

St Anne's and St Joseph's RC Primary School

Attachment and Trauma Informed Practice

A whole school response to meeting the needs of all children

November 2025

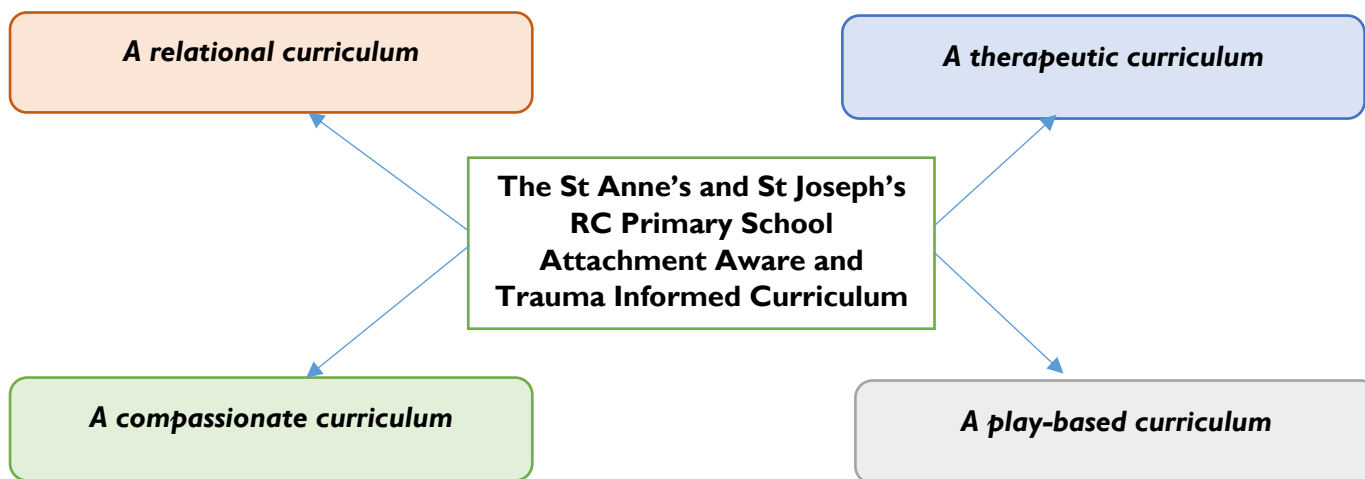
With love and faith, we achieve together.

For we are nothing without Christ.

Nihil Sine Christo

The staff and governors of St Anne's and St Joseph's are fully committed to meeting the emotional needs and wellbeing of all children. All adults who work in school have a working knowledge and understanding of attachment and the impact of early trauma. There has been a commitment to training for senior leaders since Summer 2022, with the school registered on the Attachment and Trauma Sensitive Schools Award this year. This includes a commitment to regular training and development for all staff. This has informed the practice across school and remains a key priority in order to support the increasing needs of some of our school community. Over the last 12 months all staff have received training on unconditional positive regard relational behaviour management as well as developing an understanding of the impact of trauma on children's development.

We have regular reviews and training with all staff to ensure this is central to our provision and we are committed to developing and improving our provision and practice across school to meet the needs of the pupils in our care.



Rationale:

Over recent years, we have become increasingly aware of the impact trauma has on children's brain development and consequently on their ability to learn or regulate their own emotions and responses. Following the impact of the pandemic in 2020, we recognise that all our children, parents and even staff have experienced a trauma which is now being recognised as an Adverse Childhood Experience, and it is important that this is acknowledged and given a greater priority if children are to be supported appropriately to be able to develop socially, emotionally and then academically.

We strongly believe in a commitment to ensuring children's emotional needs are met prior to and alongside supporting them to learn. We fully acknowledge that children will need support to recover from loss, trauma, anxiety and grief, in lots of different ways.

In our training and development, we identified five major areas of loss our children may have experienced over the course of their lives, particularly as they were all impacted by the pandemic in 2020: routine, structure, friendship, opportunity and freedom. There may be many others, but these are pervasive and have had enduring effects. These losses may, for some children (and even adults), result in increased anxiety, an experience of trauma and for some even bereavement or grief. Research shows that children who experienced quarantine or social isolation in previous pandemics were five times more likely to need mental health interventions than those who did not.

"The primary focus of schools at this time should be to embark on a long, sometimes challenging, journey with each individual child, through a process of re-engagement, reconnection, which guides and supports them back to being ready to learn, able to settle to learn and fully engaged with learning."

