

**UK TRAUMA
COUNCIL**

CHILDHOOD TRAUMA, MIGRATION & ASYLUM

**Toolkit for
EDUCATIONAL COMMUNITIES**

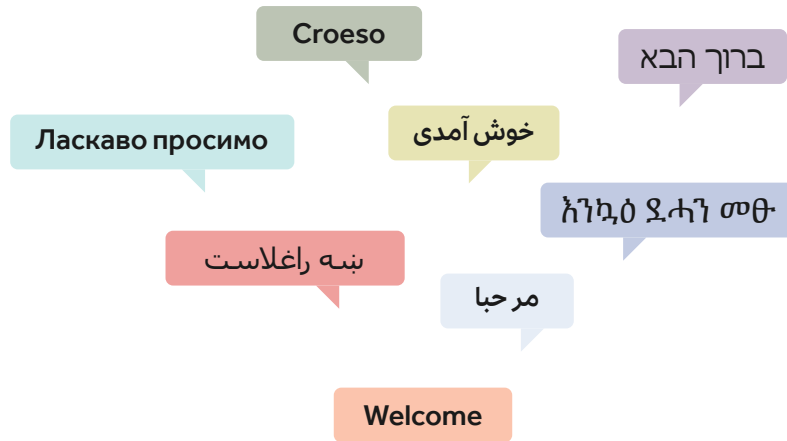
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CHILDHOOD TRAUMA, MIGRATION & ASYLUM

Toolkit for EDUCATIONAL COMMUNITIES

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Let's get you started

Hello, thanks for taking a look at this 'toolkit'. It has been designed to help you with the job you are already doing, not give you more things to do, or more responsibilities. Our hope is, that this toolkit will help you see just how valuable and effective your everyday ordinary interactions can be; and that you'll realise that you are already doing many really helpful things. We hope that there may be some new things, or ways of doing things, that you could easily incorporate into your work. In putting this toolkit together, we have been guided by our best understanding of trauma and what helps children and young people cope best, based on research evidence.

Who is this toolkit for?

This particular toolkit is designed for educational communities – by this we mean early years settings, schools, alternative provision setting and FE colleges. And it is designed to be useful for all staff, including keyworkers, teaching staff, support staff, tutors, receptionists, lunchtime supervisors, senior leaders, sports coaches, librarians - anyone who interacts with children and young people. This toolkit is about trauma; if you are looking for advice on other aspects of the experiences of children and young people seeking asylum, other organisations produce excellent resources.

Why does trauma matter?

The repeated states of conflict and crisis that occur the world over, mean that millions of people are forced from their homes, in search of safety. While the war in Ukraine is one example, there are many other factors which make the world unsafe for young people and their families in their places of origin. The process of relocating following war, violence or persecution is complicated by the impact that these events have on the emotional worlds of young people. Sometimes these events are traumatic, and the effects of this trauma can be short, or long-lasting. If we seek to promote the success of children and young people within their educational landscapes, we must be sensitive to the ways in which trauma can shape the way they see themselves and participate in the world around them. This toolkit aims to give some guidance on how to spot signs, and shift everyday engagements into ones that are protective and enabling for children and young people who may be struggling.



How are we using language?

Language is complicated! It can mean different things, to different people, at different times. It has the capacity to exclude, discriminate, undermine, offend, and harm. We have thought hard about the language that we use in this set of resources, and we have consulted widely. But, we continue to learn how to use language inclusively and are always receptive to any feedback or comments.

Although the words "refugee" and "asylum seeker" are commonly used, our understanding is that the people to whom these words apply, prefer words that refer to their situation and experience as human-beings rather than their legal status, as this can feel dehumanising. That said, there are important differences between seeking asylum and having been granted refugee status. Those who have been granted refugee status will most likely experience more stability and will have more access to resources than those who are seeking asylum and have not yet had their claim for asylum decided.

Refugee status: This is granted when the UK government has decided that an individual who has claimed asylum meets the definition of a refugee according to the UN Refugee Convention i.e. someone who "owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group, or political opinion, is outside the country of his nationality, and is unable to or, owing to such fear, is unwilling to avail himself of the protection of that country" (Article 1, 1951 Convention Relating to the Status of Refugees)

Asylum seeking status: The definition of an asylum seeker is someone who has arrived in a country and asked for asylum. Until they receive a decision as to whether or not they are a refugee, they are known as an asylum seeker. In the UK, this means they do not have the same rights or access to basic supports as a refugee or a British citizen would (Refugee Action).

Separated children and young people: Although "Unaccompanied Asylum Seeker" and UASC (the abbreviation of Unaccompanied Asylum Seeking Children) are in common use, we prefer "separated children and young people" because it's a more accurate description of their situation. Also, sometimes people think the word "unaccompanied" refers to a temporary planned short period apart from their caregivers, but for many young people this is not the case.

Country of origin and receiving country: We have chosen to use "country of origin" rather than "home country" because for some young people it didn't feel like a 'home' because of what happened to them. And we have chosen to use "receiving country" rather than "host country" because some young people feel that "host" makes it sound as if they are just temporary guests.

Children and young people: We use "children and young people" throughout because we want to recognise the fact that they are not adults, particularly as some will be having their age disputed.

Final Thoughts

In building this toolkit, we have tried hard to work in partnership and collaborate closely with many young people with lived experience, and with various agencies that support them. You can find out who we worked with in the acknowledgements.

The anonymous quotes and case studies included in the toolkit are from actual young people, parents/caregivers and those working with those seeking asylum and /or based on real examples shared with us.

We hope that this toolkit will help all those involved with children and young people seeking asylum, to work more collaboratively and not feel that they have to do this on their own – the families and caregivers, the local network of community organisations who have expertise in understanding the needs of this population, and other professionals such as local Educational Psychology Service (EPS), counsellors, general practitioners (GPs) and NHS mental health practitioners.

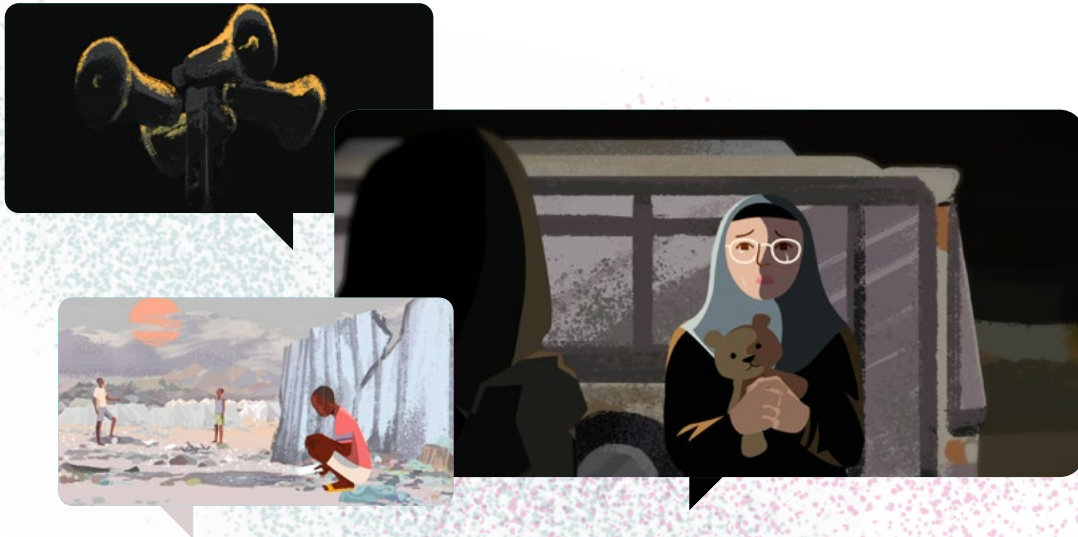
Although it might not be possible for you to read this all from cover to cover right now, we think it is probably helpful to look at each section of the toolkit in turn, to help you best apply the ideas included.

Rochelle Burgess

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Section 1

Trauma in children & young people seeking asylum

In this section we provide an overview of some of the experiences of trauma that children and young people seeking refuge and asylum may experience. Before we do that, we want to recognise the potential impact on you of listening to, learning about and working with those affected by trauma. This impact can be positive, in terms of inspiring you and reminding you of the valued work you do. At times however, the work can also have a negative impact on your wellbeing. Because of this, Section 5 is devoted to considering your own wellbeing. You may want to read that before you go any further into the toolkit.

The UK Trauma Council describes trauma as the way that some distressing events are so extreme or intense that they overwhelm a person's ability to cope, resulting in lasting negative impact. For children and young people who have experienced war, conflict and persecution and been forcibly displaced from their country of origin, it is highly likely that they will have experienced multiple traumatic events. One study found that young people seeking refuge reported an average of eight traumatic events, with their migration journey being the most widely reported traumatic experience^{1,2}. And to make things even more complicated, you may not even know everything that they've been through.

- They may have witnessed the killings of others, including loved ones; have had their homes and communities bombed; been tortured; raped; and been forced to fight (even as young children).
- Some will also have been discriminated against because of their religion, ethnicity, gender, sexuality or disability.
- Some girls and young women may have also undergone female genital mutilation (FGM), be at risk of FGM and/or been married at a very young age (sometimes as young as 10 years old).
- Some will have been separated from their family and may be additionally vulnerable as they went through some of their trauma alone and are now without the direct support of family.
- Those who are separated from their families may experience ongoing difficulties connected to the ongoing stress and worry about family members, their grief at the loss or separation from them.
- They may have been living in complex political and economic environments and experienced adversity such as persecution, discrimination and poverty.

- Some children and young people may have never known peacetime in their lives before leaving their country of origin.
- Many will have traumatic journeys to the UK, facing additional danger and risk of exploitation over months and sometimes years. This might include lengthy stays in refugee camps, or being detained by authorities in other countries.
- Arrival in the UK does not mean their trauma will necessarily be 'over,' as children and young people face ongoing stress, uncertainty and may receive a hostile response from people in the UK.
- Within the UK, some may be vulnerable to trafficking, modern slavery and sexual exploitation.
- Children and young people may well continue to live with considerable uncertainty - about their legal status, about relocation within the UK, and about whether they will be sent back to their country of origin or to another country that they didn't choose. The ongoing legal process to claim asylum and be granted leave to remain can be traumatising as children and young people might be required to tell and retell their experiences of trauma in interviews with different professionals without access to therapeutic support.
- Some young people may be subject to an age dispute process, which they may find incredibly unsettling or even traumatising, because it makes a difference to what resources they are eligible to receive such as access to housing, social workers and financial support. They may also find this process distressing because the clear implication is that they are not being believed.
- Children and young people may have experienced physical violence as routine punishment from teachers in their country of origin. Until it is explained to them, they may fear that this will happen in UK education settings.
- Separated children and young people are known to experience additional psychological distress and have higher rates of suicidal behaviour³.

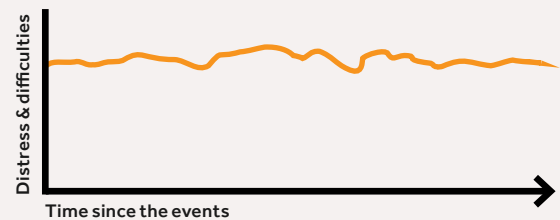
It isn't inevitable that a child or young person will develop mental health difficulties following traumatic events. Some will appear to be coping relatively well and some will recover over time. However, many may have endur-

ing problems following trauma and research⁴ suggests that rates of post-traumatic stress disorder (PTSD), anxiety, depression, self-harm and suicide are all significantly higher in this population than in children and young people who have not been displaced.

The graphs below (based on the work of Bannano⁵) shows how very broadly speaking children and young people react in one of the four ways following traumatic experiences:

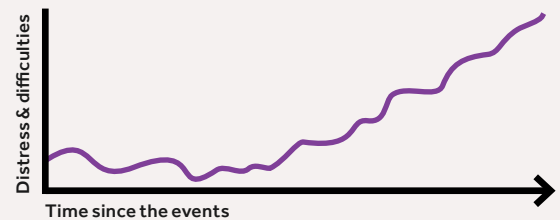
Enduring

The distress and difficulties persist over time



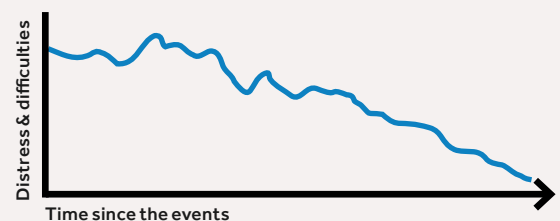
Delayed

Appear not to be distressed or have difficulties at first, but start to struggle at a later stage



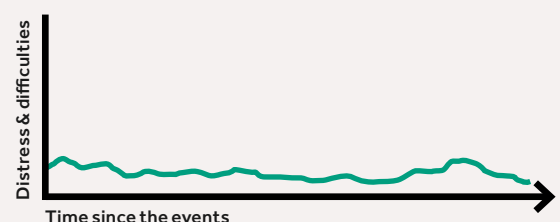
Recovery

Distress and difficulties at first, but they get less over time



Unaffected

Appear not to have any difficulties



Help – I'm working in the dark!

It is quite likely that you will have little or no information about the children and young people that begin attending your educational communities. What's more is that they may not be in a position to tell you very much about their experiences. Doing a little bit of research about the countries from which your children and young people have fled can be really helpful to give you some insight into the kind of experiences that are common. You will need to be sensitive and not assume that they have experienced exactly these things. Also be mindful that experiences might be different depending on the particular ethnic group or community to which the child or young person belonged as well as traumatic events specific to their gender or sexuality (see the [Refugee Council's](#) briefings for up to date information about different countries.)

It can also be helpful to learn about the asylum process so that you understand a little about what they have been or are still going through. (The [Refugee Council](#) has a [helpful map](#) of this process).

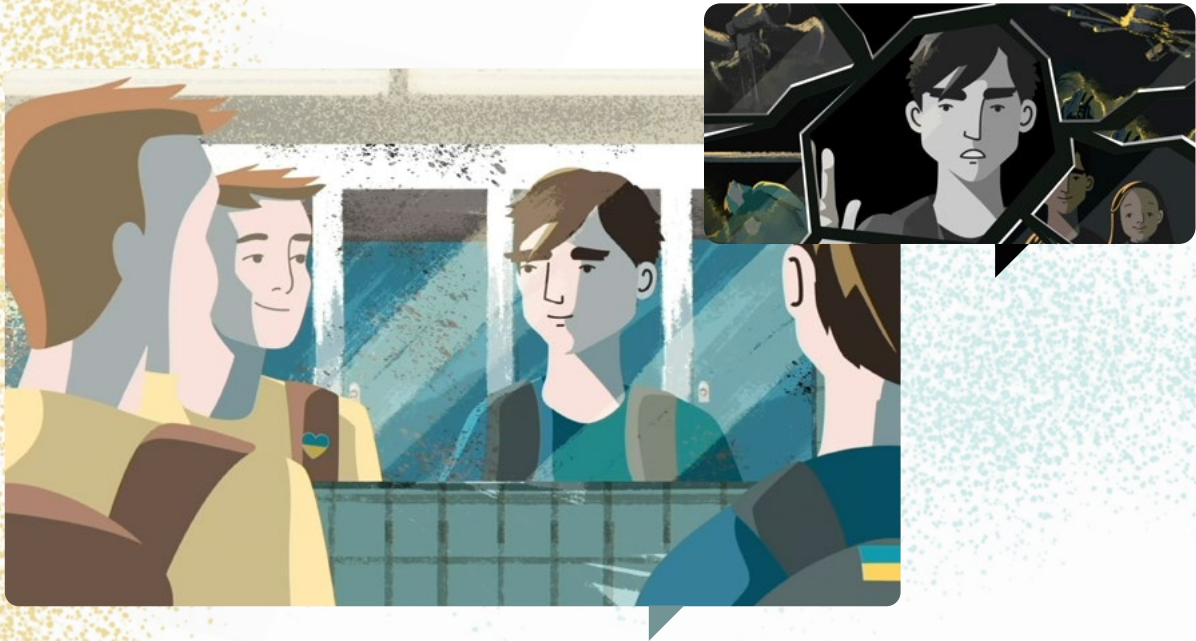
Meaning making

Whilst you will keep your knowledge and understanding of the child or young person's history of war, conflict and persecution in mind (what you know about it) it is not necessarily the actual threat and danger of their traumatic experiences that is the most important factor in understanding their level of need. What their experiences mean to them, and what sense they make of them is the key to really understanding why they may continue to struggle⁶.

