater resources to control their rages than two year olds, then they need those who ostensibly care for them to use physical contact. Obviously, this depends on the ongoing development of understanding by both staff and residents. When is physical contact more important than words? How can staff and other residents respond spontaneously with the real interests of the tantruming young person in mind? These and other questions need rehearsing endlessly in community meetings and therapy groups as they examine the feelings of those involved in the transactions of everyday life.

Examining the staff's own unconscious input through the careful consideration of their own feelings, is a central part of therapeutic supervision. As well as deepening insight, these methods are the best ways to ensure that tendencies to abuse are defused before they become active. Very disturbed young people often do very dangerous things. The most vulnerable seek to know if they are really cared for by seeking the risks of inner city street life. Will the member of staff seek to restrain him or her next time they storm out to make their position worse? Young people who fear that their despair may overwhelm them, hope that staff will climb onto the roof beside them in the middle of the night and get them to come down. Such young people are not easy to deal with. They arouse intense anxiety in others, so that we wish their behaviour to be controlled as quickly as possible. However, their treatment needs, as much as their entitlement to protection from abuse and negligence, need the motivation of those who live with them to be under continual caring scrutiny; and this at the same time as those same staff are called upon to be creative and inspirational.

Undoubtedly, sufficiently open communication at all levels of awareness requires a daily community meeting. Inevitably, small groups will also be required, at first to absorb the anxiety that the growing community will generate and later to offer a different and more individualised form of psychotherapy than is appropriate for the large group. But as well as the well managed feelings of staff and residents the everyday physical experience needs to reflect and symbolise those relationships. It is debatable whether such a material environment can be designed anew, or whether a potentially sympathetic existing building is most likely to express the community's therapeutic aspirations. However, the development of kitchen and bedroom and bathroom need to occur gradually as the community's widening awareness recognises their importance.

No such environment can be built overnight and certainly not all children and young people need one. But if local authorities can devote the ongoing time and attention to thinking about the psychological needs of the young people in their care as well

as the problems of their behaviour, they should be able to develop truly effective therapeutic structures in the difficult but potentially most rewarding residential sector.

## CHAPTER TWO

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### Going wrong

Wulf's absconding underlined the unconscious nature of his disturbance. The hidden connections between what had happened to him and his later behaviour are complex, but two further examples will demonstrate that behaviour may express several needs simultaneously. It may express a need for control, as well as a longstanding need to be consoled and reassured about past suffering. The youngster has a hunger for the psychological nature essential for normal functioning. Establishing a treatment process sophisticated enough to fulfil these mixed and often contradictory needs will be discussed later. Recognising the absolute need for such a programme first requires greater clarity about the nature and effect of injury caused by deprivation and trauma.

Jack's upbringing suffered from both. Jack's mother was herself extremely deprived of maternal affection. She was brought up in a series of children's homes and found inter-personal intimacy very threatening. Starved of love, she did not grow up with a well-learned ability to love others. Instead she had become calculating and untrusting. She still remained hungry for the mothering she had missed. She was far too self-absorbed to give Jack the maternal attention that all babies need, or to sustain an intimate relationship with his father. Inevitably, the marriage broke up. Eventually, her sense of emptiness and insecurity led to her embracing so-called witchcraft. However, her self-deception could not compensate for the insecurity which made her desperate for power over others.

Mother's remarriage to a man with a violent compulsion to dominate the family was further evidence of her blindness to her own motivation. In the new family, Jack's step-siblings became passive and compliant whereas Jack unconsciously chose the role of a defiant scapegoat. His provocative behaviour must have brought him very close to being murdered on many occasions. Fortunately, Jack's step-father was away from home for much of the time, though not enough to prevent Jack being confined to a bare attic for several of his childhood years. His X-rays showed many healed fractures that could only have derived from severe physical abuse. The family ate together, but Jack was fed in a dog's bowl on the floor in the attic.

By the time Jack began to receive treatment in his teens, his behaviour was extremely bizarre. As other residents in the community struggled to unravel their feelings and fears about their own past abuse, Jack's attention-demanding actions drove them wild!

Perhaps his compulsive attention-seeking revealed something of his outcast position at home when he was small. But he could neither identify the reasons for his disruption nor stop it until physically threatened by his peers. Despite his fear,

Jack would cackle with excited laughter, as though he came to life only when on the knife-edge of disaster. It was as though bullying and humiliation brought him pleasure even as they terrified him. It is a classic example of the perverse damage Jack's relationship with his stepfather had caused. The latter had towered above him, white with rage, while Jack would say the one thing calculated to bring the eventual deluge of punches or kicks that would at last silence him. No sooner had he recovered though, than he would once more provoke the pathological 'monster' into a fresh rage.

Jack was not so mentally ill that he didn't know the difference between his stepfather, who had disappeared some years before, and other teenagers or members of staff. Yet there were occasions when his fractured sense of reality became almost hallucinatory and panic attacks included a state of abnormal and paralysing terror. Jack was not psychotic, but he was unable to control behaviour that actually responded to his distant past.

Jack was destructive of property, as well as of all attempts at therapeutic discussions in his presence. Yet this sadistic behaviour is a perverse feature of children to whom great injury has been done and it is difficult to reverse. Those who have experienced sadistic treatment are the most likely to inflict ill-treatment on others, rather than to respond with the sympathy born of experience. They are also the most likely to do the nastiest things to themselves.

Self-destructiveness also nullified all Gina's desires to fulfil her many qualities. Her father turned to her for comfort though she was only a child. His own hunger in a failed marriage was satiated by the sexual abuse of his daughter. Cuddling children is essential to their well-being, if that is its predominant objective. Otherwise it produces a tangle of guilt, self-loathing and fear. Gina had been acutely aware of her father's emotional needs, but she was confused and injured by the contradictory feelings which his breach of emotional trust aroused. She loved her father and was pubescently excited by him – not an unusual feature of growing up. She was sorry for him and was rivalrous with her mother. However, like any adolescent, she wanted her parents to be strong enough to manage her immature assaults on the emotional and behavioural family boundaries. Had the personalities of the parents been different, they could have responded with sensitivity to Gina's emergent sexuality. She would have learned an essential lesson for every adolescent that sexual urges are eventually capable of becoming manageable. Thus her maturation could have proceeded normally.

Instead, when father left home, Gina fell prey to a tangle of emotional issues that finally overwhelmed her. She felt she was dangerous and had been responsible for the marriage break-down. Believing that she had seduced her father, she felt guilty towards her mother, though she was also angry with her mother for failing to protect her against her own badness. She was haunted by a feeling that she deserved to be punished in ways appropriate to her crime. Thus, at twelve, she became a prostitute roaming the red-light streets, becoming more experienced about human fallibility, albeit blind to her own, than most fourteen year olds. She had considerable academic ability, but the compulsion to be humiliated sexually and to be punished, gripped her remorselessly and prevented any of her energies being directed towards normal teenage activities. The stress between the parents must

have been undermining Gina's emotional maturation since a much earlier time in her life, for dramatic events like these are rarely a response to one or two unfortunate circumstances. Anxiety is corrosive long before it begins to express itself in disturbed behaviour. Normal teenagers often seem to their parents to have changed dramatically, but their adolescent upsurge is not the result of a lifetime's injury. For the youngsters described here, adolescence is the last bundle of straw not the first.

Several other youngsters at Peper Harow had experienced unspeakable abuse and its effect on the way they saw themselves was not surprisingly, devastating. They should have been able to recognise their emerging abilities. Instead, they had life-threatening eating disorders, or such a terror of exploitation that any interference, even normal social exchange, could trigger berserk and life-threatening rages. They had become sadistic bullies, secret thieves, or entrapped in a fantasy existence. Others were hounded by paranoid fantasies that at times seemed so real to them that they caused psychological break-down, or serious danger of suicide, or self-mutilation.

In an attempt at communication many would paint or describe themselves as monsters. Their self-loathing arose from how evil they really perceived themselves as being. It might be thought that so many years after the traumas or deprivation of their childhood, these adolescents would have been able to recognise that what had happened had not been their fault. Logically, they might well be desperately sad at having missed or lost a childhood, but they would surely see that it was the adults in their earlier lives who were to blame, not themselves? However, many of them could not bear to accept that their parents had never loved them, or that, ominously, they had been born to pathological parents. Those who experience themselves as monstrous, or as twisted in some way, reflect that negative self-image in the way that they behave. Unfortunately, by the time we are adolescent, our sense of what we are has become rooted in our unconscious and logic is of very little help.

This is why children who are seriously delinquent are not likely to be deterred by restraint imposed from outside themselves. The approved school and borstal, or whatever its latest euphemistic title may be, may keep such youngsters off the streets for a while. Unless the institution enables the young person to change their self-image, their enforced membership of a delinquent group will only entrench their delinquency. The training, education and care, which several former Home Secretaries have cited as the purpose of such institutions, are irrelevant for such youngsters.