"Developing fit for purpose policies for getting back to school" by Jenny Nock (May 2020)

The key components of our approach are: being authentic, curious and connected through:

- ✓ noticing;
- ✓ experiencing;
- ✓ expressing; and
- ✓ processing

We need to be authentic, real, in touch with and acknowledging the difficulties and the challenges, and we need to allow our children, colleagues and families to be authentic, no matter how uncomfortable that might be for us.

We need to stay curious, making time for self-reflection, checking in on our bodies, emotions and thoughts, and being curious as above, about all those who make up our school communities.

We need to facilitate and maintain connection and re-connection, reaching out not only to give support, but to ask for and accept support from others.

Relationships:

Relationships are a key strength across our school and have been for a long time; it is often commented on about the strength and authenticity of the relationships between children and their peers and children and the adults in school. This was recognised in our Catholic Schools Inspection in July 2025.

We have witnessed an increase in children experiencing attachment issues as a result of the change in caregivers they may have due to loss, bereavement, separation or the pandemic. Adults themselves find these situations to be challenging, leaving them feeling anxious, isolated and uncertain and this in turn can impact on their relationships with those in their families and beyond. This has resulted in a legacy of increased mental health concerns, family and relationship discord and in some instances an increase in substance or domestic abuse. All of these have an impact on the children in our care.

Lack of connection with these safe people will have led to feelings of disconnection, abandonment, and even feelings of doubt that previously trusted adults are unable to keep them safe. Thus, attachments may have become fragile and tenuous.

“Developing fit for purpose policies for getting back to school” by Jenny Nock (May 2020)

As a school, we recognise the important role we must play in supporting the children to be able to access learning but also address any trauma they may have experienced. As previously mentioned, we know that this must be addressed individually to ensure we are taking into account the experiences of all, but we also know that what was our strength before the pandemic, the meaningful relationships and authentic attachments, must remain at the centre of everything we strive to do. This will allow staff to effectively support children to manage their feelings, fears and consequently behaviour.

‘Relational trauma requires relational repair’

(Treisman, K. 2017)



Therapeutic

(We must) take seriously the notion that every interaction and experience has the potential to be healing or damaging, and actively choosing the former.

“Developing fit for purpose policies for getting back to school” by Jenny Nock (May 2020)

Using our knowledge of Attachment and Trauma informed practice within school, we understand that experiencing any kind of trauma as a young child, can have long term implications if not addressed. This may include but is not limited to:

- Extremes of behaviour –excited, angry, sad
- Anxious and/or hyper-vigilant
- Over reacting to things they would normally manage
- Appearing overwhelmed with expectations or routine
- Attention-seeking behaviour and needing recognition and constant reassurance
- Disassociated from people and school
- Regressive behaviour, e.g. demonstrating behaviour of younger children or developmental stage.

Staff are very skilled at identifying children who are demonstrating this behaviour as a form of communication. A challenge for the staff is to not try and fix every problem which arises, as children need to be able to experience feelings, negative and positive in order to understand how to manage them. This will often mean listening or even sitting in silence until a child feels safe enough to be able to communicate how they are feeling.

Adults who listen with empathy perform a vital therapeutic function, without being therapists.

“Developing fit for purpose policies for getting back to school” by Jenny Nock (May 2020)

Enabling children to identify and connect with trusted adults in school is part of our commitment, provision and practice and staff are flexible about children accessing this support as appropriate.

Play-Based Curriculum

It has long been recognised that children can often use play in order to process and communicate how they are feeling. This has become more important than ever. Children, during the pandemic, faced restrictions on their access to play both from the measures which may have been in place in school, including bubbles, staggered playtimes, resource restrictions, and those which have impacted on them outside of school, including access to play facilities, limited mixing with people outside their family, and even simple things such as birthday parties. We have seen this impact their development in school and unstructured times have sometimes been very challenging in recent years and continue to be so. We recognise the developmental impact restrictions have had on children long term and are committed to addressing this through our school curriculum and enrichment opportunities.

Children of all ages should be encouraged to play and few limitations or restrictions should be placed on this other than to ensure children remain safe and do not harm themselves or others. This should result in reduced stress and anxiety and enable children to be in a positive mind set for tackling future academic work.

A group of experts, who specialise in child mental health and development recently carried out a Rapid Review of literature exploring the harmful impact of isolation on children and the alleviating benefits of play, found that children who experienced quarantine or social isolation in previous pandemics were five times more likely to need mental health interventions than those who did not.

They found that high quality play opportunities post-pandemic, as early as safely possible were a protective factor and reduced negative outcomes for later mental health.

“Developing fit for purpose policies for getting back to school” by Jenny Nock (May 2020)

Since 2023, we have developed a greater awareness of Active Learning, ensuring staff, through Ready, Set, Move training provided locally, have the training and resource to develop this meaningfully in classroom practice.