Section summary

- **Range of traumatic experiences:** Children and young people seeking refuge and asylum are likely to have gone through a number of difficult and potentially traumatic experiences.
- **Trauma timeline:** This may include traumatic events in their country of origin, during their migration journey and here in the UK.
- **Avoid assumptions:** It isn't inevitable that they will have mental health difficulties and post-traumatic stress reactions but it is helpful to look out for these so they can be well supported.
- **Do your own homework:** You may well be working 'in the dark' so finding out a bit about common experiences from their country of origin can help you understand what might have happened to them.
- **Meaning making:** It's not always the actual threat or danger but the meaning they have made of distressing events that is often key to why they might continue to struggle.





Section 2

Recognising reactions to trauma in children & young people seeking asylum

Why it's helpful to be able to recognise traumatic reactions

Being able to recognise when a child or young person you work with has experienced traumatic events is important so that you can provide helpful responses that support their recovery. You will also be better placed to consider when they might need additional support outside your educational community.

It is both natural and understandable to have difficulties following 'extraordinary' experiences. For some this is a short-term response and although the memories of what happened will likely always be difficult, they recover well and find ways to have a positive future. However, experiencing traumatic events can lead to a range of mental health difficulties such as post-traumatic stress disorder (PTSD), anxiety and depression.

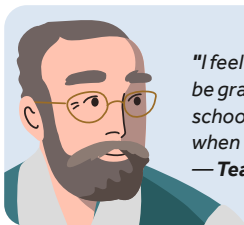
Such difficulties may need specialist help to enable the child or young person to learn to manage and then move beyond them. Early intervention and effective support can mitigate the impact that these problems can have on wider health and social outcomes. Without effective support, problems can last into adulthood and positive outcomes can sadly be limited.

One of the challenges is that people see things differently. Children and young people who have experienced war and conflict in particular may not recognise that the difficulties they have are a result of their traumatic experiences. Trauma and mental health may not be a concept that is familiar in the young person's culture and so they may not yet make the link between their experiences and the difficulties they are having. They may prioritise or prefer to use their faith and culture over a Western medical model and so draw

on their beliefs to make sense of events and how to cope with them.

Some children and young people will tell you or show you about their traumatic experiences through their play or work, although this may take them a long time to do. Sometimes disclosures happen before breaks in attending nursery, school or college such as on a Friday or before the holidays. Others will tell their peers and classmates who may or may not then tell you. Many may not yet have enough English language to communicate to you what they are thinking, feeling or finding hard. And even if they were proficient in English, they may not feel able to explain how they are struggling because to do so might trigger the very memories they are working to avoid. Additionally, they may have learnt to mask their feelings of fear and distress as a way of surviving in an unsafe place or out of fear of being seen as ungrateful.

Younger children may particularly struggle to explain how they are feeling and are unlikely to have the language to express what has made them upset or frightened. Working together with their caregivers you can begin to build a picture of how they are doing, being mindful of the mental wellbeing of their caregivers too. Some children and young people could have special educational needs and disabilities which may or may



"I feel these children think they have to be grateful to live here and come to this school, so they find it hard to talk to me when they're unhappy about something."
— **Teacher**

not have been identified prior to them starting at your setting. Determining which of their difficulties are due to their traumatic history and which are the result of a learning support need will take time, care and sensitivity. Identifying learning support needs and then putting the appropriate support in place can be a bit more difficult with children and young people who may have experienced substantial trauma, and may not be fluent in English. It may require the involvement of an Educational Psychologist or similar. However it is really important, because accessing the curriculum and being able to succeed in education can have such a significant impact on their wellbeing and future development. Of course, some may have a combination of learning support needs and be struggling with the impact of their experiences of trauma on top of trying to learn English. Monitoring these children and young

people for the reactions described below will, however, be a good place to start. Some may also now be being cared for by an adult who was not previously their primary attachment figure so this can mean a lot of adjustment for both.

Different reactions to traumatic experiences

Internal and external

Much of what happens when a child or young person is affected by traumatic events occurs internally; in their thoughts, feelings and beliefs about themselves, others and the world around them. They may wonder how safe the world is, how trustworthy others are or how vulnerable they are. These internal effects are understandably difficult for others to see and recognise, in fact they may be difficult for the child or young person to recognise. What you may see however, is the external presentation of their trauma through their reactions, mood and behaviours. Below we describe some ways to spot and interpret these signals.

Physical or bodily reactions

Firstly, let's look at some of the physiological reactions that can occur following traumatic events. The very painful and distressing aspects of trauma can affect children and young people physically and they may find these easier to report to you. They may not yet know about the link between their traumatic experiences and their physical wellbeing, leaving them thinking that they are ill and need to see a medical doctor. You might find that they:

- **describe having** repeated headaches or stomach aches
- **report struggling** to sleep or experiencing nightmares
- **have problems** with their appetite.



***Khalil (8)** found it hard to settle. His teacher thought he may have attention difficulties. He was actually really good at paying attention but mostly to things that might be threatening. And so he kept looking around and constantly watching the door to see if anyone was trying to enter.*

Being on high alert

Experiencing traumatic events can leave them on high alert. You might see them:

- **be easily triggered** by overwhelming emotions of distress or anxiety
- **lose their temper** more easily – this can sometimes be misinterpreted by staff
- **be easily startled**
- **on the lookout** for potential threats
- **find it difficult** to settle and relax – this might be particularly true in an unfamiliar environment.



Amina (4) enjoyed drawing but frequently covered her artwork in red blobs and scribbles in black. She'd get teary and distant. Her key person wondered if it was just a colour preference or a way to express something from her past.

Intrusive thoughts and memories

If they are struggling with distressing intrusive thoughts or flashbacks, you might see them:

- **lose focus** from current activity because they are interrupted by sudden, unwanted thoughts or memories of their experiences
- **'zone out'** and lose touch with the 'here and now'
- **repeatedly express** their distressing memories or themes of it in their play, art, stories, interaction with peers
- **describe difficulties sleeping** or having nightmares
- **be anxious** about being separated from family or trusted adults.



Ibrahim (13) would often get defensive and angry when asked about his life in Sudan by his friends. The teaching assistant spoke with Ibrahim about managing his anger and worked with him on self-regulation. She also educated his friends about the conflict in Sudan to help them understand.

Avoiding trauma reminders

If they are avoiding reminders of their trauma, you might see them:

- **appear anxious** to avoid people or places that remind them of traumatic experiences
- **not want to think** about or talk about what happened to them

During lunch at school, a loud tray crash startled Khalil (8), causing him to hide under the table. The supervisor sat beside him and reassured: "Khalil, that was a very loud noise? It's understandable you got scared. It was just a tray. You're safe here. Everyone's okay."

- **struggle to cope** with things that remind them of their distressing memories
- **work hard to avoid** things although it might not always be obvious what exactly they are avoiding or why.



Farah (18) often seemed distant in class, and efforts to help her integrate didn't work. She later revealed her deep worry about family back home. They filled her thoughts all day, even in her dreams. If there were no recent calls, she feared the worst.

Feeling anxious

Some children and young people might struggle with anxiety so you might see them:

- **stuck** in a constant cycle of worry
- **repeatedly expecting** that something bad will happen
- **struggling** to cope with uncertainty and unpredictability
- **undertaking** rituals and habits that make them feel safe
- **experiencing** a range of physical reactions such as fast/shallow breathing, heart racing as well as those listed in the earlier section about being on high alert.

Luwam (16) kept her belongings including her bag and coat on her lap at all times. This was part of making sure she could escape at any moment.

Struggling with low mood

If children and young people are struggling with low mood you might see them:

- **appear low** and lacking enjoyment
- **sound hopeless** with no optimism about the future
- **disengage from activities** and interactions – this can be difficult to recognise if they are also struggling to learn English
- **lack the motivation** to do things you would expect them to enjoy or show interest in their peers.



After initially settling well, **Andrii (11)** became withdrawn from his classmates and wouldn't join in with the sports games that he previously enjoyed.

Impact

When you think about the difficulties a child or young person might be experiencing it is important to consider not only what is happening to them but how it is impacting their lives. The impact of the traumatic reactions described above might affect them in different areas of their life including:

- **home life:** relationships with family or caregivers
- **education:** relationships with adults and peers as well as their ability to concentrate, engage and learn
- **social life:** relationships with those they spend time with and ability or motivation to participate.

These reactions can also impact development in several ways. For example, they can:

- **affect the ability** to do certain things with age-appropriate levels of independence such as their language development, ability to dress, feed or go to the toilet themselves
- **negatively affect** the way they think about themselves, others and the world around them
- **compromise their ability** to keep themselves safe (see paragraph below on self-harm and suicide).

Self-harm and suicidal thinking or behaviour

Struggling with any of the painful and distressing aspects of trauma can result in children and young people finding it very hard to manage, and they may be vulnerable to self-harm and suicidal thinking or behaviour. Children and young people might:

- **have unexplained marks**, cuts, burns, scratches or bruises
- **avoid showing body parts** such as arms or legs because they have self-harm injuries (however, some young people have cultural clothing traditions which mean their skin may not be exposed and therefore it can be more difficult to notice this)
- **make comments** such as 'What's the point?' or 'I can't take it anymore'.

But of course, self-harm and suicidal thinking do not necessarily have visible signs, so if you are concerned

you may need to look out for some of the reactions listed above. Despite how it may appear, self-harm does not necessarily indicate suicidal thoughts or behaviour, and might be used as a method for coping with distress. The trick is to remain open-minded and curious and not jump to conclusions or make assumptions. If you're worried, don't be afraid to ask questions. Although you need to find a way to do so that is different from normal 'school' questions where they are expected to work out what the 'right' answer. They need to know that when you are asking these questions, you don't actually know the answer, but you're keen to find out.

Although being part of a faith group can be a protective factor for some people, be mindful that suicide may be heavily stigmatised in some communities. Young people may therefore be cautious and feel very ashamed about disclosing suicidal thoughts. You'll want to think about when and where you might have these conversations so that they are managed safely and sensitively for both you and the child or young person. It is also important that you familiarise yourself with the safeguarding protocol in your own organisation before undertaking these conversations and know how to respond to any disclosure or risk that becomes evident. When you are in a safe and private space and have time to check in with the child or young person without either of having to rush you could try asking:

"When things are really tough for you, how do you manage?"

"Have you ever hurt or harmed yourself?"

"I heard you say that you don't see the point. Can you tell me a bit more about what you mean?"

"Do you think about dying or want to die?"

"Have you thought about ending your life /suicide?"

"Have you made a plan how to end your life?"

If someone discloses risk to themselves or others you should of course follow your policy regarding safeguarding and contact your designated safeguarding lead (or use local safeguarding procedures). Organisations such as Papyrus have helpful resources and a helpline for young people and anyone concerned about them. Disclosures regarding suicidal thoughts

or feelings can be worrying and anxiety provoking for the listener – do make sure that you also reach out and seek support for yourself in these situations (see section 5).

Triggers

When children and young people are in highly dangerous or traumatic situations, they learn to stay alert to keep themselves safe. However even when the immediate danger has passed, their bodies may not 'reset' and so they continue to stay in 'survival' mode⁷ seeing, hearing, smelling, touching and tasting more 'efficiently' as a way of staying alert to danger. This means they may notice all sorts of potential threats and may be triggered by a whole range of everyday things that seem quite benign to others such as school alarms, fireworks or other apparently ordinary sudden noises, smells or experiences. They might not always know what triggered them and you won't always be able to tell what it was either. What you might see is a powerful reaction as they respond in fight, flight or freeze mode, perhaps becoming angry, anxious, distressed or paralysed with fear.

When Amina saw a tall, uniformed male arrive in the doorway of her nursery this immediately triggered a fear that she would be hurt. She ran sobbing to her teacher.

During a school trip to the park Khalil heard a helicopter noise in the distance and this triggered his memories of war. He threw himself to the ground.

When Andrii smelt the smoke from a nearby science experiment, this triggered a flashback of the bombing in his town. He became very agitated and refused to do his work.

Following a legal appointment, Luwam returned to class but struggled to re-engage as she was so distressed at having to retell her traumatic experiences. She then became very frustrated and shouted at her peers.

When the fire alarm went off while Farah was at lunch she froze. Even though her friends tried to tell her it was just a practice and lead her outside, she zoned out and didn't seem to hear anything they said. They tried to pull her towards the fire exit but she hid herself in the corner.

During assembly, news items were shared including the ongoing conflict in Ibrahim's country of origin, Sudan. In his next lesson his teacher noticed him appearing distant, and unable to focus or do his work. When the teacher raised his voice in response to another child's behaviour, Ibrahim immediately dissolved into tears.

Making sense of trauma reactions

The varied range reactions outlined above are all understandable and natural following traumatic and distressing events. With good support many of these responses will diminish over time. But for some, these difficulties may remain persistent, severe and frequent. They may be a marked change from the child or young person's previous behaviour (although you are unlikely to know about this without discussion with those they lived with prior to their trauma) and put the child or young person at risk from themselves or others. When these problems are enduring and have a significant impact on the child or young person, they may need additional specialist help (find out more about this in section 4).

If a child or young person has a special educational need or disability it may be even more difficult to work out if their difficulties are a reaction to traumatic events. You might need to be even more observant and spend a bit more time figuring out how they express their emotions such as distress. Sometimes, you may never be sure about the cause of their difficulties. (There are a number of organisations that have developed materials on this, for example [The Bell Foundation resource on EAL](#) resource on EAL Learners with SEND.)

At times the responses of children and young people who have experienced trauma may be difficult for educational communities to tolerate, as they may not be in keeping with a behaviour policy. This might be small things such as a young person needing to keep their coat on their lap, or it may be something more difficult such as angry or even violent outbursts. Sometimes the standard response from educational communities can actually make things worse. We're not suggesting that you do not respond to such actions. But we are suggesting that it can be more useful to stop and think about how their history of trauma might be contributing to their actions, what those behaviours may mean, and then work out what response from you and colleagues will be most likely to help them get back on track. Thinking about the five principles outlined in Section 3 below can be a useful framework to help with that thinking.

