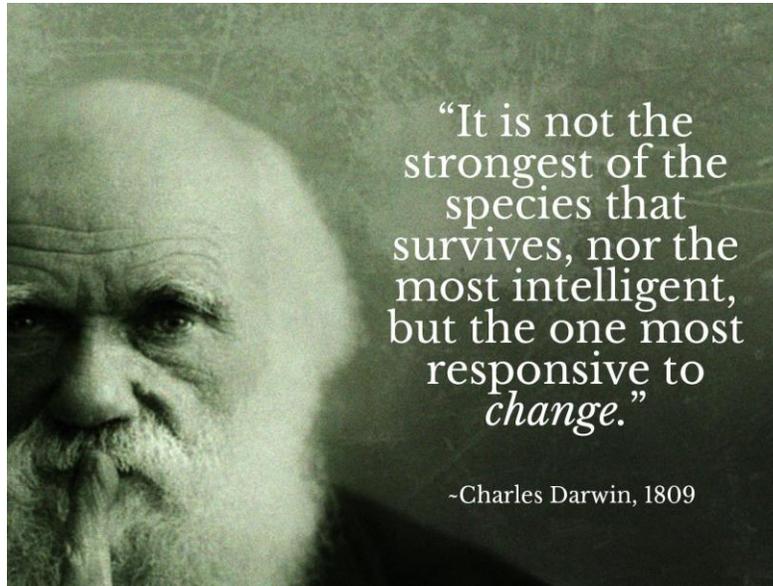




Professional and Personal Development



This will be the first of a series of blogs on Development. It is especially relevant to those who work with traumatized children and young people, but also more widely. My 30 or so years of work in services for traumatized children and young people has always had a focus on development. I think of this as broadly meaning growth, expansion and advancement. Development means learning from experience. This can be exciting and also scary. It means change, leaving the familiar territory and going into the unknown. All of which we might understandably resist, but which are essential for evolution and survival. As Charles Darwin said it is not the strongest that survive but those most responsive to change. It could be argued that in our fast changing world the ability to respond to change and adapt is increasingly important.

This blog is on our own development as a worker. What often gets referred to as professional development, but I think it is far more than that. I include workers at all levels who are involved with traumatized children. Carers, therapists, supervisors, managers and directors, among others. The next blogs in this series will focus on the development of: the child/young person; our colleagues and teams; the organization as a whole; and those we are connected with, such as a child's family, other professionals and local community. I am starting with the worker, simply because for me, my choice to work with traumatized children was my beginning.



My first job was in 1985 as a residential care worker in a UK therapeutic community for 'emotionally disturbed' boys. The working conditions were extreme. They would not be allowed today, because of employment regulations. We lived and worked on a large rural site. 40 boys in groups of 10 in 4 separate houses, based on a farm. The staff and their families had their own accommodation. The setting was a little like a small village. The tranquility of the setting was in stark contrast to the primitive emotions and behaviour that were often part of daily life. To some extent the environment was an essential antidote.

The official hours of work were 7.30 am to 11 pm 5 days a week. One and half days off each week. I had a Saturday afternoon after 1.30 pm off, and Wednesdays. On work days getting off at 11 pm could easily turn into 1 am or later. At times we didn't get our time off, due to covering sickness or a crisis. Regular hours were 70 per week, at times up to 100. Going to work there was one of the best

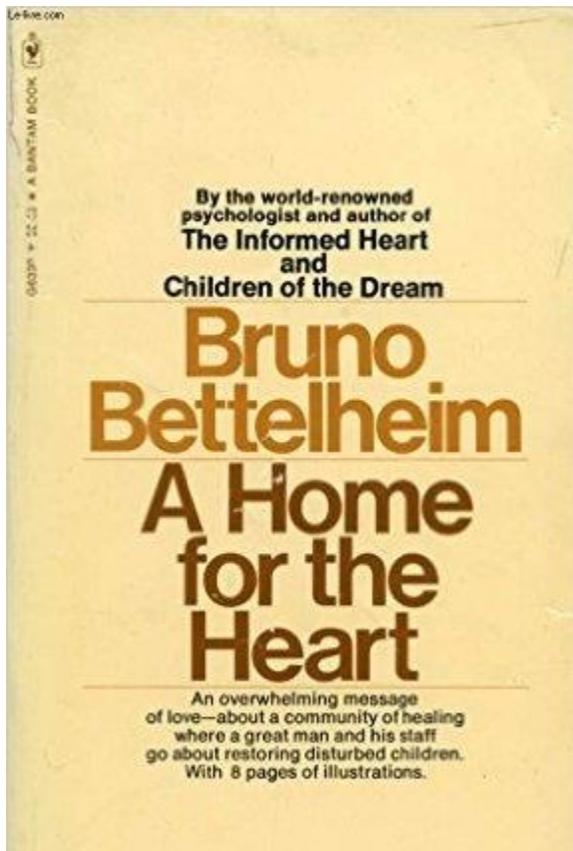
decisions I ever made. I am still thankful I was given the opportunity.