A compassionate curriculum

Our children are very social, even those who find social interaction challenging; they have been supported over time to find a way that suits them to socialise with others.

Some of our children have experienced many losses, whether it be a key relationship, a house or even country move, bereavement or a new school.

With these losses, children may have experienced anxiety, trauma and grief and just as we are experienced in managing support for children who experience something unexpected and upsetting, we now need to be prepared for how vulnerable this may have made our children.

Adults, both in school and at home, may have their own worries, fears and anxieties, including financial, housing, support networks, health, family, and combined with the over exposure to news, debate and opinion on the media, this can result in feeling angry, depressed and frustrated. We have seen an unusual and sometimes disproportionate reaction to incidents as people, both adults and children, struggle to manage their feelings.

Since September 2023, we have adopted a curriculum called 'My Happy Mind' which supports pupils, parents and staff to understand their feelings and emotions through the scientific understanding of the brain. This is incorporated into our Mission and Values curriculum, planned over every half term.

Strategies to support:

We have a wide range of strategies embedded in practice which may include, but are not restricted to:

- Attachment and Trauma sensitive practice in class, including 'quiet' spaces, work-alone zones, visual timetables, emoji check-ins
- 'Positive Regard' relational approach to behaviour management, including the use of restorative consequences rather than punitive
- Executive Functioning strategies including resources, visual supports, verbal reframing
- Classroom organisation to support access including resources, seating, lighting and other sensory strategies
- Use of sensory snacks and flexibility within lesson approach to support children
- Access to trauma informed and attachment aware interventions including Relax Kids, Lego Therapy, Drawing and Talking
- Support from staff trained as Emotional Literacy Support Assistants (ELSAs) as well as wider staff roles including SENDCo

Compassion FOR ALL must remain at the forefront of our approach to supporting pupils, families and each other. As a Catholic school, this is what we do best! Catholic education has always been focussed on meeting the needs of the most disadvantaged and we take pride in ensuring we remain committed to this.

APPENDIX I – PRIMARY AGED CHILDREN VULNERABILITIES (taken directly from the Jenny Nock training)

Children under the age of 7 identified as the most vulnerable groups:

Evidence from research studies from NZ, (Liberty, 2018) have shown that there has been considerable impact on the learning and development of those children who were under 5 years old at the time of the earthquakes, (e.g. speech delays, emotional immaturity, etc). We ignore such related evidence at our peril.

Traumatic situations invoke traumatic emotions. Any event outside the usual realm of human experience which is distressing can create helplessness, anxiety or panic. Traumatic stressors usually involve a perceived threat to one's physical safety or someone close to them. This is an intense psychological reaction to feeling threatened, which is completely normal. Traumatic stress overwhelms coping mechanisms leaving children feeling out of control and helpless. Continual exposure to the trauma creates a survival reaction of being depleted, exhausted, or worse, self-destructive.

Children experience traumatic stress differently based on age and maturity level. Young children cannot make meaning or sense of complex matters such as the pandemic and many will develop mental health problems as a result. Children want and need to be children and that involves close social contact; touching, hugging, holding hands etc. Asking them not to do this will cause psychological damage especially to the youngest who don't understand the need for distancing as adults do. All they will see is touching and contact is bad, obsessive hygiene and control over themselves is good.

They aren't mini adults, they are children and will struggle with understanding this concept to the degree that is required. Mental health problems WILL be the result.

Signs of stress ages 3-5 (identify that some older children may developmentally be at this stage):

- Regression - returning to security blankets and/or discarded toys, lapses in toilet training, thumb sucking or other previous behaviour
- Immature grasp of what has happened; bewildered; making up fantasy stories
- Blaming themselves and feeling guilty about how the crisis affected their family
- Bedtime anxiety; fitful/fretful sleep; frequent waking or chronic worrying
- Fear of being abandoned by parents or parents dying from coronavirus, clinginess increases as child feels unsafe
- Greater irritability, aggression, or temper tantrums
- Being relentlessly active