Section summary

- **Recognising trauma reactions:** Being able to spot typical trauma reactions can help you identify when a child or young person is struggling.
- **Internal and external:** Trauma affects children and young people internally, but they may not be able or wish to tell you about any difficulties so you will want to look for what they are showing externally.
- **Typical trauma reactions:** Common trauma reactions might include difficulties with intrusive thoughts and memories, avoiding reminders and being on a high state of alert.
- **Range of difficulties:** Traumatic experiences can result in anxious feelings, being low or easily overwhelmed by strong emotions of anger or distress. Some with more extreme responses might be at risk of self-harm or suicidal thinking or behaviour.
- **Triggers:** Everyday things they hear, see, smells, touch or taste may trigger distressing memories.
- **Considered staff responses:** It is important to help staff consider a child or young person's potential trauma history and the meaning behind their behaviour and reactions to their environment so they can be responded to and supported in sensitive and helpful ways.





Section 3

Responding to trauma in children & young people seeking asylum

Educational communities offer so much more than education for children and young people seeking asylum. Nurseries, schools, further education college settings also provide a place of socialisation, integration and rehabilitation⁸. Whilst there will no doubt be pressure to measure and be measured by attainment and progress, this is unlikely to be a useful place to start with children and young people affected by traumatic events.

Struggling with the impact of traumatic experiences can impact a young person's capacity to learn. By prioritising wellbeing ahead of learning, children and young people will eventually be better placed to engage in their education. For an education professional, this will mean responding to children and young people and the potential impact of trauma on them before expecting too much of them academically.

You might feel helpless when faced with a child or young person who has experienced terrifying and distressing events. You might fear saying the 'wrong thing' and somehow making it worse. You may wonder if they need specialist support and feel that you are not specialist enough to do anything helpful. However, you can create an environment that promotes recovery from trauma by using five evidence informed principles⁹ helping children and young people to feel:

- **safe**
- **calm**
- **connected**
- **in control**
- **hopeful**



"Sometimes I see their big smiles, but their eyes look so sad - you can only imagine what they've seen."

— **Teacher**

Helping children and young people to feel safe

Even though every educational setting in the UK should be a physically safe place for a child or young person to be in, you need them to actually feel safe. Traumatic experiences might shatter the assumptions that most children and young people have about the world being safe enough. Feeling unsafe at school is associated with higher symptoms of post-traumatic stress disorder (PTSD) symptoms¹⁰. What each child and young person who is seeking refuge or asylum needs might be quite individual, but here are some ideas for you to help establish a sense of safety using relationships, language, curriculum, routine, the physical environment and your admissions process.

Relationships

A key part of feeling safe (for all of us) is the ability to trust others. This is closely related to the principle described later of helping children and young people feel connected. Some children and young people who experienced trauma at the hands of adults, particularly those in positions of authority, might not readily feel able to trust new adults. Their current experiences of the legal asylum process might add to their uncertainty about professionals. Although it may take a while to foster a feeling of safety in new relationships, you can start with helping them feel seen, known and valued.

This might include:

Knowing their chosen name and how to pronounce it.

Making them feel significant:
"It's good to see you."

Finding out a bit about them – if they're okay to tell you. This might include asking about their likes, dislikes and interests. They are more than their status, background and experiences.

Checking in with them:
"How are you doing today?"

Following up about something they've recently done or *"How did your cinema trip go?"*

If you know about something challenging happening in their lives you could try:
"I wonder how you've been since ...?"

Noticing when they return after being absent:
"It's good to have you back in nursery / class."

All of this will equally apply to the adult members of the family too as they will benefit from any relationship building opportunities that build a sense of safety and belonging for them. This might be easier to achieve for children in early years or primary school settings, but there are sometimes fewer opportunities to do this in secondary or FE communities so you will need to think creatively.

Whilst being able to communicate verbally in English certainly makes things more straightforward, some children and young people will only be in the early stages of learning English. You can still communicate that you have 'seen' someone through your non-verbal manner such as the way you acknowledge them with a smile, nod or high-five.

Safe trusted relationships can flourish if they are developed within a safe and supportive environment. However, not everyone has a positive view about those seeking asylum. It may be necessary to make active use of your anti-bullying and anti-racism policies and practices to address discriminatory attitudes including hostility towards those seeking asylum. Children and young people will feel safer if they know that they are taken seriously and incidents are dealt with appropriately. For more support you could look at [Schools of Sanctuary](#) or [Anna Freud anti-racism resources](#).



"I really like that my teachers actually see me and know me. They even know what bus I take."

— **Young person**



"My teacher tries to translate the key parts of the lesson using his iPad. It doesn't always work, but that makes us both laugh."

— **Young person**

Language

It can be hard for children and young people to feel safe if they cannot communicate effectively in their environment. As well as giving them opportunities to learn English, they will really appreciate your efforts to translate things. This doesn't have to be an entire translated science textbook (although that would be fantastic). It might be a simple translation on a phone or tablet enabling you to ask how someone is feeling or doing that day.

"We give our newly arrived children a fan with key words/ symbols so they can immediately communicate basic needs to us- needing the toilet, feeling unwell, being thirsty etc."

— **ESOL teacher**

Remember that some children and young people may not be literate in their first language so you may need to use a spoken rather than written translation. Children and young people have told us that they really like it when staff make an effort, even if it's not always successful, as it shows them that they are cared for and valued.

Whilst you are unlikely to have access to an interpreter full time, there will be times when it is very important to make sure you use one, if the child, young person or their caregiver is not fluent in English. Such times might include when important information needs to be conveyed or conversations about their health, mental wellbeing and progress are being discussed. You will need to consider regional dialects and check in with the young person or caregiver before accessing an interpreter. It is not appropriate to ask children to interpret for their parents or caregivers at these times.

Having to communicate in English all day is exhausting and a lot of pressure. Look for opportunities for them to be able to use their first language- formally and informally. First language use supports learning a second language.

Familiarity and routine

Children and young people feel safe when there is some certainty, stability and predictability in their lives. This can be difficult to achieve if they don't yet have housing, financial or legal stability. Some separated

children and young people might also be looked after by unfamiliar adults. Educational communities can provide some much-needed stability with their routines and expectations but this will have to be communicated appropriately.

You could:

Provide information about the timetable, using visual symbols and translated words where appropriate.

Show them key places in the building and maybe give them an initial tour and a map to use.

Provide them with the necessary equipment and uniform if they are not able to buy this themselves. Some families may be trying to live on unbelievably small amounts of money.

Help them understand expectations about lessons, break times and behaviour, and respond with compassion when they don't quite get it right. It can be useful to keep in mind that some young people may not know that adults in school won't hit them if they make a mistake as they may have experienced this previously in other settings. They may also be unfamiliar more broadly with your routines and educational culture and expectations.

Find them a peer or buddy who can support all of this for the first few weeks. Sometimes this works even better if they can be paired with someone who speaks the same language.

Plan and forewarn them about changes to the school day (where possible). Unpredictable and sudden changes might be harder to cope with.

Some children and young people may never have had access to any educational environment before so will benefit from time and care to help them settle.



"I was really scared to ask to use the toilet in front of boys. This is not something you would do in my culture. My teacher gave me a toilet pass so I didn't need to say anything. This made it easier."

— **Young person**

Curriculum

The curriculum may present both opportunities and challenges. Subjects such as RSHE (Relationships, social, health education) might provide opportunities to focus on managing feelings which can be useful for everyone. RSHE can also allow you to make your ethos about wellbeing really clear. It is likely that topics in a range of subject areas might be triggering for a child or young person struggling with trauma following war, conflict and persecution. When you are aware of this, it can be really helpful to let the child or young person know and make a plan with them. It may involve you both agreeing a signal if they are feeling overwhelmed, having another supportive adult available and sometimes even agreeing together that this activity would be too hard right now. There will be times when you aren't aware that something would be triggering until the child or young person is already struggling. You can still give a warm and supportive response and offer help within your staff team. For example, young people seeking asylum may find it very hard to share their thoughts and feelings about their sexuality or gender as this may be heavily stigmatised in their country of origin and they may fear persecution. Where LGBTQIA+ issues are discussed in your educational community, such as in RSHE, along with your usual sensitive and non-judgmental approach you might want to particularly be mindful of how they are coping with these conversations.

Physical environment

Psychological safety may also be related to the physical environment. Some children and young people will feel safer in rooms that have plenty of light and clear exits so they know how they can get out. Smaller rooms might trigger memories of being trapped or imprisoned. You of course, can't redesign your entire physical environment but might want to keep these things in mind, particularly if you notice they are finding it difficult to settle.

You could try asking:

- Does the room feel safe to you?
- Is there a good place for you to sit?
- Is there someone it would help to sit with?

A safe start: when a child or young person first starts at your setting

There is a lot to think about when a child or young person first joins your educational community. All the ideas we have outlined above will be helpful, but we've summarised some of the main ones here to help this process feel safer for children, young people and their families. (See also [The Bell Foundation Prepare Alert Welcome Support \[PAWS\] model resources.](#))

When a new child or young person starts

Planning ahead

Raise staff awareness of the needs of children and young people seeking asylum through a staff meeting or training session. Include all staff, particularly office/reception staff who will often have a key role as the first point of contact with families. You might start with the NHS Education for Scotland animation [Sowing Seeds Trauma informed practice for anyone working with children and young people.](#)

Have a designated member of staff who champions the needs of those seeking asylum. This staff member might help keep staff aware and informed of current events that might impact on children and families who have experienced war and conflict - [Refugee Council briefing](#)

Include the senior mental health lead (SMHL) and designated safeguarding lead (DSL) in discussions to consider the needs of those seeking asylum.

Consider your ESOL (English for speakers of other languages) provision and how you can best use staff and resources to support a new child or young person. Could this be scheduled when other children or young people are learning another foreign language? Try to avoid children and young people being taken out of a lesson for ESOL work if this clashes with something they really enjoy.

Admissions process

Your first contact with the family or caregivers can set the tone for how safe they feel with you, so spend time thinking about how the admissions process is managed.

Review your admissions process with office staff to check whether it feels appropriate for children and young people seeking asylum. You may want the support of your ESOL or pastoral lead with this. You will want to capture information that helps you know how best to support their child and how to signpost them to other organisations (such as British Red Cross) that have expertise in helping those seeking asylum. But you will want to avoid putting parents or caregivers under pressure or asking intrusive questions. Think about how you can word questions openly and sensitively and follow the parent or caregiver's lead if you can see that it is difficult for them. The International Rescue Committee have a guidance document for an initial meeting.

Staff leading these conversations will want to feel confident to ask difficult questions and have the emotional capacity to listen to potentially difficult information. These conversations might happen over a period of time rather than on one occasion and you may well need to arrange an interpreter.

Possible questions:

- *Can I ask you some questions to help me help your child?*
- *Did you have to leave your country because it wasn't safe?*
- *Would you feel comfortable telling me about your legal status? Are you seeking asylum? Do you have leave to remain in the UK? Is this time limited?*

Arrange for the child or young person to visit your community ahead of their first day. Give them a short tour and point out key areas- their classroom, where to put their bag, the toilets, where to eat lunch. Education may have looked quite different in their country of origin and some may have had no previous formal education.

Ensure they have the right equipment, uniform and travel passes and offer to support with this as needed.

First day

Consider offering a part-time timetable initially if they might be overwhelmed at managing for the whole day.

Allocate a buddy/peer or two to support the child or young person for their first few days. Even better if it is someone who speaks the same language. (See International Red Cross Being a Buddy resources).

Provide some basic language tools with signs/symbols so they can at least communicate their basic needs with you.

Give them a map and timetable. For younger children this might be a simple visual timetable or a 'now and next' board.

Schedule a check in with child or young person and their family or caregivers to see how their first day was.

First few weeks

Consider undertaking an informal language assessment to work out their level of English- but avoid anything that might feel overwhelming for them.

Check in again with child or young person and parents or caregivers.

Offer to put them in touch with other parents or caregivers with lived refugee experience or local organisations.

Offer to help them connect with the parents or caregivers of children in the same year group.

Helping children and young people to feel calm

Experiences of trauma can leave a child or young person constantly alert to potential danger or threat. They may quite quickly become overwhelmed by environmental triggers and reminders. When thinking about how you can help them feel calm you will want to consider ways of preventing distress as well as ways of responding to them becoming overwhelmed.

Calm environment

Ensure there is access to a base room and/or a safe space within a base room for a child or young person to use if they are feeling overwhelmed. This might include access to resources that help the child or young person to regulate, such as those drawn from the calming activities suggested below.

At Amina's nursery they set up a pop up tent with colourful cushions, soft toys and a blanket from home. Her key person would invite Amina to curl up on a bean bag in there when she noticed she was frightened or overwhelmed.

Consider whether your environment is culturally sensitive e.g. provide a safe and calm space to pray and to relax especially during Ramadan.

There may be a student support room or similar where children and young people can get support if they are struggling. Provide a poster with the names and photos of staff as well as details about when and how they can access this support.

Consider flexibility when grouping children and young people in sets/classes:

- **Can they be in a class** with other pupils who speak the same language?
- **Can their seating position place** them with peers who are supportive?
- **Would they benefit more** from a quieter, calmer class rather than one best suited to their current level of attainment? (For example, maybe from current performance a young person would be placed in a lower set for physics, however, a set with a quieter peer group might be better to help them feel settled, even if just in the short term.)

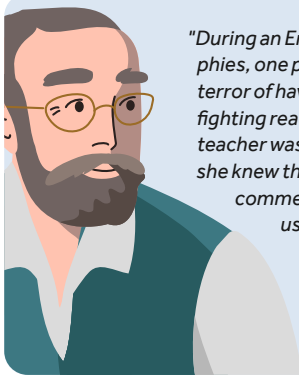
Khalil's teacher noticed that he spent all his time speaking Arabic and playing with another Arabic speaking child. She worried that this was getting in the way of learning English, making more friends, and feeling 'connected' to the wider school community. Her Educational Psychologist urged patience, and suggested she give Khalil a bit of time to find his feet and that having a friend who he could speak to was wonderful. The teacher found that as time went on, there would be other ways that she could start to help him to widen his circle of friends – a bit like having a secure attachment that allows you to explore and come back to base.

Calm communication

Building on your work using relationships to help children and young people feel safe, when internally they are struggling with the ongoing impact of trauma, the way you communicate with them is vital to helping them feel calm. Loud noises, shouting and cross faces might be particularly triggering to those who have experienced trauma and they may be really good at detecting anger even when others are not. Their experiences may have taught them just how important it is to notice threats quickly to keep them safe, and they may now be a little too good at it – they may see possible threats where they don't actually exist. And because noticing threats is about survival, it may not be that easy for them to unlearn those lessons. They may interpret mild frustration or irritation as potentially dangerous anger. Your face, body language, gesture, tone and words can all help to convey calm. Making a deliberate effort to speak in a quieter, calmer tone can be really helpful.

In a busy working day it can be hard to find time to communicate calmly and give traumatised children and young people a little bit extra. Sometimes it might be helpful to 'defer attention' by saying calmly, 'I really want to hear more about this. Right now I just need to set the rest of the class some work. Can we talk about it at break?'

You might find that images or stories of trauma appear as themes in their work. Responding to these calmly and with care, rather than showing that their experiences are too much for you will be important, even if they might be upsetting to see or read about.