I was attracted to doing something challenging and which I believed would lead to personal change. This possibility was confirmed by most people I talked with on my 3 day long visit, which was part of the staff selection process. The staff I met kept saying, this kind of work will challenge you, but if you can do it you will learn about yourself and grow as a person. I was already identified with working for a just cause, and doing something for disadvantaged children. However, I think the motivating factor was to do with personal change for me and my sense that this work might be a way to do it.

I think there are many jobs where we can learn all the time, but not so many which will lead to fundamental change as a person. The kind of occupations that push us to our limits are more likely to do this. Our formative experiences have a major influence on our adult personalities. Working 24 7 with children who keep probing to test who you are and what you are capable of, is another likely catalyst for change. Put the two together and there is a huge potential for growth, both professionally and personally. We find ourselves in a position where it is impossible to escape our vulnerabilities, unless we have armour coated skin. Two options that don't take long to surface, are leave or stay and work through whatever is painful and difficult.

John Whitwell was the Principal of the Cotswold Community for the 14 years I worked there. He captured the centrality of change in a 2011 [speech](#), celebrating the work of the Community,

The Cotswold Community has been a special place for a lot of people for a long time. Why is it special?It seemed to me that the Cotswold Community supported change. Change for everybody in the place. Change not just for the boys that came here, but change for all the grown-ups. That change was about gaining new insights into the work, but also about becoming more self-aware and also learning new skills. Skills whether they were therapeutic skills, or practical and creative skills as well.



Bruno Bettelheim (whose reputation has been challenged since his death), who was Director of The Orthogenic School in Chicago also wrote about this in his book 'Home for the Heart' (1974). The Orthogenic School was for children with significant difficulties, such as severe autism and childhood schizophrenia. I read parts of his book during my early days in the community. There were a few sections I found particularly interesting.

- Reintegration: The staff member against himself
- Personal Change and Professional Growth
- The Inward Journey

When I started writing this blog I didn't anticipate referring to Bettelheim. However, I associate him with some of my first insights into the issue of development. So, maybe it is not surprising he has come to mind. Bettelheim's basic premise was this and it is as relevant now as it was then. We go into

these extreme work environments, because it will meet some of our own needs. We are not likely to be conscious of what those needs are, but we sense the work will be good for us. Sentimental notions of wanting to 'love' children or 'help' a deprived child, on their own will not be enough to sustain our efforts. Hence the well-known phrase 'Love is not Enough' - also a title of one of Bettelheim's books. In fact many people who do not last long in the work, don't leave because of the children's attitudes towards them. They leave because of their own strong reactions and hostile feelings towards the very children they previously felt so much sympathy towards. The shock of their own reactions and feelings can be too much to bear. I certainly remember feelings of anger I had never felt before in my life. The children were expert at finding our 'Achilles heel' and 'buttons to push' that we didn't even know we had.

It isn't so much the patient's actions or feelings against which the staff need to protect themselves, but mainly their own. (Bettelheim)

I'm talking about very difficult children here, who will often attack you, emotionally, verbally and physically and reject everything you offer. They will also behave in a chaotic, unpredictable, bewildering and often dangerous manner. If all of that goes on consistently, for days, weeks and even months it is challenging to the extreme. Thankfully it doesn't go on forever, though it can feel like it. These children need to push those who care and work with them to the limit. Only then and if you survive and carry on, without retaliation will they begin to trust and potentially heal. Tolerating one's own feelings and reactions is sometimes the best we can do. At least this is better than hurting the child, which may have been common in his or her history.