Those who are capable of learning and being trained need no intervention from government. Those whose deepest attitudes and personality need to change must first develop insight. But to do so, considerable emotional nourishment is required, which the youngsters compulsively reject. Neither overcoming this resistance to treatment, nor effecting psychological change, nor even providing an exciting programme of healthy activities and education, will achieve the desired outcome if they are imposed on the youngster. Many approved schools used to provide all of these, yet the staff were always baffled at the failure of their youngsters to sustain the well-socialised habits of the institution when they left. It seemed so ungrateful

and unfair a return for the frequently real care and attention which the staff had given. Unfortunately, their well-intentioned care was indeed imposed care. A programme that acts as a catalyst for psychological rebirth must recognise the internal significance to a disturbed youngster of what happened to them in the past. That recognition will illuminate the gap between where they are emotionally speaking – and where they should be. A therapeutic programme will have to address that disparity. Effective therapy will have to germinate the rehabilitative processes that miraculously seem able to survive in those who have suffered the most appalling abuse.

Most people have the capacity to tolerate the stresses of everyday life, because their unconscious capacity has developed appropriately since their infancy. Consequently, they do not have to track down past hurt festering in their unconscious and affecting their current lives. If they enjoyed the quiet fortune of parental love they need not even be aware of the psychological resilience that underpins them, even though it began to grow from their earliest days.

Mother and baby communicate not by speech – though noises which describe their mutual delight will eventually become the basic words of language – but by touch and smell and by every reinforcing interaction between them. When a baby is overwhelmed by something incomprehensible, the guarantee of mother's comfort gives it a basic sense of personal safety. Mother's response to the baby's explorations at bath time, or when feeding, or excreting, will all convey the message that baby and whatever he or she does, is uniquely precious. A fortunate child's unfolding life is based on this beginning. At each sequential stage, as an exploring toddler learning to comprehend materials and relationships through play, or at school, where that play becomes more focused into defined and disciplined learning, there is renewed stress. However, there is also a renewed sense of achievement as the already garnered sense of entitlement to success, encourages further resolute effort towards further progress.

Adolescence is a pivotal period, for with physical maturation future adulthood announces itself. Young birds leave their nest reluctantly. They turn back repeatedly towards its security before they finally launch themselves. Adolescents' unpredictable swings between adult aspirations and dependent immaturity reflect a similar period of preparation. Reassured of their internal resources by their having come to terms with adolescent psycho-social experiences, they finally make the transition to independence.

This bare summary of sequential development is inevitably too simplistic. The challenges and rewards of one period reappear in others. Outside influences affect our successful management of developmental tasks. But, in any event, these changes in a youngster's functioning can be observed. Beneath the conscious and visible surface, others skills are simultaneously being sharpened to resource our ability to function appropriately. Our perception of reality and our responses are practised by our unconscious ability to speculate by fantasising. This ability is essential if we are to absorb the fuel of good experience for our psychological growth.

Dorothy Bloch, an American child psycho-analyst, in her book, *So the Witch Won't Eat Me*, describes the source of fantasising and the way its scenarios enable issues to be replayed until they are understood. She describes, from her lifetime of professional practice, the kinds of damage that can be done to the ability to fantasise and the socio/psychopathological consequences. Bloch tells us that fantasising develops from the baby's ability to recognise increasingly familiar sounds, smells, sights and to predict the return of hunger, nappy discomfort and mother's resolving reappearance. Soon the baby can actually picture its mother, as a precursor to summoning her by cry. Thus early fantasies seem to have almost magical powers. You think of mother and she appears! Within a year the baby can make those pictures part of him or herself. They become the baby's earliest form of play.

Bloch suggests that all infants grow through a period when they fear their parents. The role of fantasy then, she tells us, is to enable the child to play with the fantasy of their parents' dangerousness for long enough to recover the security of their relationship. It is like a kind of recapitulation at the end of infancy, which, satisfactorily accomplished, enables the toddler to move forward into a wider network of relationships beyond the family *en route* for the whole new environment of school. The toddlers' fantasies which Bloch encountered repeatedly over decades of her therapeutic practice, were all symbolically very similar and normal.

For example, a child might describe the following fantasy: "I was in the garden and everything became dark. Two huge giants stepped over the wall and said that they were going to eat me, but I shouted at them and Teddy said he'd get a real bear to come and eat them...so they said, 'Sorry', and really they only wanted to play." Sometimes the giants become dinosaurs, or werewolves, or some other kind of monstrous apparition which the child feels able to control by exercising his or her own sense of power. Bloch reminds us that when the parents' fundamental love for their child is not in doubt, these anxieties resolve themselves as a matter of course. Fantasy need no longer concern itself with defensiveness. It can develop into imagination and creativity. The story is likely to be very different for disturbed children.

Bloch points out that disturbed children's fear of injury or death at the hands of their parents is closer to reality and is continuous. So the children try harder and harder, with increasingly desperate fantasies, to persuade themselves that their parents really do love them and can be managed. As they become increasingly absorbed in trying to resolve this dilemma, so they become increasingly less able to move on to the next stage of psychic growth.

Perhaps the most all-pervasive and catastrophic effect of abuse is upon the confused and humiliated infant's sense of self-worth. Increasingly, the child also lives with real fear. Such children never know when they are going to be left on their own, crying in the dark. They never know whether or not they will be changed, or fed. And they never know when someone, whose giant form implies real danger and menace, will not inflict the most appalling pain upon them for quite unpredictable reasons. These children's fantasies reach no happy conclusion, for reality is undeniable. The more such children try to deny what is happening, the more impossible it becomes for them to mature psychologically.

Other unhappy children have experienced an adequate beginning to their lives. Disaster may have struck them later, perhaps after the birth of siblings, the loss of a parent's job, divorce, re-marriage, or illness. Such children may not have developed properly by adolescence, but they have had significant experience of affection and some normal parenting, or perhaps grandparenting.

Recovery from a childhood of deprivation or abuse is always difficult, but those who have some glimmering of what they have missed are easier brought back to emotional life than those who have known nothing but neglect and persecution.

## CHAPTER THREE

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### **Ingredients for recovery**

Bloch emphasises that the function of fantasy in infancy is to give the infant an opportunity to work out his or her relationship with parents. If this use of fantasy has been successful, it is not surprising that the medium of fantasy will have become a familiar tool of the unconscious to be used in furtherance of psycho-social development throughout our lives.

Fantasy promotes imagination and play, through which the child can explore new feelings and everyday happenings. When children play together, they learn to share their fantasies and to reinforce their separate discoveries. Associated with toys and language, play, imagination and fantasy between them convert daily experience into understanding. As understanding widens, so the child becomes able to predict what will hurt and what will reward. The child can thus become an initiator who can him or herself create many enriching and pleasurable experiences.

Adolescents in therapeutic communities clearly demonstrate how much of their lives have been inhibited, how lacking in self-confidence they are and how unable to cope they will be when encountering new experience. The therapeutic community, therefore, must develop an environment that generates a fantasising, imaginative and playing base for the disturbed young people's psycho-social lives that most children develop naturally and much earlier.

The staff cannot impose a life-style that generates such creativity. However, if the staff themselves genuinely engage in playful and creative activity with the young people then between them the community will become a world in which respect for fantasy and play, the visible expressions of unconscious functioning, will become shared by everyone.

Not that this will happen smoothly. It will probably take several years to achieve and success depends to a great extent on the nature of leadership. Such an amorphous process needs focus and direction and the leader is naturally expected to provide it.

Many young people are likely to resist the staff. The more they try to plan exciting expeditions, holidays, food, lessons and recreation, the more anxious and

delinquent some young people may become. Their experience warns them that such a relationship can not be trusted. The member of staff who is such fun to be with will leave. Indeed, he or she has a family to go home to, so obviously the resident is not as important to the member of staff as he or she is to the resident. That is painful, for it highlights the difference between ordinary children and their parents and the relationships within a surrogate "family".

These and other problems need to be recognised by the community, for its programme design will need to be planned to compensate and manage them. It has to be remembered that only exceptionally disturbed young people need residential treatment. They are like patients needing life-threatening surgery. Risks have to be taken, but otherwise there is no chance of a successful outcome. The community's first priority, however, is to build an organic and therapeutic life style. Many differing ingredients are required, but whoever leads the venture must have a vision of the atmosphere that the community must develop. This vision of what the community will be like after two or three years, will influence each step towards it. Our young people have desperately needed salvation for most of their lives, but their experience of placing their trust in adults has always ended in disillusion. As they enter adolescence, the gulf between the way they ought to be able to manage relationships and the way they damage and resist them, seems unbridgeable. After so many failed hopes, what kind of person will be able to persuade them to leap across the emotional chasm that lies before them? They would like to believe that they are lovable, but they dare not. Overcoming the psychological paradox in which they are hungry for hope, yet are compelled to destroy everything that leads to fulfilment, is a colossal task. Every newcomer needs to make a leap of faith and this requires inspiration. The leader of the community has to provide it. Others can support and reinforce, but each youngster needs to feel that the leader believes in his or her personal potential. The leader must become as significant within the group mind as loving parents within their baby's. When each member of the community shares a similar understanding and commitment, the group as a whole can begin to take increasing responsibility for community values.

Vision and inspiration are essential initial ingredients for getting a therapeutic community going. However, as soon as possible the leader must enable the residents to accept responsibility for their own behaviour and growth. In such a situation, it is very easy for an enormous sense of dependency on the leader to become fixed. The residents, however, as a group should be clear about their ability and responsibility for maintaining the community's therapeutic values and for behaving accordingly. The therapeutic group context enables responsible qualities to emerge. It is equally remarkable that creativity always seems to co-exist with anti-social functioning within such individuals.