"During an English lesson on autobiographies, one pupil wrote in detail about the terror of having to flee his home after the fighting reached his town. Although the teacher was supposed to assess his work she knew there was no way she could comment on spelling, grammar and use of language. Instead she wrote 'Thank you for being so brave to share your story with me.'"
— Teacher

Calming techniques

At times, traumatised children and young people might suddenly feel overwhelmed and you may see their outbursts of tears, anger, fear. They may even dissociate – this is where they temporarily lose touch with the here and now, or they lose connection with their own bodies. They may also become absorbed in a difficult memory. Learning about what helps an individual feel calm and able to regulate their emotions will

be important, so consider having a range of things they can try out when they are calm so they can use them when they really need them. This is not about getting rid of their feelings, but more about finding ways to recognise and manage them when they feel strong or overwhelming. This might be done on an individual level with a staff member they are getting to know, or might be done as a class or group as the ideas can be helpful to other children in your setting.

These ideas are just that – ideas. Use your own, or even better, those of the child and young person. Things that draw on their interests and cultural practice can be really effective such as using prayer, drumming, traditional cultural music or their interests in swimming or superheroes. In trying these out with young people we have found it better not to 'gatekeep' by deciding what we think would be most age appropriate. Many young people have liked the playful activities and enjoyed having fun and finding out what works for them. Having had disrupted childhoods, play and creative activities might be really valuable:

In touch

Find things that feel nice to touch or hold. Maybe things that feel soothing and help bring you back to the here and now.

For example: playdough, lime, soft fabric, feathers, a squeeze ball, a smooth pebble.

Bubble breathing

Use a pot of bubbles. breathe slowly and steadily to create large bubbles. This can help make your breathing more steady and help your body feel calmer.

Mind travel

Build a picture in your mind of somewhere that feels calm and relaxing.

What can you see, hear, smell, touch and taste there? Who would be there with you? What would you be doing?

You could even draw a picture of your mind travel place to help you bring it to mind more easily.

Cool it

Drink a cup of cool water slowly through a straw.

Feelings Journal

Use a notepad to keep a journal of your thoughts and feelings.

Can you describe the feeling?

If it had a colour, what colour would it be?

Where do you feel it? If it were a type of weather, what would it be?

You could write in your first language, in English or you might fill it with drawings.

Choose what to share and what to keep private.

Nature

Get outside to feel the sun, wind or rain. Feel the air on your face or hands.

Mountains and valleys breathing

Calmly and slowly trace up and down each finger on your hand.

Breathe in as you trace up each finger.

Breathe out as you trace down each finger.

Move it

Do something physical that you enjoy.

For example: running, swimming, dancing, football, cricket

Music for my mind

Listen to a piece of music that feels calming or reminds you of a good memory.

You could make a playlist of the best tracks to help your emotions settle.

Tense and relax

Tense and relax different muscles in your body. Maybe start with your feet and move upwards.

Hold the muscles tight in one part of your body for ten seconds and then breathe out slowly as you relax them.

5 4 3 2 1

Try finding:

5 things you can see

4 things you can touch

3 things you can hear

2 things you can smell

1 thing you can taste

Reset meditation

Sit down and be quiet and still.

This might be at a time of prayer or following a short meditation, maybe using an app.

"Andrii... Andrii.... Hi, it's Ms Sandhu, I can see that you're having a really tough time just now, it's ok, I'm here with you, in your classroom with your friends, you're safe now, you can be calm, let's do that breathing we all practiced yesterday." — Teacher

You might also want to try out using an activity from above to briefly help the child or young person feel calmer and get ready to learn rather than expecting them to be able to settle straight away. Other times you might want to invite them to draw on an activity they are familiar with to help them if they are having a difficult moment. You could help them build a 'comfort box' to keep the resources or cards with activity ideas for in. Some young people might need an exit pass and a safe place to go to so they can have some space and privacy to use these ideas if they are overwhelmed. You can also support them with phrases such as 'it is safe here' and 'it's okay'.

You could even run a group where you help children and young people learn how to cope with the overwhelming feelings and distressing memories from their experiences of war and conflict ([Children and War UK](#) offer training for non-mental health workers in running a group programme called Teaching Recovery Techniques. [Mina Fazel's mental health toolbox](#) for those working with children and young people seeking asylum might also be useful).



"When I saw a message from school saying Eid Mubarak I was lost for words, I couldn't believe it, I felt at home." — Parent

Helping children and young people to feel connected

Connection is a key part of helping children and young people recover from trauma. By this we mean a meaningful, trusted connection rather than just having contact with others. Experiencing trauma can lead children and young people to withdraw and isolate themselves, and this is not going to support their recovery. Developing a sense of connection and belonging in the UK, although very important for wellbeing might also be an ongoing stressor. Acculturation is a word that describes the process as children and young people strive to fit in in their new country and community. This may bring additional tensions as some aspects of culture here may not align with the values and traditions of their family.

Connection with country of origin, faith and culture

As well as learning to settle and make connections in a new country that may be vastly different to the one the

child or young person left, keeping a connection with their country of origin might be helpful. Even though it may have been the location for traumatic events, many children and young people feel pride in their nation and community and welcome opportunities to tell you about and celebrate it. This also extends to having a continued connection with their faith and culture. Look for opportunities to learn about the festivals and celebrations that may be unfamiliar to you and find ways to include children and young people in this. Families have told us about the very significant value of being recognised. They won't expect you to know all about their culture and festivals but can tell if they're being treated with kindness and respect.



"My tutor sometimes remembers my festivals even when I'm not aware. The fact that she has bothered to find out and say something to me is really good." —Young person

Separated children may also be grieving for the loss of contact with their family members. They may be particularly at risk of isolation. Some may not even know where their loved ones are or if they are safe ([British Red Cross](#) offer an international family tracing service). Even those who live with family are however, likely to be separated from their wider support network of important people such as relatives and friends. Pets may also play a significant part in a child or young person's life and having to leave them behind may have been really difficult.



"When it was our Orthodox Easter celebration, we got our dinner ready and managed to Facetime my aunty back home so we could eat and share together." —Young person

Connection with staff

Making meaningful connections with adults is a key element for recovery following trauma. Connections might take a while to establish, particularly if their traumatic experiences were perpetrated by adults. The previous section about feeling safe offers some ideas for starting and building relationships. Children and young people have told us that it helps to know that adults in school care about them.

If you have built a trusted connection with a child or young person, they are more likely to be open about their thoughts, feelings and memories. You are well placed to listen; not to act as their therapist but to have supportive conversations with them. They may avoid giving details about their exact experiences because this might be too painful right now. But just being listened to can be helpful in itself as it gives children



"If I've been absent, my tutor always remembers and asks how I am when I return."

—Young person

and young people an experience of being validated and having their distress tolerated by others. Having such conversations can be hugely rewarding for the adult, but it will be important to be aware of the impact of this on you. (Please use section 5 on self-care for help with this).



"When my child was unwell I let the school know. The next day they rang to see if she was any better. It was so nice that they care about her." —Parent



When my student support manager takes a moment to listen to me, it is like they are giving me a gift, the gift of time.

— Young person

Conversations that build connection

Conversations are just one way of building relationships with children and young people. You won't want to jump straight into asking them about any traumatic experiences, unless they are already bringing them up, in which case some of the ideas below might help you feel more confident to respond to them. But as they settle in your educational community, you can use opportunities to get to know about:

- their interests
- their likes and dislikes
- their talents
- their dreams.

You might then ask them a little about their life now generally:

- who they're living with
- where they live
- what they do at the weekends
- how they get to nursery/school/college.

You might also gently ask about any family, friends or pets in their country of origin. Some of this might be sensitive for them to talk about, so look out for signs that they don't want to talk or need some comfort. Usually if children and young

people want to talk they will, and if they are unsure they probably won't, so as long as your approach is a gentle and doesn't feel like an instruction to talk, it's probably okay. Some of these conversations might occur as part of everyday life in your educational community. Others might need a bit more planning to think about a safe place and an appropriate time.

Over time, you will then be well placed to continue to have gentle conversations that help you understand more about any difficulties they may be having. We all have our own way of wording things, so don't feel that you need to use this as a precise script. These are just some ideas here to get you started, or to reassure you about your current approach. Your tone and manner will probably be more important than the exact words you use.

Conversation starters

- “ *I know that you had to leave your country because it wasn't safe. Is there anything you want me to know about that?*”
- “ *In your work I read about some difficult things that you have been through. Would you like me to know anything more about them?*”
- “ *Sometimes I notice that you look a bit worried/stressed/upset. Can we think about how we can best help you?*”
- “ *Are there things we can do here that help you to feel more calm/safer?*”

Responses when the child or young person shares something personal about their experiences:

- “ *Thank you for telling me about ... It helps me to learn more about you.*”
- “ *It took courage to tell me that. Thank you for trusting me.*”
- “ *It is understandable and normal to have really strong feelings about really difficult memories. It doesn't mean there is something 'wrong' with you, but it might be good to think together about what would help.*”

When a child or young person is reacting in ways that may be the result of traumatic experiences, you will want to respond gently and sensitively. If you just go out of your way to avoid their distress, it may commu-

nicate to them that it is too much for you and this may increase their sense of isolation.

Careful curiosity

“ I noticed that you seemed far away and distant in class. Can you tell me what you were thinking about? ”

“ It looked as though something upset you at lunch today. Can I ask you about that? ”

Some children and young people may be very private about their feelings and memories, but you can still let them know you care:

“ It’s good to see you. ”

“ Thank you for doing your homework. ”

“ You did well to speak up today. ”

“ I know you’ve got a lot going on right now. I’ll be thinking of you during the half term break. ”

Connection with peers

Having good relationships with peers is fundamental for the adjustment and wellbeing of children and young people seeking asylum. Experiences of discrimination, isolation and bullying can potentially compound previously traumatic experiences¹¹, so finding ways to support and foster effective peer relationships will be really important. Understandably connection with peers can be hindered by having limited spoken English, so look for activities that aren’t so reliant on this such as sport or creative activities.

Encourage the child or young person to teach their peers some words and phrases in their first language. You can support this by using a few words in their first language when you can in class, such as when taking the register.

Take an active anti-discrimination stance, advocating for those who have been affected by war, conflict and persecution. Not only will the children and young people seeking asylum benefit from a sense of safety but everyone in your community will know that discrimination is unacceptable, and racism will not be tolerated.

To help develop your inclusive approach, look for opportunities to inform those in your community about matters relating to migration in assemblies, charity events and special projects. As well as highlighting the challenges those seeking refuge often

face, seek to balance the narrative by celebrating positive refugee stories as part of your antiracism curriculum. Schools of Sanctuary have excellent resources to support with this.

If you can connect peers with others in your community who have experienced war and conflict then for some this can be really helpful. It can be even better if they can have contact with others from the same ethnic group. This might even help to reduce post-traumatic stress and depression symptoms¹². However, those who have experienced political or religious persecution may feel unsafe around families from the same group if they fear further discrimination from them. We can normalise these feelings and ask each family what they would prefer. If there are only one or two children and young people with this experience in your educational community, look to link them with community organisations or activities where they might meet others with migration experiences.



The teacher on the school gate always asks how we are, particularly if our country has been in the news. He carries his phone with him so that we can use it for translation if we need to. — Parent

Connection with your educational community

Young people and families seeking asylum have told us that they tend to find written communication easier so they can use online translation tools to aid understanding. Phone calls can often be more difficult to follow if they are not yet confident in English. But it is not always sufficient to send out a generic email. Checking in with the parent or caregiver’s understanding will be helpful.

Although written communication might be preferable from a translation perspective, look for opportunities for face-to-face contact wherever possible. This might include coffee mornings, invitations to join assemblies and visits to see what happens in class. You might also offer to support families to connect with other parents and caregivers.

When children and young people settle well and have a good sense of belonging in your community this can act as a buffer against some of their traumatic reactions. Being busy with lessons and peers offers a welcome distraction. Young people have told us that they find weekends and particularly holidays much harder. They feel more isolated and can struggle to cope with intrusive thoughts and memories as they have less to distract them.

Children and young people should have their own structure of adult support that may include their

parents, other relatives, foster carers, support worker or hostel staff. Building connections with these adults will further enhance the relationship with their child. Be mindful too of their own wellbeing and use your local network or helplines (e.g. [Barnados BOLOH helpline](#)) to make sure that the adults have sufficient support, so that they can be the best carers they can be for their child or young person. This can further protect their child from longer term difficulties.



It was really hard when I first went to college as I only had lessons 3 days per week. I had so much time alone and really struggled to cope with my feelings.

—Young person

Case Study by NEST

Nottingham Education Sanctuary Team, or NEST, as it is generally known, is an alternative education provision based in Nottingham City for 15-19-year-old refugees and Unaccompanied Asylum-Seeking Children. It was created in 2018 from a partnership with Nottingham City Local Authority and The University of Nottingham. At this time many newly arrived young people were struggling to find college places as these places filled up at the beginning of the academic year. NEST was established based on a range of research findings in relation to refugee education at Nottingham University. It was established with the key themes explored by Ravi Kohli of Safety, Belonging and Success.

After the success of the first two years, NEST found a new home as part of a larger local authority provision supporting other vulnerable young people in the city called the Hospital and Home Education Learning Centre (HHELC). Initially NEST had a limit of 20 students, however it has now been able to expand to 50 students per year. As part of a larger school it has been able to utilise the skills of other specialist staff, complimenting the original core curriculum of English, maths, ICT and PHSE, with subjects such as science, humanities, DT and study skills alongside a range of enrichment opportunities. The staff are able to utilise other skills that the students bring with them, and respond to their interests and capabilities, which enhances their feeling of belonging and value by recognising that they all have skills to offer. A specialist counselling provision has been established, which has helped to support the students' wellbeing.

At the core of the approach for NEST has been nurture. Students are welcomed and seen as

individuals. Most of the students have experienced acute trauma, with many continuing to be re-traumatised through reliving their experiences during the asylum process. Many have lost family and loved ones and are dealing with multiple bereavements. Symptoms such as disturbed sleep, headaches, flashbacks, memory loss and lack of concentration are common amongst students. Staff recognise when students are struggling and are able to acknowledge and support with an individual approach. Some may just need a quiet space, prayer time or someone to listen. A key learning for teachers has been that listening and empathising can be incredibly important. At the start, teachers often felt helpless and unable to provide solutions when listening to the struggles that students have endured. However, they learned that bearing witness to students, accepting and valuing them without prejudice or judgment and empathising with how they are feeling, had a profound and positive impact. Teachers feel able to share parts of themselves, which encourages students to share and be accepted for who they are. Fun is another important part of NEST as many of the students have missed parts of their childhood due to their experiences. By seeing the teachers being "a bit silly", students are given the message "it's okay to be you".

At NEST it is a collaborative approach between staff and students, where pupil voice is vital in shaping the curriculum and how rules and routines are put in place. Students are given opportunities to feedback about all aspects of NEST. Staff can't promise to make all the changes that are requested but it is important that students feel heard and understood so that they know why things are happening.

Communication with key agencies and stakeholders has been vital in ensuring the best support

for students. By making certain everyone is aware of what is happening for a student ensures they feel safe and supported. NEST staff will often interact with parents and carers, GPs, social workers, solicitors, CAMHS and housing providers. Although this may not be possible in a more mainstream provision, it has been part of the holistic approach at NEST, where students may have no one else to ask for support.

Many students have described NEST as a family; somewhere they feel they belong and are safe. The equality of the teacher-student relationship develops respect where the students feel important. This is key for those seeking asylum or with refugee status as they can often feel the most marginalised in society. Although working with the students has been emotionally challenging for staff at times, having access to supervision and peer

support has been recognised as an important aspect of support. Some staff have described positive outcomes for them personally, where they feel they value their own lives more, and gain huge satisfaction from working with such an inspiring group of young people - not seeing the students as victims, but seeing their growth in the face of their past and present challenges.