2nd part of the premise. When we are faced with such consistent attack, rejection and hostility, our defences, which were good enough to help us survive in ordinary circumstances, begin to disintegrate under this emotional and physical onslaught.

3rd Part - we feel extremely vulnerable, frightened, overwhelmed and confused. Support is critical here. The worker may be in emotional turmoil, which is a normal reaction to a highly stressful situation. Those providing support need to have the confidence and experience so that they too don't become reactive. Emotional disintegration can be catching. Any organization that provides foster or residential care, or any other service to children who have complex trauma must meet this onslaught on the staff, with an equally powerful support. If not, people are likely to get really hurt and not everyone will stay in the same place. Either staff or children will leave, or both. I think the same also applies in other related services. The support can be in different forms - training, supervision, mentoring and consultancy, and directly in the work situation. It is essential that time and space to think about the work is provided.

4th part. With defences disintegrating, we can begin to feel and see what is underneath them and this provides the potential for learning and growth. Why did a particular incident make us so upset? We begin to make connections, sometimes with events we had completely forgotten. What we remember of our childhoods begins to become more complex, but also more accessible. This 'inward journey' as Bettelheim called it could take many years, usually a minimum of 3.

5th part - reintegration. This is when the unintegrated parts of our personalities begin to become integrated. It is interesting that this concept of integration is now one of the main themes of trauma recovery work. With reintegration our personality grows. Our narrative becomes more coherent and now includes experiences, sometimes painful, which we were not fully aware. The unconscious and unintegrated past may have made itself known in ways outside of our control. Like an unpleasant repetition we couldn't stop. For example, a physical symptom or pattern of behaviour.

There is not an end to this process of integration. It carries on, just as new experience continues. But just as in the way the first 3 years of life are so influential on the rest of our development - the first 3 years of intensive work with severely traumatized children has a similar long lasting influence. For some people, if they get that far, the 3 year cycle is enough. Change has happened

and it is time to move on. For others, different reasons for continuing can be found. Whatever route we take, our development is central to our well-being. I learnt the following from Martin Willis (2001) on a training event related to strategic leadership and outcomes. The three key outcome areas for human well-being are safety, happiness and development. Development is important to all of us – for those who work with children who have complex trauma it is a necessity. Bettelheim said in 1974 and I agree with him,

Such re-integration around the patient seems to have a near miraculous effect. Actually, what is involved in the process makes understanding it quite readily comprehensible: the worker's integration often induces a parallel process in the patient.

Though he uses the terms patient and worker, I think the same also applies in more familiar and less institutional settings, such as a foster home. There are many routes to development. I am not advocating that an experience like mine would be good for everyone, though it was for me. Those extremely challenging years laid a foundation that I continue to value, use and build upon. There were also many enjoyable times, wonderful shared experiences, fun and humour. The children had great character and are unforgettable. I am glad to still be in touch with a few as adults, 25 or so years later. The therapeutic community I joined had developed an exceptional therapeutic model. The support that I was able to make use of was excellent. I had high quality people around me - colleagues, managers, senior staff and consultants. Maybe the culture allowed their quality to develop and shine through? No one person created the culture, but we all, including the children had the space to contribute. Without this the whole place could easily have disintegrated into a complete mess. At times it felt like it was. Many young people, whose lives were not destined for good outcomes did very well. Some didn't and the same could be said of the staff. There are probably many who have mostly negative memories. But many also who have gone on in their work, to achieve on the foundation of this experience.

We cannot overlook the central need for the professional development of all those who are involved in such challenging work. We might call it professional, but in a job that is so personal there isn't a neat way of separating the personal. For example, if a carer is to not be punitive towards an 'ungrateful' child, she might first need to understand her resentment towards her parents who constantly told her she was ungrateful. However, our need for development needs to be manageable within the context of the primary task – enabling children to recover. Too much baggage, might really be too much. A fair bit of baggage, like the 'wounded healer' might give us the motivation we need. No baggage, there are easier ways to make a living. There is a fine line here and it is one of the central struggles of the work.

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