When the residents are able to function as a responsible group the leader's function can be more like the group's conscience, reminding it of its experience and its objectives, encouraging its efforts. The leader's managerial tasks will have become more urgent, such as his or her responsibility for the interface between the treatment process inside the community and the demands on it from the outside world. Even so, leaders must not become too distant from the treatment process. New issues still need their personal encouragement. Others cannot replace the therapeutic hope which leaders symbolise for the group. It is difficult to imagine

that any leader could cope with such a changing set of demands without outside help. Exceptionally skilled consultancy is essential to help the leaders clarify the way their own attitudes and decisions are affected by the disturbance within the community. All staff are affected by the disturbed attitudes and perceptions with which they are expected to engage therapeutically. Leaders however, must also be able to distance themselves as well as remaining close to the therapeutic task if their communities are to retain a sense of reality.

The organic life of communities develops in phases, as do individuals' lives. At the start, leaders will have to persuade young people and staff even to join the venture of building a community. When the immature group becomes overwhelmed in the face of violence, thefts and mindless idleness, leaders have to remind members of their forgotten enthusiasm and encourage them to keep trying. One way by which the group can be taught to take responsibility for what transpires is to teach it in a practical sense how to manage its own affairs.

One way of beginning is for leaders to call a daily morning assembly. Leaders should insist that only one person talks at a time. When order has been secured, the presiding role can be handed over to an elected chairman. A secretary and committee can be added to the meeting's structure. After about six months, the daily meeting could be redesignated as the community's therapeutic meeting, in which no one would hold an official title any more. It might take a year before such a meeting would begin to function spontaneously. The long silences would be difficult to bear, especially because the community's awful behaviour would not wait until the meeting had developed the competence to manage it.

New people will regularly join the group, arousing resentment and rivalry. The staff will often respond with outrage, just like parents towards quarrelling siblings, about the young people's betrayal of the community values. Perhaps a senior resident will ignore a newcomer's delinquency. Possibly they will be gleeful at seeing a new comer walk straight into trouble. This is the very stuff of a therapeutic community! The young people need to examine the hurly burly of everyday life until, by experience and example, it becomes clear what behaviour is acceptable and creative and what damage is done when the residents are at the mercy of someone's destructive behaviour.

At this point a therapeutic group will have been established. It should accept that the management and the changing of behaviour must be a shared responsibility of residents and staff. The group should recognise that anti-social behaviour has to be tolerated, for even when individuals acknowledge the need to change themselves, the old selves will keep returning. Residents will steal from each other even when they know how desperately they need security. Bullying, sexual exploitation and deceit, for example, will provide an opportunity for the meeting to relate current behaviour to past experiences and the terrible feelings which these had aroused.

Someone once said that, "To know all is to forgive all". While knowledge may be an essential prerequisite of change, it does not imply that anything goes! On the contrary, members of the community who have themselves experienced abuse and neglect, are in an undeniable position to call others to order. If the person whose

behaviour is under the microscope is loved, valued and not rejected, they have no delinquent ploys left to fall back on.

For instance, Clemmy, a member of staff, gave a new girl a watch for Christmas. She had special responsibility for Lorraine, who was terrified by the caring intimacy that the gift implied. She smashed the watch. The incident was raised at the next community meeting. "O.K. don't pretend that Clemmy gave you that watch because she doesn't care about you! You've told us how often people promised you things and let you down. We understand what you feel. Tricia was crying a few minutes ago, because what you said reminded her that she used to destroy her presents because she couldn't bear that they would be removed from her and given to others. So you can see that there are plenty of people here who really do understand what you feel. But why did you say that you thought that Clemmy was going to destroy the present that she had given you?"

"Well, I don't know, but she shouted at me when she reckoned I hadn't done my best at my cleaning job".

"Well, had you done your best?"

"No, I suppose not...but that's not the point."

"What's the point then?"

"Well...when she shouted she spoiled the present."

"Do you mean that when she gave you the present she cared about you, but that when she shouted at you she took the caring away?"

"Yeah, of course!" and more tears.

After a few moments Clemmy put her arms around the youngster. "I was angry because I thought you were letting yourself down. You were just being unpleasant to everyone here by not doing your job. I think that you are a nice person not a nasty one. When you behave like a nasty person you let yourself down."

"You can't blame the past you know," interposes Tricia. "People here don't really let you down. Clemmy really meant the present."

"Of course I did," says Clemmy, "but I also meant that you should do the cleaning!"

Many issues were present within such an exchange which staff and young people would continue to debate over coffee and throughout the day. Residents directly involved, would have learned much from the incident, not least emotionally through identification with Lorraine's and Tricia's feelings perhaps Clemmy's too. Incidents like this would be one of several in a day's meeting. Their resolution would gradually build a culture in which extraordinary emotional honesty would become the group's most prized value. Punishment, revenge and rejection would have no accepted place. However, the social demands are great. There are no debts to pay. Instead, residents and staff had to be brave enough to face the truth and to change the way they function. A demand for change is much "Tougher than Punishment".

Inevitably, some young people are so shocked at their inability to impress, or frighten their peers into collusion that they will try to reject the group. Some may succeed, although a sensitised group would make special efforts to help newcomers, but not by colluding. One member of the community was as compulsive and inquisitive as a magpie. He followed a young mother into her nearby house without her seeing him. In seconds, he had stolen her week's money which she had left in her handbag in her baby's pram.

She could not believe that anyone had been in the house and while she struggled to remember what she had done with the money, young Fred had gone into the woods and for mysterious reasons, scattered the five pound notes in the air. A senior adolescent member of the community saw him and while they collected the notes together, persuaded him to explain how he had obtained the money. The next morning he encouraged the youngster to report the incident to the community meeting. The older boy kept saying that although he was prepared to say what had happened, it was more important for Fred to tell everyone himself. Finally, and to his evident astonishment, Fred blurted out the story. As usual, he then expected to be utterly castigated and punished. Instead, everyone congratulated him on having been so bold as to make his first "confession".

Because of this, everyone was prepared to help him to put things right. One of the seniors went round to the neighbour's house with the miscreant and explained that the youngster had a confession to make. In a dream, the youngster told her what he had done, apologised and handed back the money. Whatever the neighbour's real feelings, it was difficult for her not to accept his apology after that. However, young Fred found it peculiarly gratifying to have received so much approbation for having put something right that he had done wrong. He was bright enough to know that something seriously different had happened, but it took him years to work out exactly what it was.

The demands of the peer group, their understanding, the unbelievably wise things they say, public tears over private grief – all this creates an atmosphere that adults would find exceptionally mature. Yet outside the meeting, often those who had contributed the most would behave the worst. No one would be allowed to forget that serious individual inadequacy still existed even when disguised by the strength of the group. However, despite their undeveloped psychological foundations, individuals can still be helped by the group to experience insight, sensitivity, restraint, patience and the deferring of self-gratification. By doing so, the group brings the compensatory strengths of childhood and adolescence to bear upon the individual's earlier loss thus enabling the roots of normal psychic growth to regenerate in a way that would not be possible through one-to-one relationships.

During this time, all aspects of the whole-life experience would be developing too. At Peper Harow, for instance, the Director gathered all the residents together on a Friday night. They met in the first room to be designed and furnished for a particular therapeutic purpose. The Director told stories to the group seated around the first proper fire many of them had experienced. Cream cakes and a drink emphasised the specialness of the occasion. "You always tell us the same story," commented one youngster on the way upstairs to bed.

"Of course he does!" responded another. "It's the only one we need to hear!" It was true, for what needed emphasising again and again, was that even their terrible experiences could be transmuted into something valuable. At last they could find friends who could understand their suffering more than anyone else, while sharing hopes for the future. The problem for the Director was to find enough interesting ways to repeat this endless message.

Regular daily community meetings and weekly Friday night meetings began to establish a sense of structure that the rest of the programme sought to reinforce throughout the year. Every Christmas feast in Peper Harow dining room was transformed into a specially built and breathtaking stage set symbolising something that the young people would remember for years. Everyone was made aware that something of great importance was occurring. Anticipation was an important part of the lengthy planning process by which the youngsters' imagination would be engaged throughout the year. The feast would take days to prepare. Everyone would have been involved in the cooking, the stage-set scenarios, the purchasing of the presents, the invitations to guests, practising the after dinner entertainment and so forth. Each year would have been compared with the previous one. Was it up to standard? Were the participants dulled to its impact or as agog as ever?

There were also camps for the whole community, by the sea and in the mountains, as well as tougher expeditions. There were summer feasts and annual exhibitions of art and a regularly published house magazine. On some occasions like Bonfire Night, neighbours and parents and staff families were invited. Gradually as the sequence of events was established, the residents dared to anticipate the future and to speculate beyond.

Like other educational establishments, the year was also divided into terms, enabling people who still had families the opportunity to go home to reflect on their experiences. Others formed a holiday group and they went to all corners of the country and beyond. Staff had to plan and manage the impact of this experience. Despite the stresses, the objective of each of these events was to be creative. Of course, they would inevitably be punctuated by the sulking youngster who refused to enjoy the occasion. He or she would hold the rest of the group to ransom, perhaps by refusing to get up, or to get in a car, or walk up a mountain. Part of the purpose of holidays was to enable the young people to distance themselves from the community's physical home while still taking its values with them. A meeting would be called even on the side of a Welsh Mountain – until enough group determination resolved the immediate conflict.