The impact of an environment where students feel welcomed, respected and understood has ultimately created an education provision where excellent academic outcomes naturally go hand in hand with a nurturing, therapeutic approach. Although establishing relationships and maintaining the principles NEST was built on has become more challenging as the provision has grown, the principles of safety, belonging and success through a nurturing and relational approach, remains the same.

Helping children and young people to feel in control

Traumatic events, particularly experiences of war and conflict can leave children and young people feeling that their world is out of control. Understandably they might feel that they have little control over their own lives and what happens to them. This can shatter any confidence they had in their ability to influence what happens. Sometimes caring adults can inadvertently compound this by doing everything for them, adding to feelings of powerless and uselessness. While it is really important to consider the potential risks, many of these children and young people will have developed significant resilience, resourcefulness and independence, perhaps more so than their UK peers. This doesn't mean we should dismiss their needs as children and young people, but we can look for opportunities to help develop their sense of agency, and control they have over their lives.

Of course, there are limits to what they can and cannot choose to do, but look for opportunities to offer choices, involve them in decisions and actively engage them in aspects of their lives to boost their confidence and sense of being capable.



My math's teacher sometimes lets me use the methods I know from my school in my home country rather than insisting I do it the UK way.

— Young person

This might include giving choices over:

- **lessons** or activities to engage in
- **which language** to use and when
- **when to have support** with learning and when to work independently
- **what to share** and what to keep private
- **where they can spend break and lunch times**, if they need a quieter space.

You might also look to involve them in decision making by:

- **making sure** they are included in conversations and meetings and given time to express their views on decisions about them
- **helping them to choose** exam subjects that are not determined by their current level of English
- **making sure** discussions about referrals for support include the child or young person

- **looking to include representation** from those seeking refuge or asylum on your school council/ or student voice
- **ensuring they are giving informed consent** to participate in projects and really understand what it will involve.



My teachers supported me with my GCSE options, even finding out if I could take Arabic GCSE using my first language. — Young person

We actively sought representation from parents with refugee experience on our governing body.

— **Headteacher**

And seek to build their confidence by:

- **giving them activities** that draw on their strengths and give them ways to feel successful
- **acknowledging their effort** not just their results
- **inviting them to share** their first language expertise with their class
- **inviting them to share** and express important aspects of their cultural heritage
- **placing them in a set** according to their ability not their level of English.

At nursery we all learnt a song from Amina's Afghan community.

Amina beamed with pride every time we sang it.

— **Teacher**

Helping children and young people to feel hopeful

Having lived through traumatic experiences and now living with potential uncertainty about the future can make it hard to feel hopeful. As adults around a child or young person we will want to make sure that our efforts to be hopeful don't appear to dismiss their horror and distress. We can, however, play a valuable role in holding a sense of optimism about the future and a belief that things can get better.

This is not about trampling over their past and telling them to think positive things about the future rather than dwelling on the past. "Things, can only get better"

might make for a catchy tune or a political slogan, but it's unlikely to be helpful when working with children and young people. It is however possible to weave some positive thoughts about the future into their thinking. Asking about their hopes and helping them to start to imagine a future that is different from their past. Helping them to make specific and realistic plans can be helpful. Combining this with a trusted adult holding the hope for them sometimes can help to change their expectations of the future.

You will want to be mindful of the role that faith, religion and culture might play in the child, young person's or family's concept of hope.

As an educational community, actively supporting those affected by war and conflict is a significant statement of hope. Having a staff member who has responsibility to advocate for and ensure their needs are met is also powerful in expressing that children and young people who have experienced trauma are worth championing. Receiving positive affirmation from staff supports their emotional wellbeing and having a positive school experience enhances resilience¹³.

"We do not dwell on the past, the past kicks down our doors, comes rushing in, grabs us by the throat and starts punching us."

[Video about PTSD on Mind website](#) ▶

Young people have also told us that they find these things helpful:

- “ *My teacher believes in me even when I don't believe in myself.*”
- “ *When others talk about my future in a positive way, it helps me to imagine the future as a good thing.*”
- “ *I was helped to get work experience even though I didn't think anyone would offer me a placement as I have no contacts in this area.*”
- “ *The staff helped me with my college application, telling me that by the time I transferred to college my English would be good enough.*”
- “ *My teachers have hope that one day my country and community will be a peaceful place. This really helps because sometimes I can't see this.*”

Hope isn't always straightforward:

Even when a young person has hoped for and is successful in being granted leave to remain, their relief may co-occur with a sense of sadness and grief at not being able to return home or be reunited with family and loved ones.

Hope can be contagious:

Not only can you play a role in fostering a sense of hope in children and young people affected by war and conflict, but you might find that hope arises from the work you do with them. Those you support may also inspire hope in you as you witness their ability to adapt and grow in confidence and resilience.



Section summary

- **Principles for recovery:** You can create an environment that promotes recovery from trauma by using five evidence informed principles helping children and young people to feel safe, calm, connected, in control and hopeful.
- **Safe:** The whole world can feel unsafe after traumatic events. Consider how relationships, language, familiarity and routine, curriculum, the physical environment and having a safe start in your educational community can all contribute to helping children and young people beginning to feel safe.
- **Calm:** Traumatic experiences might leave children and young people seeking asylum feeling on edge and easily overwhelmed. You can use your environment and communication as well as developing regulation techniques that all help them feel calm.
- **Connected:** Struggling with trauma reactions can leave children and young people vulnerable to being isolated and this can then make their difficulties even harder. Look for ways to foster connection with their country of origin, faith and culture as well as develop trusting relationships with staff and peers and the wider educational community.
- **In control:** Experiences of war, conflict and persecution can leave children and young people without any sense of control or belief in their own abilities. Use opportunities to give them choices, involve them in decision making and seek to build their confidence.
- **Hopeful:** Having experienced traumatic events and living with ongoing uncertainty can make it hard to feel hopeful about the future. Holding the hope through believing in them and their potential can give a powerful message that the future can be better.



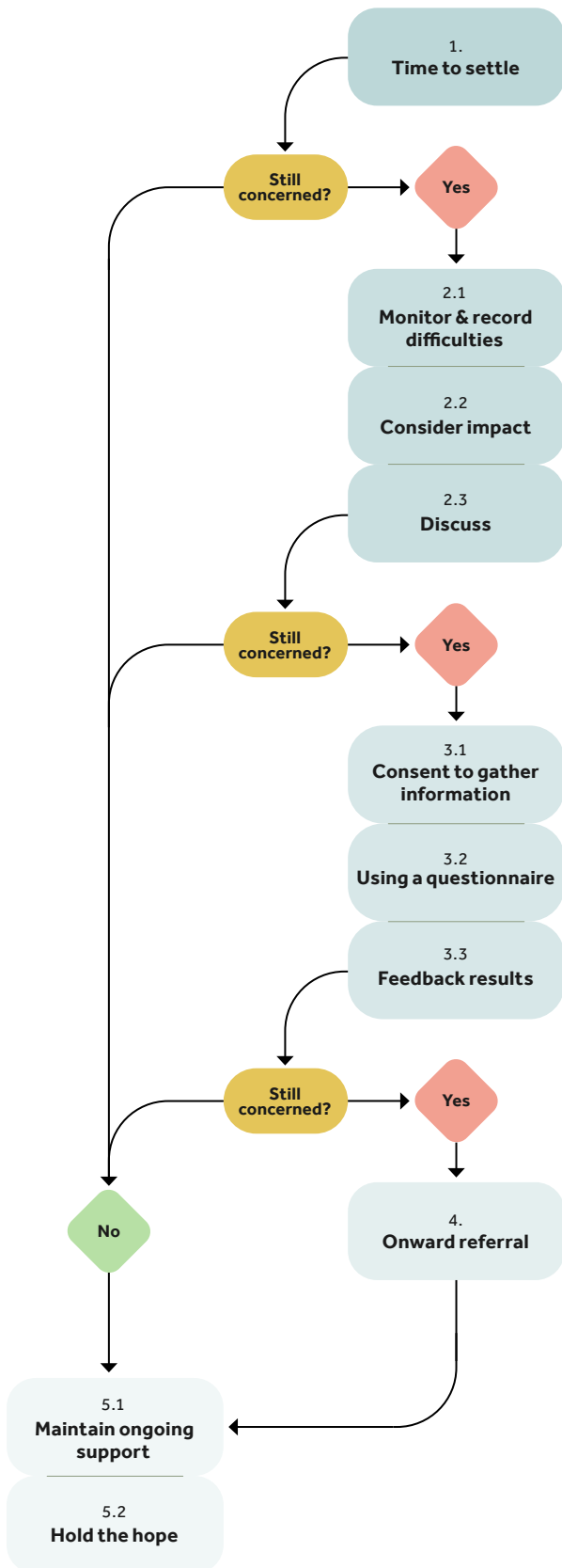
Section 4

When to seek specialist help

Trauma reactions are natural and understandable responses for children and young people who have experienced the trauma of war, conflict and persecution. Even though you can play an important role in their recovery through the environment you have created, sometimes extra help is needed.

This section outlines some ways of identifying when a child or young people may require more specialist support, should you continue to worry about their difficulties. These are very much suggestions, with no fixed 'shoulds' or 'musts'. How much you follow these ideas will not only depend on the need of the individual child or young person but also on the skills, capacity and experience you and your staff team have around mental health. Someone such as the designated safeguarding lead, mental health lead or staff member with a senior pastoral role might be best placed to lead on the suggestions outlined below alongside

support from work mental health professionals. Although rates of mental health difficulties (such as PTSD, depression and anxiety) are understandably higher in this population than in peers born and raised in the UK, not every child or young person seeking asylum will need a specialist psychological intervention. Working out if a young person might need additional support, and when and how to take those next steps isn't necessarily straightforward. The graphic on the following page isn't an exact process to be followed precisely but offers some ideas about how to explore the difficulties a child or young person might have. Each step is then outlined in detail below. Use it to guide you, along with your usual processes for supporting children and young people who may be at risk of enduring difficulties. Even when seeking specialist help, it's important to keep the relationship you have with them central to whatever you do.



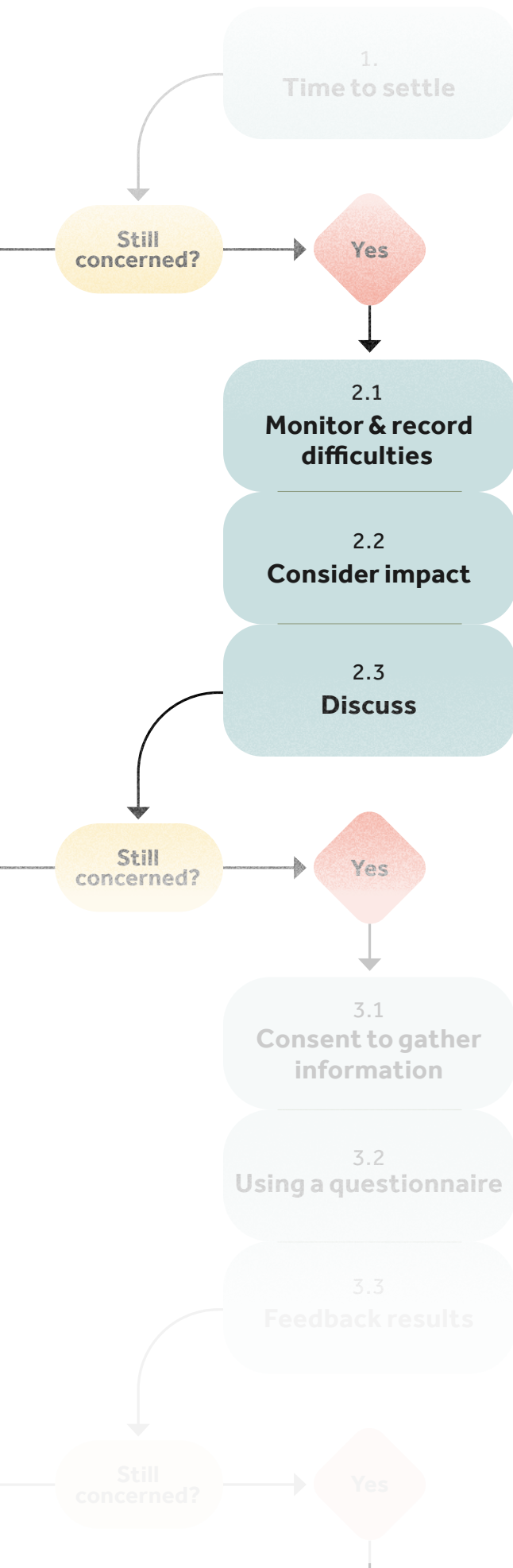
1. Time to settle

Give the child or young person time to settle in, with support from trusted adults drawing on the principles outlined in section 3. You're unlikely to get an accurate picture of their difficulties within the first few weeks or even month or so. With a supportive environment that helps them feel safe, calm, connected, in control and hopeful (as described in section 3) you will be maximising their chances of recovery from their traumatic experiences. You might want to get some advice from your local Educational Psychologist Service, Mental Health Support Teams or counselling service such as Place2Be even before the child or young person joins your educational community.

2.1 Monitor and record difficulties

If you start to notice things that make you concerned about a child or young person, don't feel that you need to jump straight in, unless there are risks or safeguarding concerns. Use your usual processes for observing, monitoring and recording concerns. You may also have other concerns about special educational needs, neurodiversity or learning difficulties. There is no straightforward process or strict order, but it is usually worth considering what role trauma might be playing, as you explore other aspects of their development but also don't assume the problems are all trauma related. Trauma responses can look like difficulties with engagement or attention and are likely to make it harder to learn.

If you can, gather observations from a range of adults so you can see the breadth of impact the difficulties are having across their education and social time. Remember that much of what occurs when a child or young person has been traumatised happens internally and for some, their outward reactions may be quite subtle.



2.2 Consider impact

After monitoring and gathering information for at least a few weeks consider whether the reactions you have noticed appear to be:

- severe
- persistent
- frequent
- broad
- enduring
- a change (this is likely to be difficult to monitor as you didn't know them before their traumatic experiences)
- putting them at risk
- having a significant impact on their day-to-day life.

If their difficulties suggest they are at significant risk of harm, discuss with your Designated Safeguarding Lead immediately and follow your setting's usual protocols.