Signs of stress ages 5-7

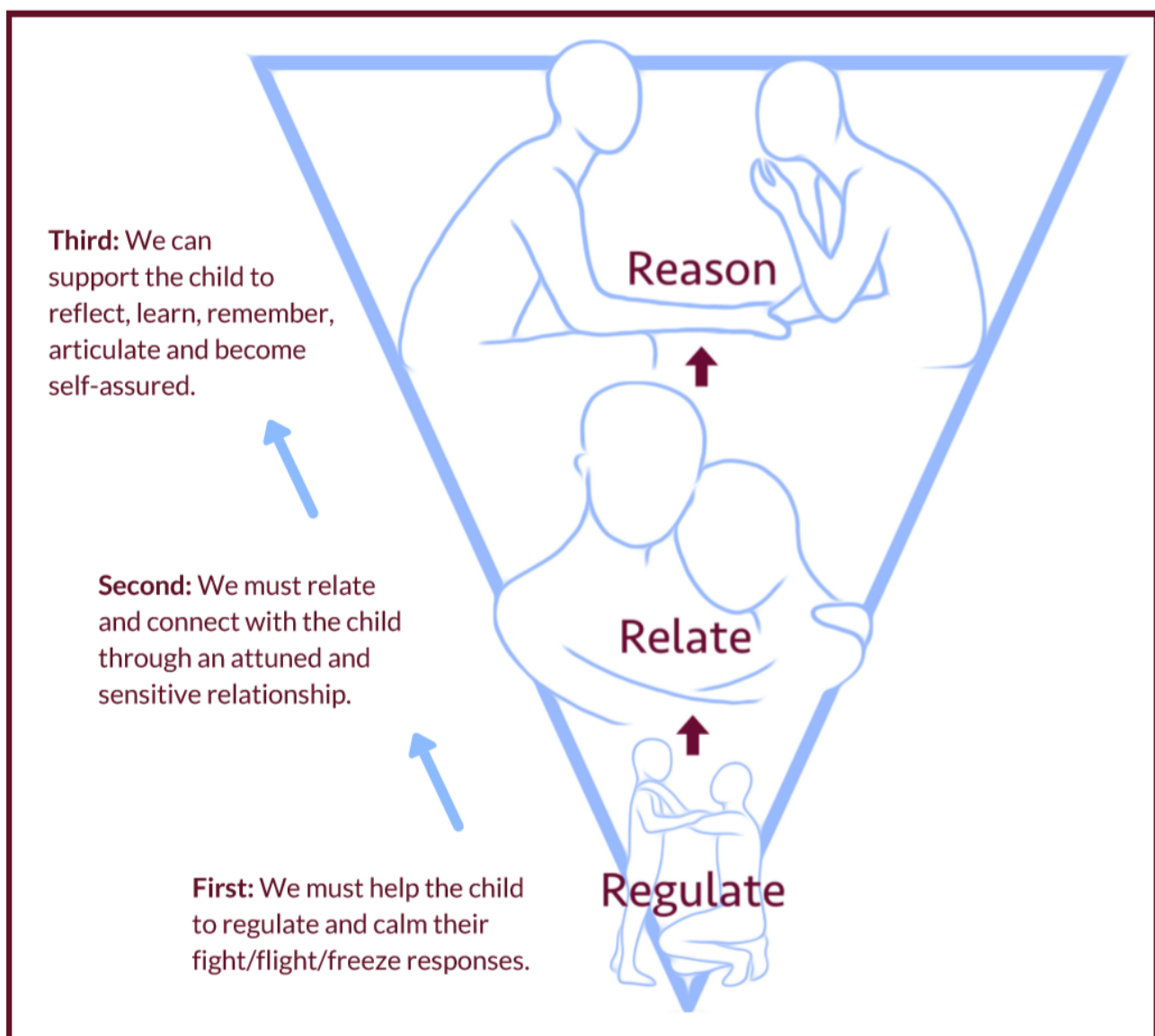
All of the above and

- Pervasive sadness: especially when they perceive feelings of being abandoned, or fear of loss of both parents or siblings to the disease
- Crying and sobbing excessively.
- Irrational fear of the virus. (This is the stage where children start to understand about their own death and the death of others, so some children may focus on a cough as indicator that they have become infected).
- Afraid of the world ending, or watching their parents die, or their worst fears coming true, this "catastrophising" is based on fears, not facts.
- Denial - that the coronavirus never happened, and things will 'just go back to normal' like waking up out of a bad dream
- May become overactive or act irresponsibly to avoid thinking about stressful issues.
- Acting disrespectful, rude and aggressive.
- Feel ashamed of the crisis; or feel they are different from other children because of how your family may be taking coronavirus lock down more seriously than others, while their friends on social media seem to be going on with 'life as normal'



The Three R's: Reaching The Learning Brain

Dr Bruce Perry, a pioneering neuroscientist in the field of trauma, has shown us that to help a vulnerable child to learn, think and reflect, we need to intervene in a simple sequence.



Heading straight for the 'reasoning' part of the brain with an expectation of learning, will not work so well if the child is dysregulated and disconnected from others.