Expeditions, whether tailored to the strengths of the newest member, or to those already practised in appreciating this symbolic life, occurred several times a year. Going off to a remote Scottish castle could become an exciting adventure if the staff member had the insight to recognise the value of adolescent play. The enthusiasm to generate such play might lead to games in the ruins by moonlight. Often, now out of legitimate rather than erstwhile delinquent excitement, the experience could arouse significant issues for the individual. For instance, over a cup of cocoa after such a game, the question came, "What did you feel when nobody came to find you? You were in there in the dark for a half an hour!"

"Do you know, I'm amazed I could take it! If you'd asked me, I would have said I wouldn't go near such a place."

"Did it make you think of home, then?" (The apparently simple question emanates from a knowledge of the youngster's background. It also emerges out of the adult's continual evaluation of how to help the youngster to address the painful past and when to do so.)

"Did you ever know that my mum used to lock me up in the bread oven in our range....?"

“Actually, your social worker told me.”

In fact, something that would simply be an adventure for ordinary young people, could trigger the healing process. This youngster for instance, had not only remembered a past incident, he had re-experienced something of its emotional impact. Having done so he was able to capture it in words and partly share what he had originally felt, with someone else. The therapeutic task was to help him to talk and think about the relationship of the incident to the original traumatic scenario and the personalities involved. The member of staff was once more able to connect past experiences to current fears, behaviour, resistance to change and so on. This is three-dimensional psychotherapy and of course it does not succeed in one session. The therapeutic experience was reconsidered after the trip when everyone had returned to their usual role and programme. It was reflected on over time with increasingly rounded understanding.

After several years, when the group functioned sophisticatedly and the house had been effectively furnished, visitors often failed to recognise how disturbed the young people were. Their behaviour was apparently reasonable and the place buzzed with creativity. Visitors could not see how hard it had been to make an undeniable impact on the hardened emotional shell of those young people who resist believing that they deserve anything let alone something so undeniably excellent. They became so knotted up in their appalling childhood that they never knew how to put it aside. They may be haunted, developing ulcers at fourteen from the emotional pain they feel. They might wish to die and yet reject offers of relationships with people and a nurturing environment. The conundrum is complex, with many aspects to each individual's dilemma. For instance, one cringing boy, anticipating the return of his brutal parent, regularly injured himself in the hope that this would be accepted as punishment paid in advance. Not only do such children assume that they deserve punishment, but they continually engender situations that will ensure it, for they cannot bear the waiting. After years of enduring such a situation, the habit of submission to the rain of curses and abuse has become ingrained. Something very much larger than life is needed to counter such self-undervaluation.

The life of a group therefore needs to be full of experiences that provide the pleasure, fun, and excitement that can be shared with peers and adults. It should make manifest their contrasting and barren internal world. Yet this must be a life which offers hope, and practical lessons through the examples of other residents, of how to bring change. It is a life in which the young people and staff accept obligations to each other. They owe each other support, consolation, challenge and example and these principles are deliberately embodied in the activities of the daily, yearly programme. After the group has become established, its awareness of its history and of its current life germinates a vision of its future.

## CHAPTER FOUR

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### **Developing a therapeutic environment**

John experienced more than twenty homes and surrogate families before he came to Peper Harow, when he was only fourteen. His mother had been imprisoned for

killing one of his brothers, but two other siblings had also died in mysterious circumstances. John had received few emotionally nurturing ingredients that build a secure and well-functioning personality. The traumas he had experienced had occurred in such a pathological home context that essential psychological growth was not possible. The proportion of disturbed children who experience abuse of this order throughout their childhood is very small. But those unfortunate few need considerable time in a residential situation whose object is to ensure that all the experiences it generates would be directed towards supporting the young people's therapeutic needs.

Normal children have more than a decade to develop their unconscious functioning and their conscious behaviour. During this long time they become skilled at functioning appropriately. Their evaluation of their experiences – whether of circumstances or of relationships – is likely to be realistic thus enabling them to function appropriately. Disturbed young people live with gnawing anxiety and the anticipation of hurt, irrespective of how they react to the world around.

Seriously disturbed adolescents become accustomed to functioning on impulse, frequently with no awareness of the consequences of their behaviour. Sometimes their impulsive behaviour derives, as in Wilf's case, from the unconscious pressure to express their repressed experiences and feelings. Because the way they do so is rarely circumstantially appropriate, it brings further rejection and reinforcement of their sense of worthlessness, instead of sympathy and insight. Their inability to read the world around them drives them to frustration and outbursts of violence, often towards themselves. Their sense of time is often undeveloped. The past becomes merged into an endless sense of unhappiness and persecution. The future appears terrifying and to be denied as long as possible. In fact, long-term goals require the ability to remain sufficiently calm in the face of anxiety, for concentrated, persistent work to take place. It is obvious that all these qualities are the fruits of a stable infancy and childhood and not of a back-ground with little love and unpredictable terror.

Successful treatment has to change attitudes to self and to the environment. This cannot be achieved by simple decree. Nor can the accrued damage of the most formative decade of life be healed in a moment. Both control and nurture are essential during the long period needed for recovery. Obviously, behaviour generated by terror, by a fear of destruction, by violent example and by rejection, is likely, in its turn, to be dangerous and destructive. Although greater than normal tolerance is required for those who need this kind of therapy – and especially within a protected environment, there still has to be a limit to unacceptable behaviour. For those who feel that they are disintegrating in chaos, reassurance that others are capable of holding their boundaries helps them to develop self-control. As well as preventing disintegrative and destructive behaviour, control should increase their sense of security and ease them towards engaging in the therapeutic process. Emphatically, it should never be punitive.

However, the group of residents and staff must share responsibility both for control and for ensuring each individual's assent to the community's nurture. Neither of these can be imposed, though it is the adults' task to design them so that their symbolic significance can be clear to the residents. When staff at Peper Harow

recognised the symbolic potential of mealtimes, they tried to think of as many ways as possible by which the secure context of feeding enjoyed by well-founded infants could be replicated. They remembered the baby's simultaneous sensory experiences of smell, touch, sight and sound as well as of taste. How could a kitchen and dining room be made to stimulate curiosity, bring sensory pleasure and yet still be appropriate to adults and adolescents? If mealtimes resonated with a sense of primary nurture, this would also awaken considerable anxiety. Deep-seated anxiety can not be calmed simply by appearances. Many young people suspected that their lives were in danger every mealtime. The physical design needed to counter such paranoid feelings. To help the situation feel safe, it had to demonstrate that everything truly was as it appeared to be.

Thus, if the tables appeared to be wood, they really needed to be made of wood, rather than of a plastic imitation. The doors on the specially imported ovens really had to be as indestructible as they seemed, for they would inevitably undergo very severe testing. An unlimited supply of milk was available, but its perfect condition also had to be guaranteed if it was to provide the expected reassurance. The seats and textile-covered walls gave us a chance to consider the importance of touch to an infant seeking comfort. We also needed to recognise that appropriate noise levels could be ensured by careful sound proofing. But the design of the environment needed to be socially appropriate for adolescents and adults as well as addressing the calming and nurturing needs of infancy and childhood.

At Peper Harow everyone had to take their turn at the domestic jobs. There were no cooks, so if the residents did not prepare the meals everyone would go hungry. Polished oak dining tables were laid with ceramic crockery, real glass, table cloths, condiments and flowers. They had to be cleared up afterwards and the washing up done. The mountain of pots and pans had to be cleaned and the kitchen left spotless. The public rooms had to be vacuumed and dusted daily. The logs were brought in and the fire lit each morning. The bathrooms and lavatories had also to be cleaned and polished.

Of course, the young people found the demand for reliability difficult to meet at times and both staff and more senior residents were available to ensure that meals arrived on time. Providing food for others was especially stressful for those who had lacked nurture themselves. It demands a level of psychological maturation, for preparation took time and consistent concentration. Pleasure could not be instantaneous. Gratification had to be deferred while the food cooked. One's products had to be displayed to the whole community's gaze, taste and judgement despite the youngster's sense of personal worthlessness. Indeed, the cooks even had to serve the food they had prepared themselves – just like Mum and her baby. Though all of these emotional processes and feelings were only symbolic, they did represent psychological problems for the young people that had not been overcome and of which they needed to remain aware until they ceased to be impediments to their future success as parents. The design made statements to challenge assumptions that derived from the past. The suspicious fantasy that the food was inherently bad was countered by the open plan arrangements, because the process of preparation, cooking, serving, eating and clearing up was constantly visible. This helped to counter some of the young people's paranoid fear that food would harm them. If young people refused to cook, or lay the tables, there were various

processes, or ways of helping them. Sooner or later, their resistance would provide an opportunity to seek insight into the significance of their behaviour.