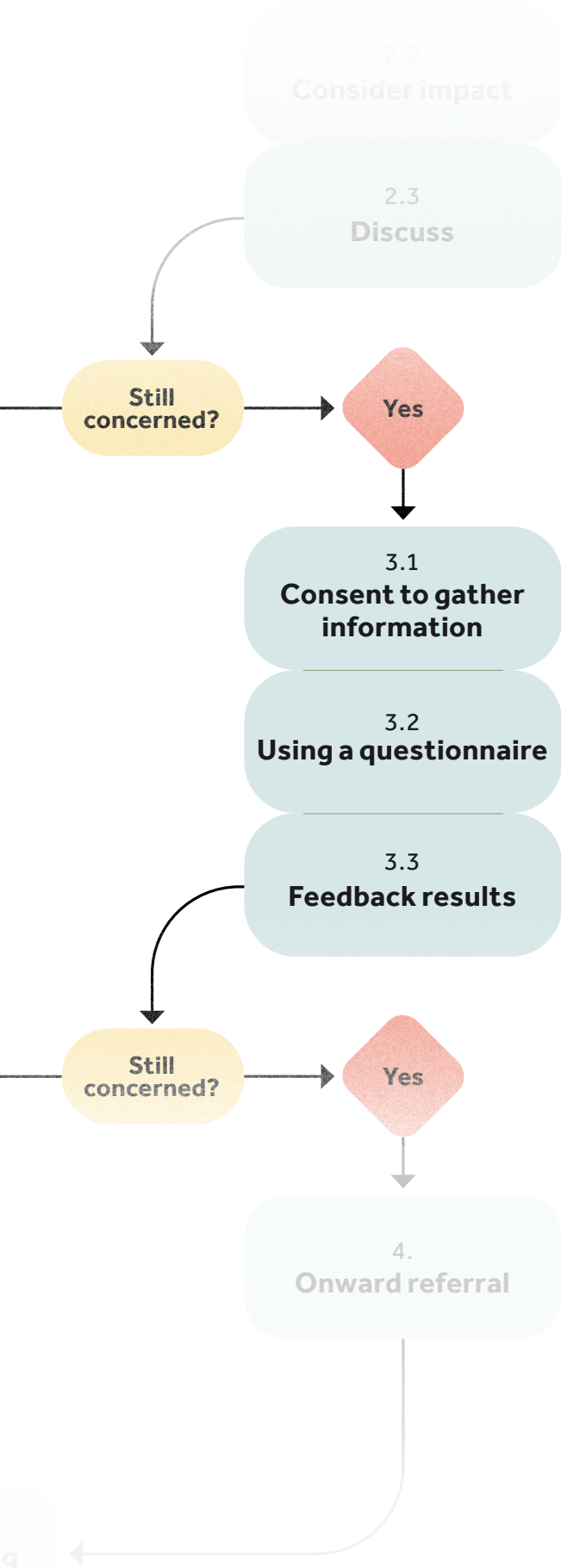
2.3 Discuss with the child or young person and their family or caregivers

Discuss what you have noticed with the child or young person and/or with their parent or caregiver as appropriate. These are important conversations, so if their English is not yet fluent enough, be sure to use an interpreter.

This might be an ongoing conversation rather than a one-off meeting. You are trying to build their trust, and this is unlikely to happen if the first conversation you have is about a problem or issue. Try to normalise what you are concerned about – this means making sure that you explain that what you have noticed is a natural response to very difficult experiences. Explain that sometimes if difficulties don't begin to reduce over time, children and young people can really benefit from having some additional help. Find out about any difficulties they have at home, including with their sleep or appetite and whether they have been able to talk about their traumatic experiences with anyone at home or in their trusted social network.

Seek to hear and understand their perspective, bearing in mind that trauma may not be a familiar concept. In some communities, such difficulties may be understood through a framework of faith and religion rather than mental health. They may feel uncomfortable even discussing these problems with you, as this might be a very different approach to that taken within their culture.

Monitor & record difficulties



3.1 Consent to gather information

If there is agreement about ongoing difficulties they are experiencing, seek consent to gather further information. One way of doing this is to use a questionnaire that helps explore the difficulties the child or young person is having as part of your discussion about next steps.

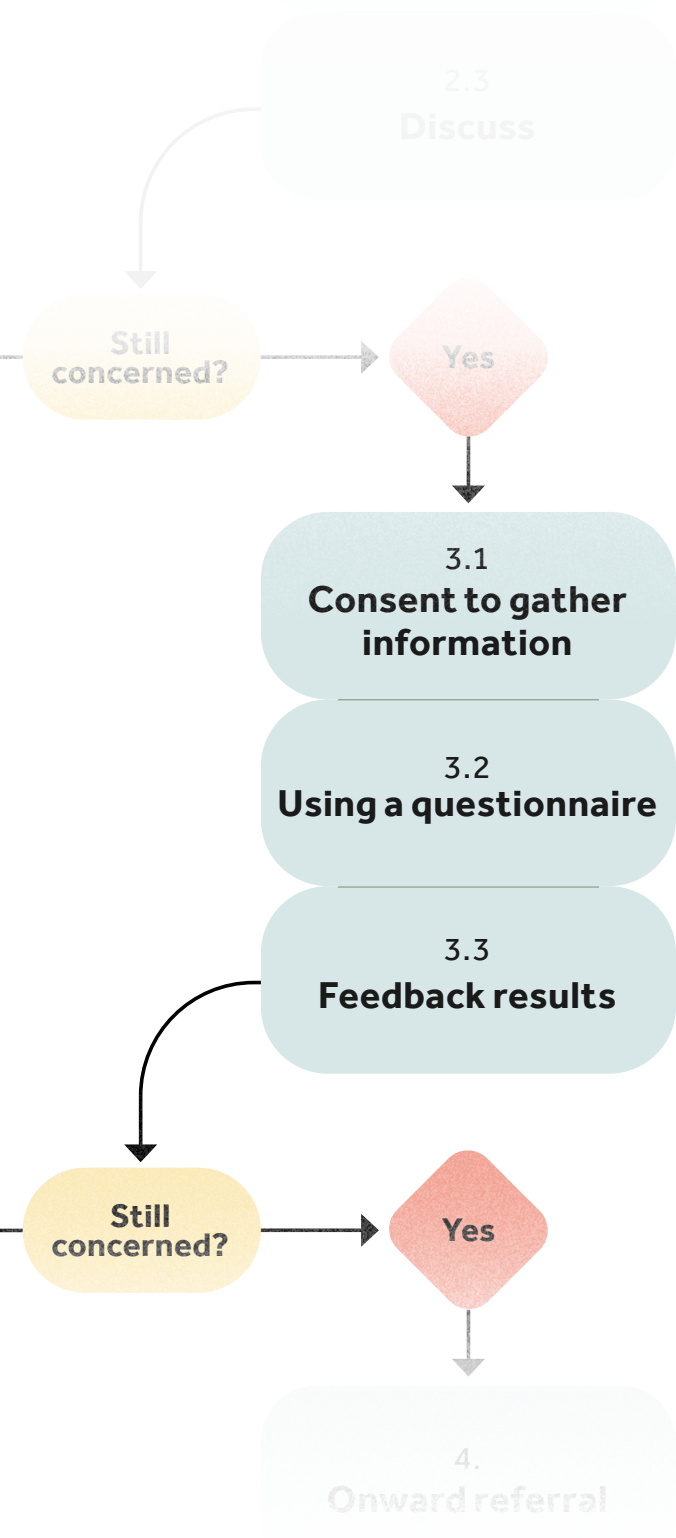
You're probably already familiar with children and young people with low mood and anxiety and you may have well established ways of noticing, assessing, collaborating and referring. You might use other questionnaires such as RCADS (Revised Child Anxiety and Depression Scale). Post-traumatic stress reactions may be less familiar to you, but your approach will generally be the same. And remember you don't need to work alone with this, use your usual pathways such as your Mental Health Support Teams (MHSTs), GP, Educational Psychologist Service, local authority specialist teaching service or NHS mental health service.

When asking the child/young person and parent/caregivers for consent to use a questionnaire it might be helpful to:

- Explain that using a questionnaire is one way of helping you work out together how hard it has been for them since their traumatic experiences - it doesn't give a label or diagnosis.
- Show them the questionnaire so they can see what it is before agreeing to it.
- Explain that you will share the results with them and talk about any next steps.
- Ask for their consent and tell them that they can change their mind at any time.

3.2 Using a questionnaire to explore trauma reactions

If you are concerned about some of the difficulties specific to trauma reactions in particular, such as intrusive thoughts or avoidance which are key features of PTSD, you could use the [CRIES-8 screening tool for young people aged between 8 to 18 years old](#). This questionnaire helps you gather information about their difficulties in a structured, contained and systematic way. The CRIES-8 is a simple set of 8 questions that helps you work out how much

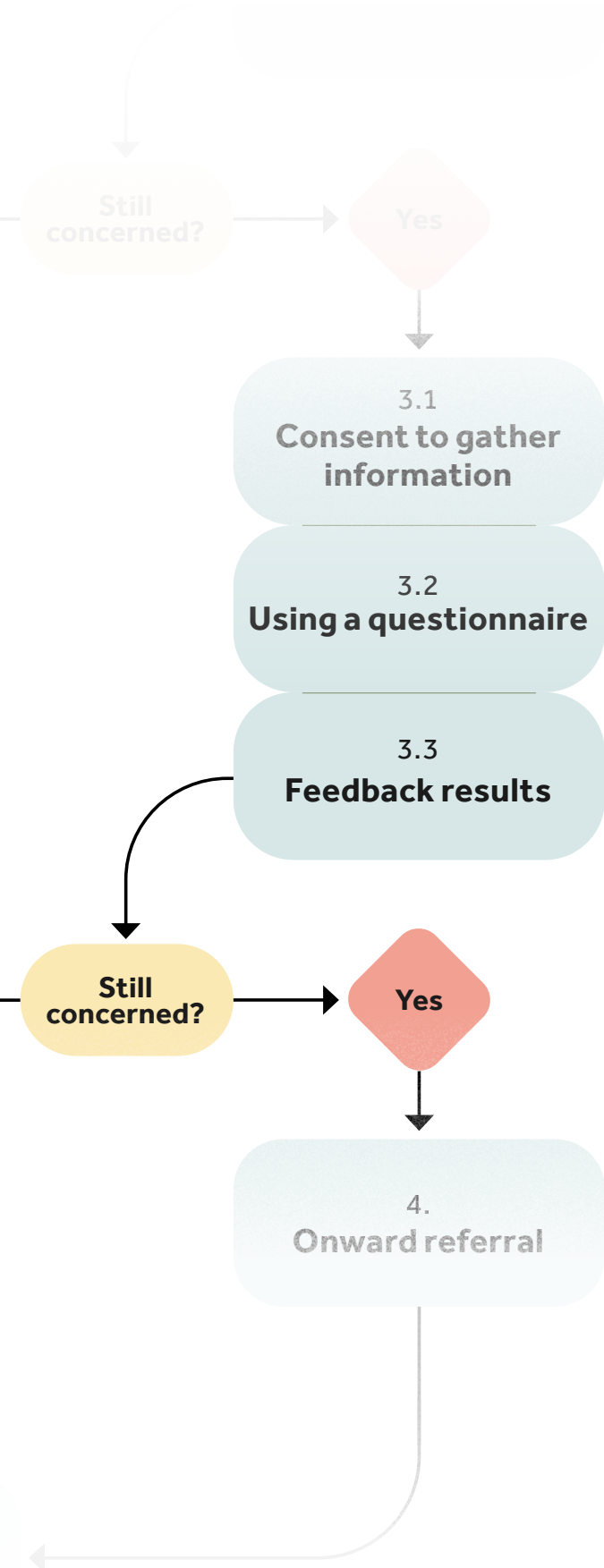


the intrusive thoughts and avoidance about their traumatic events are impacting them. It has been used internationally with children and young people affected by traumatic experiences including war and conflict and is available in a number of languages.

To work safely with a mental health questionnaire such as CRIES-8 we suggest that you consider:

- choosing a supporting adult that has a good relationship with the child or young person to work with them on completing the questionnaire
- whether the supporting adult has experience of using other questionnaires
- the optimal time to complete the questionnaire. Ideally ask the child/young person for their preference
- the child's cognitive development and whether they are likely to understand the questions
- language fluency and whether the English or another language version is more appropriate. Remember that even though translated versions are available, the child or young person may not be literate in their first language
- whether the emotional burden of completing a questionnaire right now might be too much if they are overwhelmed
- completing the measure collaboratively so you gain information about their responses to the questions and can support them as appropriate
- having a bit of time after they complete the questionnaire rather than rushing back to lessons. You might invite them to do a fun activity to help them feel calmer
- scoring their responses carefully and using the appropriate guidance. The Children and War guidance will help you understand what the CRIES-8 score means. A questionnaire is not accurate or precise like a blood test, however, colleagues in NHS mental health services are often familiar with the CRIES-8 and may use a score of 17+ as an indication that a referral for support with PTSD is likely to be appropriate.

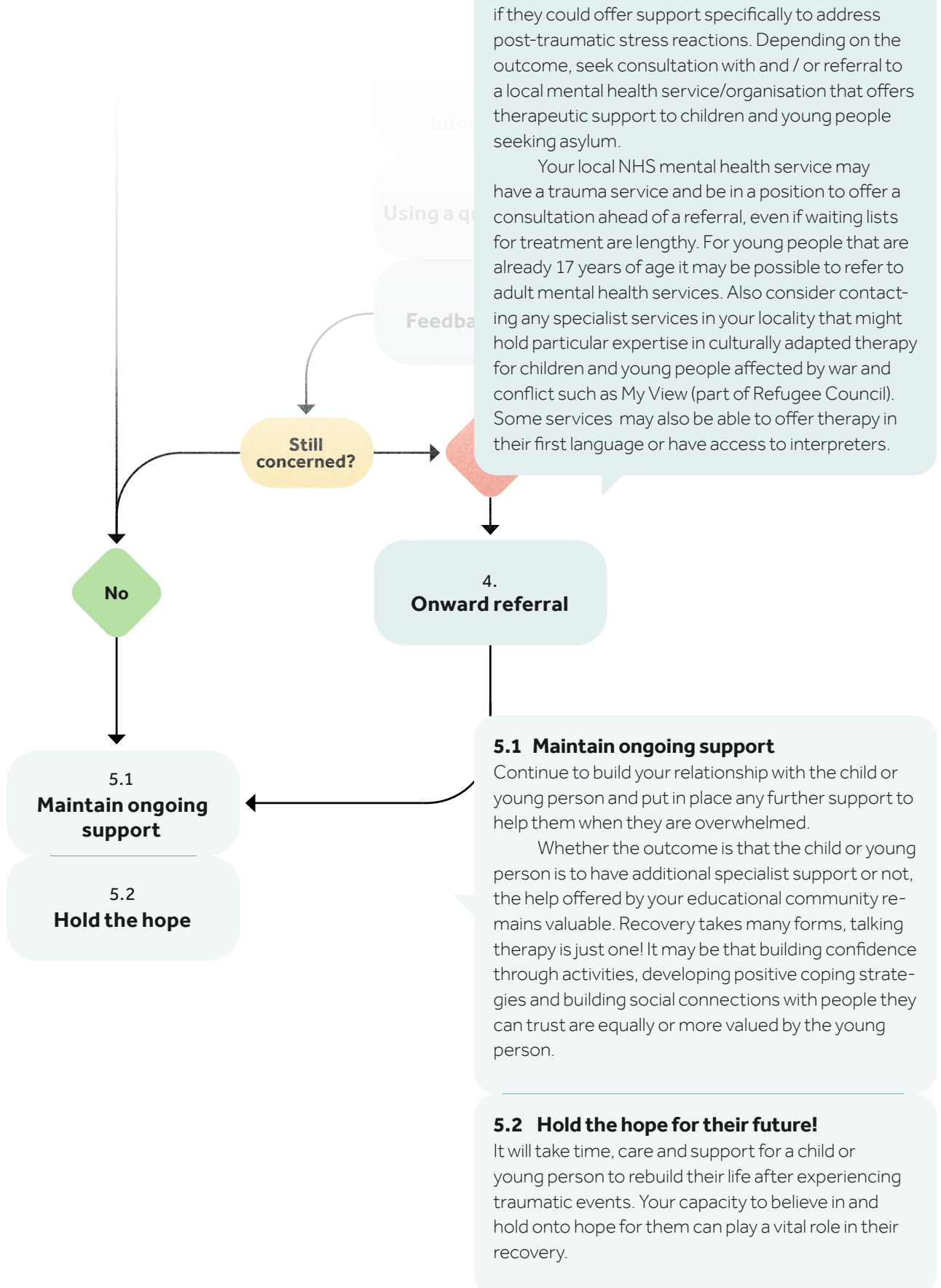
For those above 18, mental health professionals might use the PCL-5. Screening younger children usually requires a different approach, gathering information from adult caregivers. Use your local authority, early years advisors or NHS professionals for support with this.



3.3 Feedback results

Discuss the questionnaire with child/young person and/or parent/caregiver.

- Share the results from the questionnaire with the child/young person and/or parent/caregiver and explain what their score suggests. Remember you're not giving a diagnosis. If they score high on the CRIES-8 questionnaire then they might, or might not have PTSD. But it does indicate that they probably have significant difficulties. And if they are difficulties that fit with PTSD, then the good news is that there are some evidence based interventions for PTSD (such as 'trauma-focused CBT – see NICE Guidelines or the Matrix Guide for Scotland for further information). These are usually provided by a local NHS service and will require a referral.
- Find out whether they think this is an accurate reflection of their difficulties. If their score suggests a higher level of PTSD symptoms, think together about what your next steps might be and who else you could share the results with.
- Is it helpful for other members of staff to know so that they can understand and put plans in place for when the child or young person is struggling in class?
- If you have access to staff from a counselling or therapy service in your educational community you could discuss it with them.
- How does the child young person and /or family/caregiver feel about you sharing the results your educational psychology service or with your local mental health service in an initial consultation and potentially discuss making a referral?
- Take your time with these conversations so that the family really understand what you are suggesting. And take time to hear their perspective, particularly about any hesitance they may have about an onward referral. They may be involved with a number of statutory services and so be unsure about additional professional involvement.



4. Onward referral

If you have a counselling or therapy service available in your educational setting you could find out if they could offer support specifically to address post-traumatic stress reactions. Depending on the outcome, seek consultation with and / or referral to a local mental health service/organisation that offers therapeutic support to children and young people seeking asylum.

Your local NHS mental health service may have a trauma service and be in a position to offer a consultation ahead of a referral, even if waiting lists for treatment are lengthy. For young people that are already 17 years of age it may be possible to refer to adult mental health services. Also consider contacting any specialist services in your locality that might hold particular expertise in culturally adapted therapy for children and young people affected by war and conflict such as My View (part of Refugee Council). Some services may also be able to offer therapy in their first language or have access to interpreters.

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Still concerned?

4. Onward referral

5.1 Maintain ongoing support

5.2 Hold the hope

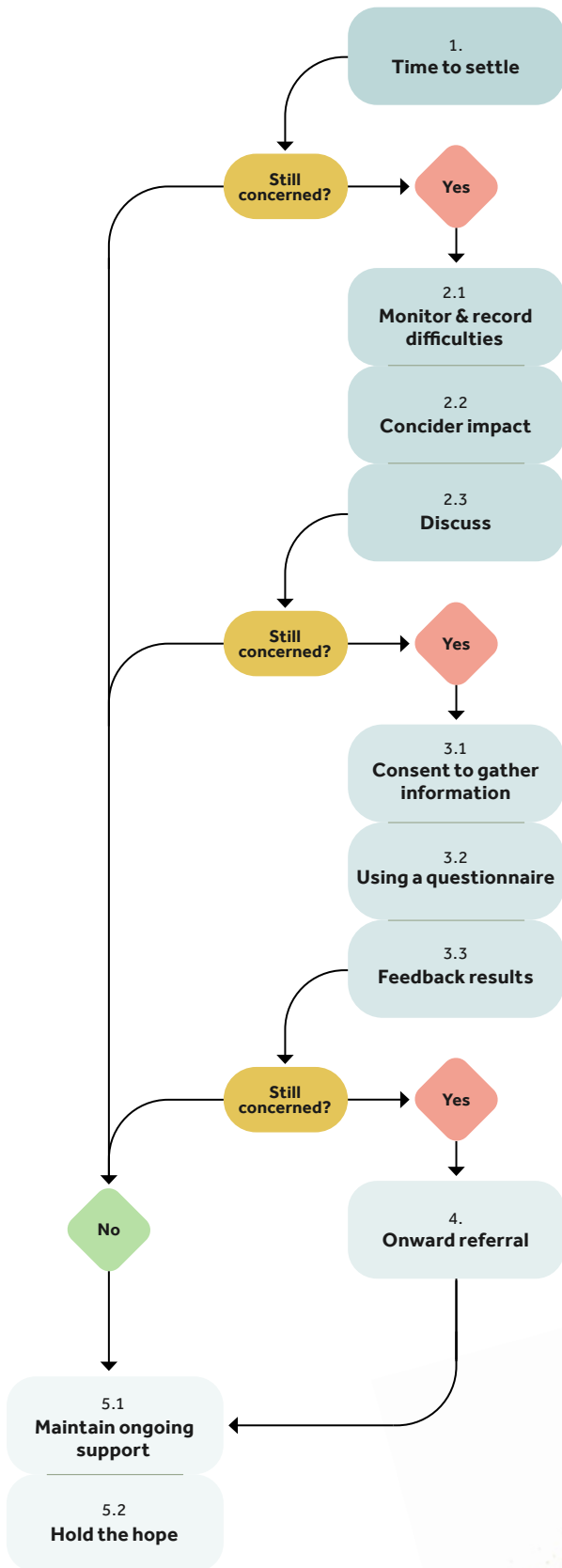
5.1 Maintain ongoing support

Continue to build your relationship with the child or young person and put in place any further support to help them when they are overwhelmed.

Whether the outcome is that the child or young person is to have additional specialist support or not, the help offered by your educational community remains valuable. Recovery takes many forms, talking therapy is just one! It may be that building confidence through activities, developing positive coping strategies and building social connections with people they can trust are equally or more valued by the young person.

5.2 Hold the hope for their future!

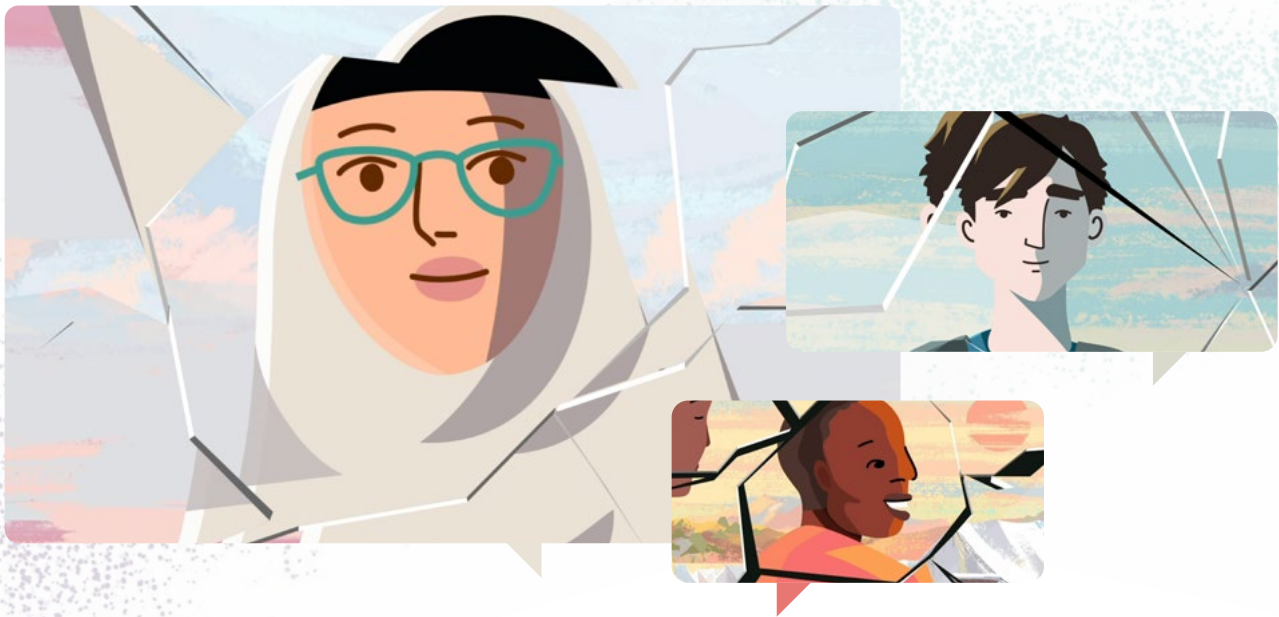
It will take time, care and support for a child or young person to rebuild their life after experiencing traumatic events. Your capacity to believe in and hold onto hope for them can play a vital role in their recovery.



Section summary

- **Consider impact:** Although not all children and young people seeking asylum will experience ongoing difficulties, for some the significant impact on their life may indicate that they might need specialist help.
- **A considered approach:** Taking a carefully considered approach to monitoring, gathering information and discussing with the young person and their caregivers can help you work out if and when a referral might be helpful.
- **Collaboration:** Working together with colleagues from mental health and education can help with using questionnaires, making sense of difficulties and working out what might be helpful.
- **Prioritise relationships:** Keep the relationship with the child or young person central to discussions and decision making about next steps.





Section 5

What about you?

“You cannot wipe the tears off another's face without getting your own hands wet.”

— Zulu proverb

You might be tempted to skip this section and only bother with the sections concerned with children and young people. Try not to. Self-care is a professional responsibility which is vital in helping these children and young people. But it is also something you are entitled to as a valued and valuable person. Research¹⁴ suggests that understanding more about wellbeing and risks of vicarious trauma can go some way to protect you from the longer-term negative impact of the work and make you more aware of when you might benefit from additional support. Have we convinced you to read on?

When working with children and young people seeking asylum you will likely be exposed to the stories of their traumatic experiences as they share something of their lives, their feelings and thoughts with you. You might also find out about their trauma from their responses in creative activities, look at their

art work and maybe even watch them interact with others. Learning about their lives is likely to affect you as a compassionate fellow human. You may feel emotionally moved by what the children and young people share and sometimes find yourself thinking about it in the hours and days to come, even when you are not at work. This is understandable, normal and probably makes you well suited to your role. Sometimes however, the impact is heavy and deep, it intrudes too often, and can have a longer term negative impact on you. Additionally, you may have your own experiences of trauma, these might be similar experiences to those you are hearing about or bring them to mind in ways that you may not have expected or anticipated.

In this section we will:

- consider how your educational community can create an environment that supports staff wellbeing and helps them recover
- explore what is normal wellbeing for you
- invite you to identify your support network
- outline some ideas if you find things become more difficult for you
- highlight some of the personal strengths and growth that can come from this work.

Culture of self-care

Being part of a team that has an explicit culture of self-care is an important foundation of your wellbeing at work. Senior leaders will be experienced at prioritising and valuing staff wellbeing so you can hopefully benefit from a positive supportive organisational culture. If this is not yet the case, a culture of self-care can be nurtured within smaller teams of like-minded workers who commit to doing what they can to support and promote the wellbeing of each other.

There are a range of approaches that might be used to support staff wellbeing including supervision, peer mentoring, wellbeing activities, reflective spaces and staff training on this topic. But for any of these things to be effective and create sustainable change the working environment also needs to be considered. Earlier on in the toolkit we introduced five principles that help create an environment for recovery for children and young people who have experienced traumatic events. These principles will also be useful to help you when you are working with traumatised children and young people. As a team, (or with selected peers) have a think about ways in which your working environment can help staff feel safe, calm, connected, in control and hopeful.

Wellbeing – What's normal for you?

We all have individual responses to our work lives. Some of us may frequently carry some of the emotional impact from our work home with us, whilst others may have clearer mental boundaries, such that work stays more at work and home stays more at home. How all this impacts on our wellbeing will be individual too. What good wellbeing looks like for one person, may be quite different for another. Being self-aware around what good wellbeing looks like for you can be a good place to start. You can then identify what your own warning signs are when things are slipping, and you are not doing so well.

Think about what good wellbeing looks like for you across different parts of your life. You could write some notes identifying how some of these things

look when you're doing okay e.g., your mood, sleep, appetite, physical activity, social activity, concentration, relationships, day-to-day life.

You could build this exercise into a team meeting and if you are all happy to, discuss some of your ideas together.

You are now better placed to notice when your wellbeing is affected. What might you notice?

- I'm not sleeping so well.
- I'm not bothered about socialising.
- I'm feeling overwhelmed by everyday tasks.

Know your limits

When we are working with children and young people who have significant needs it can be easy for our professional boundaries to slip. You may find you work longer and end up undertaking additional work in your drive to help. As a one off you might be able to manage this but working outside of your professional role in the longer term can impact your wellbeing and might compromise safe professional working. In spite of the frustration you might feel at the lack of resources and provision available to help children and young people, it is important to know your role, both the extent and the limits of it. Know what you can do and then do it as well as you can in the time you have available. Having boundaries in place doesn't mean placing a limit on your kindness but might protect your wellbeing and enable you to keep doing your role. As this toolkit has however illustrated, there are many ordinary human things you can do that will be powerful in supporting the recovery of children and young people.

But also consider when and where you need to pass things on. Working alongside other professionals to share the load will help you manage better in the longer term, and can also help your wider organisation reflect on an effective collective response. These challenges cannot rest on the shoulders of any one individual.



Your support network

Before you consider who is good to support you when your wellbeing is low, consider who it is that notices when you are slipping. What do they notice? Having people who really know you and can spot when you're not doing so well is really helpful; they may notice before you do. You might want to let them know how useful this is to you.

You can then start to identify your support network or back up team, identifying those who look out for you and play a supportive role when your wellbeing is negatively impacted. These might be colleagues that you work closely with and friends and family that you spend time with outside work.

An effective back up team will have people that play different supportive roles. Think about the roles those in your support team fill. Is there a 'cheerleader' who celebrates you? A 'coach' that motivates you? A buddy that is good to simply be around, even if you're not doing anything super special? Maybe your pet has a key role in giving you unconditional affection. You could even add yourself to your back up team along with a commitment that you will be a good friend to yourself.

Make a list of those who are in your back up team. Don't worry about how long or short your list is; quality is more important than quantity here. When you look at that list, if it doesn't meet your needs, think about if there are some small changes you can make. Do you need to make time to reconnect with important friends and family or look for opportunities to grow your network?

you have become very low then you might then find it really hard to find the motivation and energy to do those things.

You might want to start by identifying a few brief 'micro-holiday' activities that just give you a few minutes of respite from working with trauma. You can then draw on these when needed during your working day. Your 'micro-holiday' ideas might include: listening to one song that helps reset your emotions, looking out of the window at the sky for 30 seconds, applying some hand cream, using something sensory that focuses your attention on the here and now.

But you will also want to build in some self-care activities that really give you a break from thinking about your work. Effective strategies for our wellbeing are as individual as we each are. Choosing self-care strategies that work for you is important. If we were to provide a list below, maybe none of them would be quite right for you, so finding things that are in line with your values is often a better approach. This means finding self-care strategies that mean something to you and align with what is important to you.