Through careful design, the environment itself can become a psychotherapeutic tool though it will be ineffective unless the staff can recognise its symbolic dimension. Dawn was sexually abused over several years by many adults. She was ashamed of her body and occasionally cut her arms. She ate her food according to a set of peculiar rituals and usually wore a ragged coat throughout the day even in the height of summer. At the same time she frequently tried to inveigle staff and residents to tell her that she was attractive. Any well-intentioned agreement was collusive and not beneficial. When given money to buy clothes, Dawn sometimes suspected that she was being seduced and so she returned with bizarre purchases, or got drunk as a response to her anxiety!

Dawn looked the way she felt about herself and it took a long time before she could start to put the past in its place and herself where she should be emotionally speaking. The bathroom was designed to help those like her risk a more positive self-appraisal. Its exceptionally comfortable material standards invited Dawn to pamper herself, even though her unkempt appearance and her self-injuries assumed that her body deserved ill-treatment. Luxuriating in a bath and cuddling in a huge towel offered her body physical care which she could in no way accept from an actual person. The bathroom design aimed to make her feel sufficiently secure to feel comfortable even without clothes. In order to achieve this, gauging the right level of lighting and warmth was very important, enabling her to see her body looking at its best in the full length tinted mirror. On her own she dared to look at herself and discover that reality was not as terrible as the picture in her mind's eye. This, of course, was only one of the many influential experiences within the community that gradually helped her to feel differently about herself both inside and out.

There were very few rules. One of them was that everyone had to come to the daily community meeting. Having done so they might be confronted about their behaviour, but the responsibility for the outcome was a matter for the whole community. Accordingly, everyone had to be present. They would be carried in if necessary and they would be physically prevented from leaving. This was essential for young people with almost no self-control, yet with compulsively driven behaviour. Managing physical containment is not easy, as any parent attempting to hold a tantrumming two year old knows. What hurts the container as much as a bloody nose, is the accompanying hatred, despite one's concerned and loving risk-taking. It was essential that the young people faced up to behaviour, even if this made confrontation unavoidable. However, they would still have to be left in no doubt that despite its implacability, the group cared for them and held them in esteem.

On one occasion it became apparent that a sixteen year old had been taking drugs when at home for the week-end. It took a long time to demonstrate that the community's authority was an essential surrogate for the self-control that Laurie did not yet have within him.

“Look I need to get away from you bastards at times. And it’s my business what I do at home. I’ve got to have some freedom. You’re all just a bunch of hypocrites anyway, sucking up to the staff with all yer goody goody shit in here. Listen to Alf! Last week everyone was saying that if he didn’t stop taking dope when he went home he should leave so who’s he preaching to! I’m not staying here. Get out of my way or I’ll kill you.”

The meeting would be seething with anger. Everyone was supposed to be up and dressed in time for breakfast which ended at half past eight. If they weren’t then they at least had to be in the meeting at nine. Laurie however, had remained in bed and eventually, several senior residents had gone to Laurie’s bedroom to carry him down. Someone had a bleeding nose but Laurie had been somewhat unceremoniously carried in and dumped in an armchair.

Several people stood in the way as Laurie tried to get back upstairs. Laurie lashed out and the scuffle continued until eventually he agreed not to attack anyone and to stay seated until the end of the meeting. Laurie knew that he could not force his way out, so he finally recognised that there was no point in trying to leave. Someone pointed out the similarity between his trying to escape and his avoidance of an emotional situation at home by blocking it off with drugs. Others compelled him to recognise his cruelty to Alf who, despite his own vulnerability, had tried to stand up for what was right on Laurie’s behalf. Eventually, there was no kind of delinquent escape for him. Laurie, feeling that no one was on his self-destructive side, slumped into a silent depression, head in hands. People then pressed him to say something about what it had been like at home at the week-end. Laurie could not avoid hearing even though he could not immediately respond. Jack and Alf described what they knew of his dilemmas, from bedroom conversations in the dark. Raylene and Burt tried to show some kind of emotional solidarity by describing their similar experiences, or what it felt like to be resistant to everyone’s concern. There was no way that Laurie could delude himself that his position was not clearly and caringly understood. “You don’t have to talk about it if it’s still all too much”, he was told, “as long as you don’t try and deal with your problems by doing things that will wreck your chances of ever working them out. So you’ve got to agree, no more drug taking at home, just as much as here.”

“Suppose I do agree, how will you all know that I’m not doing it?”

“Because if you do, you’d find yourself having to tell us. You couldn’t help it!”

“Well what if I just don’t come back then?”

“We’ll come and get you,” says Rajah with a grin, having just experienced that degree of the community’s commitment on his own behalf. The group’s commitment, it was emphasised, above everything else was to help each other honour their commitments to therapeutic change. They know that they could not sustain this on their own. When that inability was significantly modified they would be ready to leave. But until they could, it was everyone’s job to look after each other’s interests and not to collude with their sophisticated repertoire of delinquent ploys.

The meeting ended amid a sense of achievement and wellbeing. Everyone had reinforced each other’s real hope for change and achievement. Laurie was not only convinced that everyone was determined not to let him get away with his drug taking, but they had helped him to believe that he would be able to stick to his

original intentions. He had learned that he was cared about and that he was very glad indeed to be a member of this group. He was hugged and teased into laughter over a cup of tea. Afterwards, his member of staff took him aside to discuss what lay at the root of this particular event.

It is at least as difficult to manage sexuality as it is to exercise control over behaviour like Laurie's. There is also an added complication for sexually abused children who have been further abused in residential homes. Recent guidelines by government are properly trying to ensure that this will no longer occur. However it is particularly essential that such children also receive treatment. Untreated abuse may well lead to perverse adult sexuality. It could also cause youngsters to act out their internal confusion, wrecking their future lives before their adolescence is over. Being shocked about the sexual abuse of children is only the first of a very long series of steps towards enabling them to overcome their injuries. The confusion of Dawn, the girl comforted by the feeling of a bathroom towel around her, was worsened by sexual abuse. Others, with more horrific experiences, are left mesmerised by trauma, feeling ashamed and terrified of sexual feelings and close to breakdown. Many are promiscuous, but simply prohibiting their behaviour is neither effective nor relevant. In a therapeutic community it is essential that the residents come to relate to each other, and to the staff, differently because of their changed perception of themselves. Changing their sexual attitudes can only occur in the same way as all other changes, by the slow working on their unconscious lives through the community's therapeutic processes. As this happens, adults and young people will be challenged and threatened by inappropriate behaviour. The only protection will be through openness in the community meeting.

For example, the community meeting was faced one morning with the information that Mary and Ben were found having intercourse in the middle of the night in the library. The resulting discussion involved other young people's problems as well as the couple in question. The community's first concern was not how prejudicial Mary's and Ben's behaviour was to their best therapeutic interests! Many were sexually aroused by the picture in their minds. This made some people envious and others ashamed. They became anxious, or angry and they wanted to deal with the event in a cut and dried fashion. "They must leave! Immediately!" Denis raised a set of spurious arguments that neither rang true, nor seemed appropriate. After perhaps a ten minute diversion, Robbie suddenly exclaimed to Denis, "Just a minute...didn't you tell me last week that you were in love with Mary yourself?" Imagine the agony. However, after some sensitivity towards this had been displayed, disruptive Denis was helped to see that his diversion would neither help him to receive the concern he needed, nor would it elicit the right response to Ben and Mary. Why hadn't Denis been able to be more straightforward about his own emotional response to the incident? Exploration revealed the connection between his inability to ask for help whenever he felt discarded, or humiliated, and his actual behaviour. "Yeah! I remember when Jodie kept taking the piss out of you at Summer Camp, you went and got drunk. So we all got angry with you for showing us up in public. Instead of being angry with someone who's hurt your feelings, you get other people to be angry with you!"

Lorraine's reaction was to become crudely disruptive, giggling and making faces at Patsy. When she was told either to say what the real problem was or to shut up,

she became extremely abusive as usual. So the whole meeting then became diverted into having to control Lorraine who flipped into one of her berserk rages. It turned out that the previous week, Ben had tried to get her to have sex with him. She had been both frightened – and everyone remembered what sexual abuse she had suffered as a child – but also really pleased to think that Ben loved her. “He was a traitor!”

She had got the situation wrong on several counts. Ben’s promiscuity had very little to do with the girls as individuals. They had each played their exploitative parts in these painful and disruptive liaisons. Each was convinced of their personal innocence. The liaisons derived from attempts to express something about their past that seemed only communicable in the arcane and bizarre language of behaviour, rather than verbally. Either that, or else their pairings were inevitably futile attempts to fulfil desperate longing to be loved. But because of neglect and trauma they had never learned what love was. Their experiences had sapped their psychological development, leaving them without the internal resources needed to form and sustain appropriate relationships. Their superficial social understanding arose from films, books and pop culture. It did not develop through the well-nourished relationships of an emotionally mature family. Sexual excitement, soured by horrible memories, was too poor a soil to germinate the exceptional quality of relationship they needed. These young people needed to live in a group because they did not have the personal resources to function age-appropriately on their own. Either they had no family, or as adolescents, they could no longer accept the psychological ingredients of childhood that families offer their children. Of course, young people who have grown up in a climate of violence should not experience violence in a therapeutic setting. Nor should sexually abused children be sexually exploited in adolescence by others. Nevertheless, for several reasons they are themselves, likely to be exploitive and violent as adolescents. Each time they fall prey to their compulsions, they undermine their hope of change and they strengthen their tendency to adopt the identity of those who have spoiled them. It is therefore essential that control over their anti-therapeutic behaviour is established as soon as possible. This can not be achieved by denying the reality of their compulsiveness. We betray them if we pretend that the needs of these adolescents can be met in a bland social environment and that any inappropriate behaviour can be repressed by sanctions, expulsion, or sermon. The source of their behaviour is deep-seated and its relationship to everyday life is often perverse and not based on reason. Its tangled process needs to be unravelled. At the same time, the emotional nourishment, which they should have received when they were being abused and neglected, needs to be coaxed into them in a form that can be absorbed in adolescence. While the therapeutic process is occurring, as much control as possible over this behaviour needs to be exercised as a joint adult/adolescent group responsibility. Destructive and damaging behaviour will inevitably continue until its source is replaced by a deeply rooted creative alternative.