So, if health is a priority value, then going to the gym might be great for your self-care. If activism is a value then volunteering with a local service might be enriching. If nature is important, then choosing activities that mean you can spend time outdoors might be really effective for you.

List just a handful of meaningful activities and plan for how you can (and will) fit them into your life.

A five-minute approach can be helpful here, so try giving something a go for 5 minutes. If after 5 minutes you want to stop, you can, but you might find that after 5 minutes you are happy to carry on.

When your wellbeing is low

There are different ways your wellbeing can be impacted from working with trauma. It might be that you feel more stressed or anxious, you might experience feeling low or depressed. Sometimes you can experience compassion fatigue, when you are exhausted by the emotional aspect of the work. This can make it difficult to engage fully with your work as you are 'saturated' by trauma and may find it difficult to connect with the children and young people you usually support. When this is in the short term, use your network of support and share with trusted colleagues. If the difficulties become severe or persistent you may benefit from accessing professional support from, for example Education Support. It may also be helpful to discuss this with your manager.

Self-care strategies for you

Research¹⁵ tells us that building self-care into our lives can help protect us from the risk of longer-term difficulties related to the work that we do. Some of you may be really good at building self-care into your daily lives, whereas some of you might find it harder to prioritise your own needs. You may tend to wait until your wellbeing is low before remembering the things that are good for you. The problem with this is that if



Vicarious trauma

Vicarious trauma (sometimes called secondary trauma) describes the uncommon but significant longer term negative impact on your own wellbeing from being exposed to the trauma of another. So rather than experiencing some trauma reactions over a few days or a few weeks, these reactions don't decrease in frequency for you. This would mean that you have trauma reactions, similar to those experienced by children and young people with PTSD. You might find things have changed and that you are now:

- **disrupted by intrusive thoughts** or images of the child's trauma
- **triggered by things** related to the child's trauma
- **occupied** trying NOT to think about their trauma because it feels too distressing
- **experiencing a change** in sleep patterns or bad dreams
- **easily startled**
- **experiencing overwhelming emotions** about things you would usually manage
- **more anxious** than normal
- **feeling low** or depressed
- **lacking motivation** or energy to do the things which usually give you pleasure or enjoyment
- **withdrawing from people** or places
- **finding** that the work has negatively coloured the beliefs you hold about the world.

These are normal responses in the short term but if they persist for more than a month or so, and mark a significant change for you, they might be becoming more problematic and be considered vicarious trauma.

Why does this happen?

There are some risk factors for developing vicarious trauma, the most significant one being the intensity of the trauma workload for you. So if most or all of your work is trauma related it is more likely that you may become overwhelmed by the level of exposure. You might also find that you are impacted heavily by the ongoing stressors for children and young people seeking asylum and this frustration can make it hard you to feel optimistic about their future.

You might also find that your own experience of trauma can be triggered when working with other people's traumatic experiences. Maybe you relate generally to traumatic experiences or maybe you have your own refugee experience and identify very closely with the children and young people you support.

If you relate to some of the reactions above, you might want to use a questionnaire or screening tool to gather more information about your reactions. One such tool is the [Secondary Traumatic Stress Scale](#) designed for professionals working with traumatised people. Think about when and where you want to fill this in and who you can discuss the results in an informal way. If your results suggest you are experiencing vicarious trauma that is impacting your life, then consider what steps you can take to help reduce the impact. This might include seeking professional support using your GP or NHS mental health services.

As well as drawing on the self-care strategies you identified earlier, that give you a break from your work, there are some other things that can help. In the same way that offering a child or young person some time and space to express the memories, thoughts and feelings about their trauma is known to be an effective and supportive strategy, the same applies for the supporting adults. Find a trusted colleague who can listen as you put the emotional distress you are carrying into words. Or try writing it down and getting it out of your head and on to a page. Or even try talking to your dog, who maybe provides you with comfort, is pretty good company and is often an excellent listener.

Vicarious resilience



"I have felt so lucky to have taught Khalil this year. His English has improved so much but he's also taught me SO much. I am amazed how he has adapted to a new country and culture. I couldn't do that – he inspires me!" — Teacher

Working with those affected by trauma is hard. It might have been part of what attracted you to your current role or might have become a more unexpected part of your work. However, there is also the possibility of personal growth as a result of this work. This is known as vicarious resilience¹⁶. Stories of resilience can inspire you to want to continue to do this work. Witnessing the adaptability and resourcefulness of children and young people can motivate you to reassess your own approaches to problem solving. Observing the hope which children and young people draw on to help them cope can positively influence your own perspective on life and the world around you. The benefits of vicarious resilience are seen to extend beyond your role or organisation to positively impact other areas of your life.

Have you experienced positive personal growth from the work and relationships you have with children and young people seeking asylum? In what ways has your work positively impacted you?

Make your own self-care plan

It can be useful to make some notes about how to support your own wellbeing and what to do if you're worried as outlined above. You might want to do this with your colleagues, or maybe you'd prefer to on your own. You could use our self-care plan supplement found later in this toolkit. (For other staff wellbeing ideas look at the [Anna Freud 5 Steps to Wellbeing for staff resources](#) or use [NHS Education for Scotland's wellbeing planning tool](#).)



Section summary

As an educational community

- Commit to embedding the five principles for recovery for staff as well as children and young people.
- Plan staff/team meetings that focus on wellbeing.
- Offer psychoeducation about trauma, vicarious trauma and vicarious resilience.
- Plan for how to limit or reduce trauma workload for team members whose work is heavily trauma based.
- Set up reflective spaces for staff.
- Set up peer mentoring for staff.
- Provide access to mental health services for affected staff.

Self-care for you

- Know 'your own normal' wellbeing.
- Identify your back up team.
- Identify effective self-care strategies and try to build them in as preventative tools.
- Recognise if your wellbeing is being affected severely and persistently.
- To help you process the traumatic stories or images that are on your mind, find someone to talk to about them.
- Consider using the [Secondary Trauma Stress Scale](#) if you are worried about your wellbeing
- Consider accessing specialist support if vicarious trauma reactions persist for over a month.
- Identify ways in which you have been positively impacted by working with children and young people seeking asylum.



Section 6

OTHER INFORMATION AND RESOURCES

Other UK Trauma Council resources about children and young people seeking asylum



For young people seeking asylum:
[animation and resource](#) →

See also UK Trauma Council resources



[Childhood Trauma and the Brain](#) →
[Critical Incidents in Educational Communities](#) →
[Childhood Trauma and PTSD](#) →
[Traumatic Bereavement](#) →

Other sources of support and information

[Barnardos BOLOH helpline Advice](#) → emotional, therapeutic and practical support for those seeking asylum.

[Bear us in Mind](#) → resources to provide adults with early intervention tools for children and young people affected by loss and bereavement following experiences of war and conflict. Resources are available in English, Ukrainian, Russian, Dari, Pashto and Arabic.

[Bell Foundation](#) → EAL information and resources for welcoming refugee and asylum seeking learners supporting children.

[British Red Cross | Afghanistan](#) → Information and support for people from Afghanistan settling into life in the UK. Resources translated into Dari and Pashto. Includes information on the [Red Cross' Family Tracing service](#) → videos about life in the UK, and information on how to contact [ARAP, the Afghan Relocation Scheme](#) →

[British Red Cross | Help for Ukrainian nationals](#) → Information and support for people from Ukraine, including the family migration visa and the Ukrainian family scheme. Download 'Advice for Ukrainians arriving in the UK' and 'How to talk to children about war' in Ukrainian.

[British Red Cross | Psychosocial support](#) → A range of resources, including TikTok videos to support people with psychological and emotional issues. Many are translated into multiple languages.

[Children and War UK](#) → Trains local adults in supporting children and young people affected by war and conflict using proven trauma recovery techniques.

Coram Children’s Legal Centre | Immigration, asylum and nationality → Legal casework advice, assistance, and legal representation as well as a range of free resources and online information on issues affecting children subject to immigration control.

Doing What Matters in Times of Stress (WHO.int) → A free stress management guide for coping with adversity. The guide aims to equip people with practical skills to help cope with stress. It has been translated into 19 languages, including Arabic, Chinese, Dari, Farsi, and French.

European Society for Traumatic Stress Studies | Helpful resources for mental help professionals and persons affected → A list of resources and with links.

Foundation 63 → evidence informed approaches for the care of unaccompanied refugee minors.

GOV.UK | Welcome: a guide for arrivals to the UK from Afghanistan on the locally employed staff relocation scheme → A guide for families arriving under the ex-gratia scheme (EGS) and the Afghan Relocations and Assistance Policy (ARAP). Dari and Pashto translations available.

International Rescue Committee → Work in over 40 countries supporting those affected by humanitarian crises. Information, resources and support.

Mental Health and Psycho Social Support network | Caring for Children through Conflict and Displacement → Resource translated in Ukrainian, Russian, Polish and German. Additional relevant resources translated in multiple languages in the resources section.

Mina Fazel’s Mental health toolbox → Video outlining a range of mental health therapy tools for children for refugee and asylum seeking children.

National Children’s Bureau | Supporting young people leaving care with insecure immigration status (PDF) → Research and evaluation paper on four projects delivered by five organisations working with young people leaving care with insecure immigration status. The report also looks at the impact of the pandemic on young people’s ability to access support and the projects’ ability to deliver.

Psychological Society of Ireland | Psychological First Aid for Refugee Care: Helpful Do’s and Don’ts (PDF) → A rapid response psychology tool for the general public to assist the response to Ukrainian refugees arriving in Ireland. Includes advice for children and adolescents.

Refugee Action → Refugee Action offers support and information to help people with the basic support they need to build safe, happy and productive lives in the UK.

Refugee Council | Children and young people → The Refugee Council offers support to all separated children who arrive alone in England. They provide asylum and welfare support, help trafficked children and those whose age has been disputed, as well as provide mental health therapy. They offer a range of free resources for practitioners and refugees on their website.

The Rucksack Project → A book and accompanying resources for children from Ukraine.

Schools of Sanctuary → Part of City of Sanctuary UK. Includes a range of resources and guidance on how to be accredited for your good practice in fostering a culture of welcome and inclusion.

Scottish Government | Age assessment: practice guidance → A trauma informed guide to age assessment. **Appendix 4: Trauma-informed Age Assessments** → covers applying the framework to the needs of separated asylum-seeking children.

UNHCR → guidance on working with refugee children struggling with stress and trauma.

UNODC resources → (From University of Manchester resources) in both written and audio formats to help caregivers looking after children through conflict and displacement and buffer from psychological harm (including multiple translations).

University of East London | Resources on refugee & asylum-seeking children → Mental health resources and guidelines on supporting asylum-seeking and refugee children.

University of Manchester | Information for adults looking after a child or children through conflict and displacement → Two page leaflet developed based on the experience of displaced Syrian parents translated into Ukrainian, Russian, English, German and Polish.

Selected reading

For adults supporting children and young people seeking asylum

A Practical Guide to Therapeutic Work with Asylum Seekers and Refugees by *Angelina Jalonen and Paul Cilia La Corte* — written for a range of professionals including therapists and teachers, this guide offers a person-centred framework for supporting refugees.

Helping your Child with Loss and Trauma by *David Trickey* — a self-help guide offering informed advice and step-by-step ideas for parents and other adults supporting children after experiences of loss and trauma.

Books for or about children or young people who are seeking asylum

Rucksack by *Di Redmond, Lilia Martynyuk and Prof. William Yule* — a story about a Ukrainian child losing his possessions and trying to replace his memories.

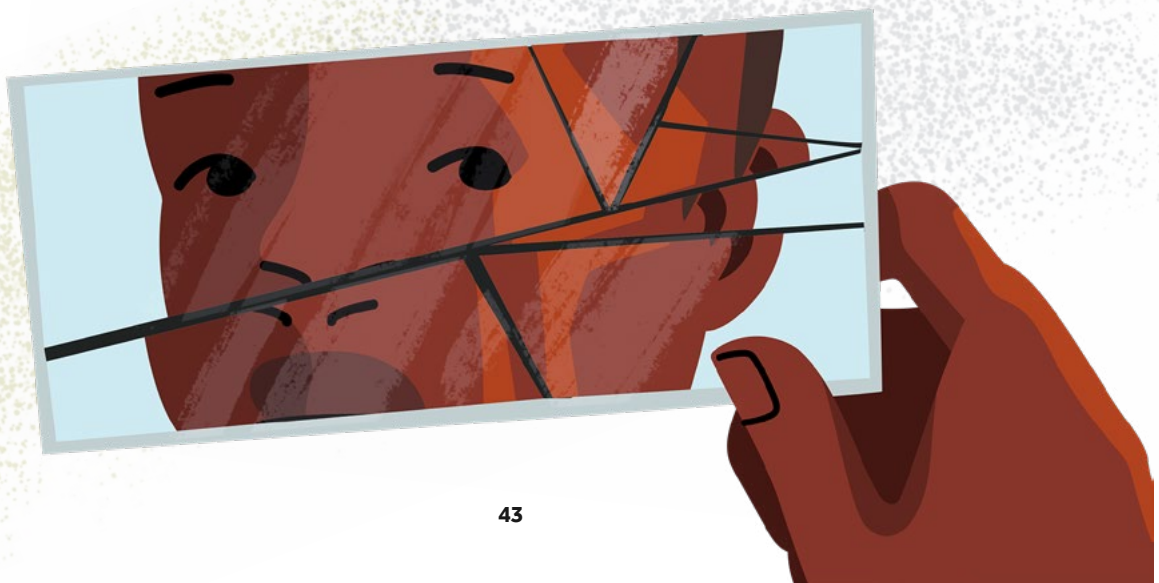
Lift the flap – Questions and answers about Refugees by *Katie Daynes, Ashe de Sousa and Oksana Drachkovska* — direct questions and thoughtful answers about living as a refugee (written with the Refugee Council).

A Refugee's Story and When the War came by *Beyond Words – books in pictures* — intended for people with learning disabilities.

When Stars are Scattered by *Victoria Jamieson, Omar Mohamed, Iman Geddy* — a graphic novel about two brothers living alone in a Kenyan refugee camp.

The Boy at the Back of the Class by *Onjali Rauf* — an award winning story about a refugee boy joining his new school.

For a comprehensive booklist see <http://arts.cityofsanctuary.org/resources/books> →



My self-care plan

Working with children and young people affected by trauma can be tough so it is vital to take care of your wellbeing.

Self awareness

Good wellbeing for me looks like:

Warning signs that my wellbeing is declining:

My limits

What is my role?

What can I pass on to others?

Who else can help?

Micro-holiday ideas

Values based self-care activities:

Vicarious resilience

In what ways has my work positively impacted me?

My support team

Who's there for me?

Things to note

Our wellbeing goes up and down from time to time. If you are worried about your wellbeing, use the people and self-care ideas you've identified above to help support you.

If your wellbeing remains low and is having a significant impact on your day-to-day life, consider getting additional help.

If it feels as though you may be experiencing vicarious trauma and having some of the same trauma reactions as those you work with, over a period of more than one month, consider seeking professional help.

Additional help

- Speak to managers / leaders in your organisation
- Ask your GP for advice about mental health support
- Use an employee assist service
- Contact Samaritans 116 123
- Contact Education Support:
www.educationsupport.org.uk
08000 562 561

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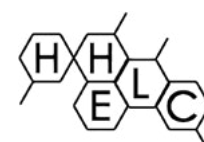
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