The community meetings by themselves could not bring behaviour under control. Although they frequently stimulated insight, meetings were the focused symbol of how the community as a whole functioned. Despite the apparent maturity of the meetings, there were often hidden agendas whose concerns were even more significant. Sometimes they manifested themselves by the way sub-groupings of staff, residents and the director interacted. One day the staff would seem to be

over-critical of the young people, which might derive from their own feeling that the director was being too paternal and critical of them. When the residents seemed determined to see the staff as persecutors, one had to ask what in the community's current life was causing such an extreme reaction.

This unconscious interplay between groups occurred throughout the community's life, so it was important that insight into motivation and control was not only exercised within the meeting, but was generalised throughout the community's life. The psychological needs which the meeting revealed also required consistent sensitivity, whether in the classroom, or from individuals, or from the group's social values. When this was the case, what was apparently a situation without ostensible rules, actually had well-rooted dynamic controls.

Because so many issues were triggered by Ben's and Mary's breach of the community's embargo on sexual intercourse between residents, the first meeting hardly had time to address it effectively. That night, Ben got out of bed, thinking that everyone was asleep. He had been fantasising about Mary and had thought of trying to inveigle her out of her own room once more. "Only to talk about what happened this morning and how she is feeling now, of course," he told himself. In the corridor, he became more excited but frightened that if the others knew what he was going to do they would throw him out. He became angry with himself and then depressed because, although he knows he should go back to bed, he also knew that he was going to Mary's room. After a few moments hesitation, he decided to go downstairs first and make a cup of coffee. (This is also an example of exactly why the Buttery should remain open night and day. Although everyone should be in bed, a trip to the Buttery would be regarded sympathetically. It was a pleasant place to be. It was designed to give some reassurance and to attract someone whose anxiety was diffuse and needed focusing and containment, perhaps when no one else was about.)

Meanwhile Lennie was also lying in bed awake. He too had been aroused by the morning's discussion. As someone more senior, he should have challenged Ben when he saw him getting out of bed and he knew that he should still get up and bring him back. It seemed unfair that he should be presented with these dilemmas when he was entitled to his sleep. Perhaps he also feared how his own good intentions might end.

Eventually, and covering his ambivalence with righteous indignation, he crept with beating heart to Mary's room, but Ben was not there after all. Some of his excitement was diffused by this, so he went down to the Buttery for a drink. By the time he got there shame at his fantasies and his dishonest attitudes, were beginning to make him feel depressed. It was typically Lennie's way of punishing himself. Ben, still in his dilemma, was both relieved to see "rescue" approach yet hostile because his secret intention was frustrated. "What the Hell are you doing out of bed?" begins Lennie. "Right", thought Ben instantly delinquent, "if you're going to take that attitude, I'm entitled to break the rules. Who does he think he is? I'm entitled to have a cup of coffee if I can't sleep... What are you doing here, anyway? Don't pretend you were concerned about me. Come on I know what you were up to." The innuendo highlighted the issue for Lennie. If he stayed, he and Ben would collude with each other. They would become hysterical and excited in

their secret rendezvous. Maybe they would both try and wake some of the girls and cock a joint snook at the community. Just enough of Lennie was able to remember enough of the morning meeting's outcome for him to say, "Look you've got to come back to bed. You know if we stay we'll both end in trouble. Don't argue, 'cos if you don't come I'll wake up the member of staff on duty.. and if you start calling me names, I'll raise this in the morning."

Ben agreed. Secretly, he saved face by telling himself that he could always come down again when he knew that Lennie had gone back to sleep. But half the excitement had already been dissipated. He knew he would now go to sleep. Lennie lay awake for a while, wondering if he had been a fool, whether he would be sneered at by others, whose desires he still shared. He could hardly wait for morning to reassure himself that he had done the right thing.

Finally, their behaviour tilted in the right direction because the established values of the community had influenced them. Neither eventually took the right decision because of fear of adult sanctions, but because of their own strengths. The balance tended to tip the right way because the ingredients were there to ensure that it would do so. The community's values were reinforced by different everyday experiences. It is obviously an extremely complex process even if it is accepted that once the organic ingredients are in place, that group situation will have a life – and a potentially healthy life – of its own and will therefore be self-sustaining.

Young people first started to play a positive role in the group when their attention was caught, their hopes raised or their motivation, however faint, engaged. After their initial honeymoon it becomes necessary to contain their bad behaviour, for it will test the community as it has tested everyone else before. Once they have got the message that the community as a whole is too strong for their resistance, they can begin to learn about the therapeutic process expressed in the language of the environment, the peer group and the special staff. Eventually, they can accept and offer friendship – perhaps for the first time ever. They will allow themselves to be led on the therapeutic journey to unravel their past and to build their future.

Somewhere on this journey, despite its many pitfalls they will begin to experience hope and trust in their own and in other people's worth for the first time. These are the building blocks of personality and the community can ensure that the foundations are laid down securely at last.

The young people have to come first. Such a community should buzz with excitement and fun. That is the culture of normal adolescence. Too many of such places become overwhelmed by the sombre issues they encounter and by the distress and hurt of rejection and emotional injury that is its frequent currency.

Leaders must provide the inspiration and remind the group that it is entitled to hope as well as despair, that it had real choice, that it has succeeded before and that it is not alone. There are various ways to motivate the group, which is likely to respond to such efforts with enthusiasm.

Adults who are prepared to engage with them receive a great deal in return. Instead of having to be jealous of them, of their physical youth and of the reality that

their future lies before them, one can be infected by their uncontaminated ideals and be reminded afresh of the real potential of the life force.

### **Development of Daily community meetings - organisation and purpose**

#### **STAGE ONE**

Meeting of residents and staff at regular time. Everyone is expected to attend the community meeting. Leader of the establishment acts as chairperson.

Agenda covers:

Daily duties of residents and staff

Forward planning – including holidays, trips, Christmas, birthdays etc

Revue of previous day – praise for things well done, discussion of general problems

Individual difficulties, behaviour problems that can be discussed in the group

Purpose of meetings:

To make practical arrangements for running the establishment and to use the experience to foster community spirit and discover and treat individual problems. The leader should use incidents of the previous day to discuss individual problems. The first few months of such meetings will involve learning for both residents and staff and will need strong leadership to ensure stability and order are maintained and that discussion is properly focused.

#### **STAGE TWO**

Leader of establishment hands over running of meetings to an elected committee of residents including a chairperson and secretary.

Agenda covers:

Same as before, plus more items suggested by residents.

Purpose of meetings:

Similar to previous meetings but now more emphasis is on giving residents more power to manage themselves within the values of the community. Everyone should be encouraged to look after each other. Leader provides encouragement and support.

#### **STAGE THREE**

The conventional structure of the meeting can be discarded as the community becomes emotionally strong enough to function as an open group – one in which there is apparently no formal leadership, although there is still a power structure. This derives from the psychic significance of each person's relationship to other individuals and to the group as a whole.

Purpose of meeting:

To allow free expression and thus the exposure of the underlying psycho-sociological issues of the community's everyday life. Inevitably these will reflect the psycho-pathology of the individual residents as well as the staff's unconscious input. Through social interaction and the focus of the daily life of the community, pathological misperceptions are confronted by reality. The individual is also compelled by the socialising process of the group to internalise their changed view of their feelings and behaviour. Both the individual and group begin to grow up.

No formal agenda

## **Beyond the treatment setting**

Throughout this book the importance of control and nurture has been emphasised. Moral judgements have been put to one side, so that disturbed behaviour could be examined objectively, as though it were a form of communication. It may not be an effective form of communication. Indeed, it may worsen the disturbed adolescent's situation. However, the protected environment of the therapeutic community limits the consequences of the young people's behaviour while they learn more appropriate ways to communicate. A positively oriented peer group is essential in this process. Once it has helped an individual to feel that he or she also belongs to the group, its influences, both for control and nurture, become manifold.

As soon as young people feel at home in the community, they can be affected by the many pleasurable experiences it provides. The immediate activities and concerns of community life attract their attention. Lighting fires in the woods, building tree houses and falling off swings into the river, all help to divert attention from a long-standing sense of impending disaster, or from shame, or rage over trivia. Once the young person begins to be content with the security of his or her current life, the question of their future arises.

The peer group's response at Peter Harow was exemplified everywhere. There were several studios and classrooms, but lessons were also taught between meals in the dining room and in other public places. The significance of education was pervasive and undeniable. Visitors could hardly believe their eyes when they saw the young people's bedspaces lined with books on Greek literature, art history and the English classics. A Secretary of State for Education was amazed to discover the A Level examination programme. Music was taught and practised everywhere. Young people would tell others, "A few months ago, I had no idea that I would be able to paint this, or play the guitar, or throw a clay pot on the wheel. Why don't you have a go?" A psycho-social sequence was thus established that intrigued and encouraged the same kind of exploration as a toddler approaching learning for the first time. Ten years earlier, our young people had existed in an environment that discouraged anything other than self-protection and foreclosure on enquiry and exploration.

A lifetime's defensiveness and failure had made those young people implacably resistant to normal education. Yet when they left the community, they would need the benefit of qualifications more than most young adults with better personal resources. Despite many myths to the contrary, young people were not selected for Peter Harow on the basis of exceptional intelligence or ability. Their IQ covered the normal spectrum, except for the sub-normal end. What was different was the way by which they got to examination standard.

If children are not psychologically and socially ready to begin school, it does not matter whether they are five or fifteen. They have to be willing to learn, preferably keen to do so and they need to have developed a repertoire of skills that would enable them to sustain the learning process. They need the strength to tolerate

frustration, without being thrown into despair, or without starting to disrupt and attack others. They need to enjoy having to tease understanding out of complex issues. They need to be able to envisage themselves in the future, playing a guitar piece, or exhibiting a sculpture to admiring peers. A long list of such strengths could be imposed, but essentially, they would all be representations of a basically optimistic attitude to self and to one's environment.

Earlier examples of Wilf's and Laurie's interactions with the community meeting, have indicated how their psychological inadequacies were worked on therapeutically. Every aspect of the community's daily functions needed to be integrated and illuminated by psycho-social understanding. Changing attitudes to self is phenomenally difficult so nothing less than a total approach – made especially possible within a residential context – will suffice. Within that changed attitude to self, can also be found a changed attitude to one's education and consequently to one's whole future.

Managerially, one of the hardest tasks was to integrate staff input. Staff needed to be capable of profound insight and emotional courage. Even if the organisation gave them the necessary resources, they needed exceptional strength to face the challenges with insight and creativity. The object of all staff at Peper Harow was to combine education, psychotherapy and social pedagogy. As each of these is a discrete profession, it is difficult to imagine how this could have been achieved. Preparation and recording required for adequate professional standards, placed a heavy burden on staff, even though they were paid at a compensatory rate. All teachers know that to produce an effective lesson they need a knowledge base many times larger than the elements presented. And every lesson for our young people had to be a winner, for they were so easily disillusioned and so dependent for stimulus from outside themselves, because of their shallow internal resources. Providing the number of subjects available in a normal school curriculum, was also a problem with such a small staff. There were fifty young people and nineteen professional staff, who had to cover every day and night of the year, as well as each other's absences for holidays, sickness and training.

Gathering a staff group of the required versatility and stamina, maintaining its effectiveness and ensuring that its spirit does not decline over time, begs more questions than can be addressed here. Unfortunately, they have not been addressed by the plethora of recent reports on residential work either. Personality profiles and whatever other recommendations have been made for staff selection, seem largely intent on ensuring that inappropriate staff are not appointed. There is nothing to indicate qualities that staff need – or the kind of management that would enable them to enjoy professional success.

None of the principles underlying the educational process at Peper Harow would be alien to any good school. Most teachers have a developmental concept of education, even if they have no training in the psychodynamics of groups. They have a sense of the different internal and environmental resources children need if they are to be enthusiastic to learn. The politics of state education seem to be more absorbed with resources, rather than concerned to get the principles right. However, overcoming disturbed young people's resistance to education reveals problems affecting the education of all adolescents. The psychological stresses in

our society require emotional development as much as intellectual skills. Failing to acknowledge the importance of this issue makes current attempts to raise standards of attainment too simplistic.

There is no doubt that the pace of technological change requires an increasingly sophisticated work-force to ensure national economic well-being. However, the extent to which emotional maturity might contribute to that success, seems to have been overlooked. It is now recognised in industry that paying attention to the well-being of the workforce raises an organisation's success. This concern for more caring relationships and decent social conditions is seen as good management rather than as socialism. But institutionalised thinking about the education of children has not overcome outworn dogma. Adolescents who are emotionally, as well as intellectually educated are more likely to become a healthy and socially integrative force. There is an emotional component in economic success just as much as the technological and intellectual requirements.

There is also great fear about the breakdown of our society, concern about the rise in crime, the anonymity of neighbours, our unwillingness to care for elderly people, or for the disadvantaged and the crumbling of traditional family patterns. The pace of change fills society with fear raising concern for the loss of values and the way we relate to each other and come to live fulfilled lives. Despite our greater understanding of affairs and our higher standards of living, many people still find it difficult to sustain inter-personal relationships.

Simply holding classroom debates about ethical questions, or holding daily prayer meetings are only ineffective placebos. Instead, by drawing on the experience of therapeutic communities, schools could respond to the need for emotional education. Indeed, once the emotional paralysis of young people at Peper Harow had been overcome and their motivation had been fired, they achieved public examination success in a quarter of the time that seems necessary usually. The rise in divorce rates and the increasing difficulty of parenting children, are powerful reasons for reappraising the basic task of education.

We have seen that the birth of a therapeutic community depends on triggering its hope and imagination. This always requires inspiring leadership. However, most adolescents are also idealists well able to respond to values that reflect genuine concern for each other's well-being. There is no reason why the morning class meeting in many schools should not become the equivalent of the community meeting. It would be hard for bullying, for instance, to persist in the face of peer group pressure towards honesty and the resolution, rather than the acting out, of troubled emotions.

The creativity which such an experience over several years would generate in a group of adolescents, would amaze adults. However, change would probably be harder for the adults than for the young people. Undoubtedly, there would have to be a considerable change in teacher training. An essential feature of a student teacher's education degree, would need to be regular meetings of their psychodynamic small group. Its object would be to develop insight and self-awareness, but the experiential process would also offer the most effective way of understanding the psycho-dynamic functioning of a classroom group.

Schools would also have to provide ongoing psychodynamic supervision in order to ensure both support for the teacher and the good management of the process. When a class is learning French, or quadratic equations, the teacher's greater knowledge and experience is self-evident. The psychodynamic content of a group, however, needs steering. Teachers would have to learn to allow the underlying issues to emerge. They would have to be aware of their own anxieties and manage their personal input, so that the concerns of the group and the young people remained in focus.

Though the teacher's task would have widened from subject teaching, it would not be unrecognisable. Experienced teachers already have at least an intuitive understanding of the group forces within their classes and how to manage them. Training for psychodynamic groupwork would help teachers to understand and enhance the group dynamic processes, also deepening their own sense of fulfilment across the whole task.

The effect of these changes on attainment could be measured empirically. It would be surprising if this did not show that learning had improved dramatically. However, it cannot be denied that many parents would be worried by such an approach. "What will our son or daughter be saying about our family secrets?" Most adults are not familiar with the benefits of such exploration. We often feel that society controls our lives rather than ourselves. Yet most parents would do their best for their children's future if they knew what they should do. Despite the apparent threat to adults, if society invested more in the way its children grow up and become parents themselves, present and future family relationships would benefit as well.

Many Social Service Departments have virtually given up on residential work for children. It seemed to produce endless problems and little success. However, social planners often have little understanding of what the experience of staff and children in residential homes is actually like. It is hardly surprising that their attempts to provide and manage resources are so frequently ineffective. Recent reports on abuse in children's homes have tried to demonstrate how the abuse could have been avoided. However, their directions have shown little awareness of psychodynamic processes in residential establishments, let alone their proper management for therapeutic purposes. As a consequence they are prescriptive rather than creative, which must undermine their good intentions. Social work as a profession is not trained to understand organisational psychodynamics, nor are social workers trained to understand exactly how psychological damage occurs and its specific effect on growing children. It is difficult to see how this could be redressed when social work training is limited to two years.

Residential treatment should remain part of the spectrum of resources needed for disturbed children. However, the therapeutic community's insight into the meaning of behaviour and the way to nurture psychological growth must be of use to workers with all deprived and traumatised children. All children in care should surely expect a similarly sensitive awareness of their emotional needs. In fact, many children in care receive a very mean level of caring. Indeed, some authorities have recently given specific orders that no care worker must even touch a child physically, let alone hug them. The transition to adulthood for such children, will leave a

childhood full of fearful shadows that still haunt them, superimposed with an experience of institutionalising and uninspiring relationships. They have been failed. A roof has sheltered them and they have been fed and clothed and occasionally they may have been lucky enough to meet warm-hearted staff moved by their plight. The vocational commitment of such staff, even in the face of the bureaucratic bleaching of their enthusiasm, may have been enough to save a young person's sanity. Relationships with such social workers and foster parents often do last well into adulthood, for the memory of those rare good experiences is especially precious, even though they depend on chance.

The proportion of street dwellers who spent their childhood in care, estimated at from a third to a half, is an indictment of that care. Certainly, all children in long-term care have been injured far beyond the scratches and bruises of ordinary life. They need emotional nurturing as seriously as they need food and clothes. Restoring such numbered children to life requires patience, tolerance, imaginative creativity and time, from people who are prepared to examine their own feelings as honestly as they should require from the young people. Formalising this into psychotherapeutic intervention should not inhibit or undervalue loving spontaneity either. Insight and understanding should not be derisively dismissed as alternatives to good discipline. The profound truth of psychoanalytic therapy is that needful renaissance can indeed arise from within us, but only from within us and often then only if it is inspired, encouraged and helped into life. Seeking to impose even the finest values on others inevitably destroys them.

## CHAPTER SIX

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### **Plan of action for care agencies**

*By Derek Heptinstall, based on an interview with Melvyn Rose*

There is strong evidence that many young people in the care of local authorities are not receiving the care and support they need to equip them for adult life in the adult world into which they are often plunged unready and unprepared.

Occasionally, the story of one of these young people hits the headlines and we learn of a sorry tale of failed foster placements, children's homes which were unable to hold the child, and the inevitable journey through the criminal justice system. Phillip Knight, who hanged himself in Cardiff prison, when he was 16, and whose life was the subject of a television drama, was such a case.

Fortunately, the experiences of many other young people who come through the care system are not so dramatic but are none-the-less sorry indictments of failures that are far too numerous to explain with any degree of rationality.

For example, various researchers have discovered that between a third and a half of homeless people have come from the ranks of people formerly in the care of a local authority.

One argument used to defend these apparent failings is that it is local authorities who have to pick up the pieces of the lives of children already deprived and distorted by years of neglect and abuse. In other words, they are having to cope with the “most difficult” children in our society. This is true but what precise services should a local authority be able to offer young people in this position to help them overcome the emotional wounds they have suffered sometimes over many years?

There are, of course, many dedicated people working in local authorities and other agencies who work with many of these young people with great dedication and the utmost goodwill. This is commendable but it is often not enough.

In the other parts of this book, Melvyn Rose explains how many young people who passed through Peper Harow were helped through the therapeutic community’s blend of psychotherapy and the involvement of the residents in all aspects of the programme. But how could the methods like those used at Peper Harow be adapted to local authority settings?

At least one local authority is already thinking along these lines and there may be others as awareness of the real needs of many young people in care become apparent.

The first step towards a new approach is that the principal child care professionals working in a local authority reach a consensus on the meaning of disturbed functioning, says Melvyn Rose. “We all know what disturbed behaviour is but disturbed psychological development leads to behaviour in which the young person has very little choice.”

In this context, children are not good and bad, angels or devils, but people whose normal psychological development has been disturbed or interrupted. They are, in short, like the rest of us – products of the love and care that their parents and others have given them during previous years. However, in their cases, their most formative years have often not been marked by love, care and stability but by neglect, physical, emotional and sexual abuse and instability.

Recognising the need to discover the roots of this disturbance and accepting the approach needed to treat it, is the major conceptual leap that many local authority social services departments need to take.

The first practical step that an authority wishing to adopt this approach could take is to set up a working group, including heads of homes, committed to the ideas of psycho-therapeutic communities. Backing them would be specialists in psychotherapeutic work with young people in residential settings.

One of the early tasks for this group would be to organise a psychological profile of every child and young person in the care of the local authority. Residential staff could be trained to carry out these profiles through the use of standard forms. “Once an authority has done this it will have a much better idea of the numbers and the kind of disturbances they have to deal with. Probably about 10 per cent are in

need of psychological treatment in a residential setting and normally all of them would already be living in residential establishments,” says Melvyn Rose.

One of the reasons why residential children’s homes now carry such a high proportion of highly disturbed children is, of course, the trend in recent years of placing children into foster homes. This has been accompanied by a reduction in residential places and at least one authority adopted a policy of closing all its children’s homes.

However, as Melvyn Rose points out, the most disturbed children are unlikely to get the help they need from foster parents however dedicated.

“What authorities have got to do is to ask themselves how they can create a process in which their residential homes can contain the children, nurture them and finally, heal them,” explains Melvyn Rose.

Every residential home will need high calibre supervision and access to people with psychotherapeutic experience for advice with individual cases. Residential staff will need training and the policy fully explained and supported from the top before implementation.

A key issue for training should be the exploration of the feelings of residential staff towards the young people they will be trying to help. For example, they are likely to encounter highly sexualised adolescents who will deliberately test their responses to seduction. Faced with this situation, the untrained residential worker will feel threatened and unsure how to respond. Most will probably brusquely reject the overtures or react in other unsuitable ways that might aggravate the young person’s problems. Others, unaware of their own feelings, will succumb to temptation. It is often because such issues are not faced openly that abuse takes place in children’s homes – places where young people are supposed to be safe and “in care”.

More needs to be done to ensure that residential homes are more “homely” and less institutionalised although it is inevitable that some homes will need to be secure – that is places from which young people cannot easily abscond. Young people needing care and treatment cannot receive it if they are constantly running away to commit offences or take drugs. But locks on doors and bars on windows should not be seen as the major means of keeping young people in therapeutic communities. As Melvyn Rose explains in other parts of this book, in a home where all the young people are given the responsibility for caring for and helping each other, it is the peer group that encourages the potential absconder to remain by demonstrating its concern for the individual, its understanding and its willingness to come to his or her aid when needed.

Establishing these kinds of communities in a local authority would probably take from five to ten years, according to Melvyn Rose. It would require commitment, strong leadership, training and, not least, the resources.

Crucial to the effectiveness of the system will be the establishment of accurate and relevant files on the children being helped. The files should describe in detail what is wrong with the child, the kind of psychological treatment they need, and a record

of what help has been given and the outcome. This is not a treatment plan but a means of finding ways to make progress in an area where “success” might only be measured by small steps.

At the moment much of child care is focused on keeping a roof over their heads, healthy and safe from physical or sexual abuse. But little or no attention is being paid to the health of minds distorted by the experiences that led them to be parted from their parents or relatives.

As Melvyn Rose puts it, “although nobody may be abusing a child now, the child may still feel as if he or she is being abused”.

It is these kinds of problems that child care agencies must now face if the children leaving care are to become well-balanced members of society in the future and not the social misfits that the public pass by in the streets of our major cities.

Yes, it will cost more money initially. But weighed against the additional expenditure should be the savings to society of keeping fewer people in our prisons and other state institutions where many of these young people will otherwise find themselves.

## Useful Reading

*The following books represent only a small proportion of the relevant publications.*

### Enthusiastic Practice

- Bettleheim, B. *Love is not enough*. Collier-Macmillan. 1965.  
Bettleheim, B. *A home for the heart*. Thames and Hudson. 1974.  
Burn, M. *Mr Lyward's answer*. Hamist Hamilton. 1964.  
Lenhoff, F. *Exceptional children*. Allen and Unwin. 1961.  
Makarenko, A. S. *The road to life*. Progress Publishers (Moscow). 1951.  
Neill, A. S. *Summerhill*. Penguin. 1968.  
Rose, M. *Healing Hurt Minds – The Peper Harow Experience*. Routledge/Tavistock. 1990.  
Seed, P. *Developing Holistic Education*. Falmer Press. 1992.  
Treischman, A. Whittacker, J. K. and Brendtro, L. K. *The other 23 hours*. Aldine Publishing (New York). 1969.

### Making sense of emotional disturbance

- Bloch, D. *So the witch won't eat me: Fantasy and the child's fear of infanticide*. Burnett Books in association with Andre Deutsch. 1979.  
Bowlby, J. *Child care and the growth of love*. Penguin. 1953.  
Bowlby, J. *Attachment and Loss* (3 vols). Penguin. 1971.  
Maier, H. W. *Three theories of child development*. Harper and Row (New York). 1965.  
Redl, F. and Wineman, D. *Children who hate*. Free Press (New York). 1951.  
Redl, F. and Wineman, D. *Controls from within: Techniques for the treatment of the aggressive child*. Free Press (New York). 1965.  
Tod, R. J. N. Ed. *Papers on residential work* (3 vols). Longmans, Green and Co. 1968.  
Winnicott, D. W. *The child, the family and the outside world*. Penguin. 1967

### **The significance of the social context**

Erikson, E. H. *Childhood and society*. Penguin. 1965.

Goffman, E. *Asylums*. Penguin. 1968.

Jones, M. *Social psychiatry in practice*. Penguin. 1968.

Millham, S., Bullock, R. and Hosie, K. *Locking up children*. Saxon House. 1978.

### **The author**

Trained as a teacher, Melvyn Rose worked for a short time in secondary schools before joining the staff of what was then known as an Approved School. His experience there caused him to consider how difficult young people, often firmly enmeshed in the criminal justice system, could be helped more effectively. When he moved to another Approved School to take charge of one of its four units, he put into practice a psycho-therapeutic approach with the support of the visiting consultant psychiatrist.

Later, following a period at Newcastle University, he was appointed to convert the school into a therapeutic community. The transition and the development of Peper Harow are described in *Healing Hurt Minds*, (Routledge 1990). In this book, Melvyn Rose claims that the most important professional influence on him was his own lengthy psychoanalysis.

Peper Harow became internationally known, particularly after Melvyn Rose left the community itself to establish the Peper Harow Foundation which promoted the community and its methods.