

Therapeutic Life Story Work

Stage One

This stage involves the careful preparation and gathering of historical information pertaining to the child; both pre-birth and post-birth history. Within this, relevant materials are gathered both written and physical including; social services records, birth certificates, photographs etc. This key piece of work gives a greater insight to the child's personal history and helps to identify significant people within the child's life of whom the practitioner will meet with, including family members, teachers, foster carers etc.

The worker will then carefully collate all information gathered from the child's past, exploring what it is helpful for the child to know, what is safe to share and what the child may want to know. This is then placed together in chronological order to form a detailed and factual narrative for the child.

By the collation of their personal histories it provides a holistic view of their life; their relationships, the immediate environment and the political environment in which they lived. This narrative then lends knowledge to the child's trauma and provides insight into the child's primary attachment which is how the child perceives themselves, others and the world around them. For many adopted and looked after children the 'unknown' of their life history can be extremely fragmented, confusing and often frightening, by taking the time to understand where the child has come from we can then begin to plan the therapeutic interventions needed for the next stage.

Stage Two

Within this stage the narrative is divided into session plans prior to the work commencing, typically over a 12 – 18 session period. The sessions will usually take place within a safe and confidential place once a fortnight and lasting no longer than an hour. Careful planning and preparation is used to provide the child with focused therapeutic interventions to help support the areas highlighted within the Stage One process.

When a Therapeutic Life Story approach is conducted with carefulness, thought and sensitivity, it offers a space to start rebuilding the pieces of their lives that have been discarded, lost or damaged. It offers a therapeutic space to enable children to have a voice within their world and have it respected and valued. The ability for them to do this alongside their carer is crucial in building upon their attachments, allowing them to share their trauma experiences in a safe way with a carer who is able to show acceptance to both the child's inner world and external reality.

Through this therapeutic process and using the attachment to their carer the child can develop further insight into the child's responses (developed in order to protect and keep themselves safe). Often this can present in a variety of behaviours and without knowledge of the child's history it is difficult to see the communication behind them. By supporting the child's awareness of this and the influences it has upon their present, there is an ability to change, move forward and develop a positive sense of self. The experience of this journey supports the therapeutic understanding and care provided for the child within their current placement.

Stage Three

The final stage is the Life Story Book, and is completed towards the conclusion of a child's journey. It comprises the factual information and the work completed by the child within Stage Two. The child is involved if they wish in selecting the design, fonts, and illustrations. This then helps the child to take ownership over their work and also aids understanding of their journey and its importance.

Following this, some carers choose to follow on from this life story book and explore the child's journey within their current placement. "Home" memory work enables carers to support their child to reflect, revisit and have current progress acknowledged at a time where it is most valuable and worthwhile. This stage utilises the relationships each child has with their carer's and is a space in which children can have progress, achievements and key events acknowledged and recorded and also enables exploration of difficulties and how they can be supported and moved forward.

The importance of the carer completing this work is valuable in promoting good attachment between child and carer through the acceptance of the highs and lows of a child's journey.

What kind of changes do you aim to achieve with Therapeutic Life Story Work?

Alongside what has been previously stated, one of the main aims of Therapeutic Life Story Work is to facilitate and promote the relationship between the child and the primary carer. By taking the time to understand the child's first attachment style and the messages they would have received through their early experiences, we can start to explore the effects this has upon the child's current relationships. We use focused therapeutic interventions to help both the child's and carer's awareness of this and how we support that going forward. Often the child will look to their carer for their responses, views and feelings in regards to the narrative of their personal history. Many will have questions such as:

- If they hear this about me, are they going to blame me and not care about me anymore?
- Do they think I'm bad?
- Can they bear what happened to me?
- Do they care what happened to me?
- What would they have done if they were there?
- Do you understand now? Do you understand why I do the things I do to protect myself?

The carer's presence alongside, remaining available, and holding the sense of safety and containment for the child through their TLS journey sends a powerful message to them. They can begin to internalise through this, that they are 'not bad' that they are not to blame and that there is hope.

How Does Therapeutic Life Story work for adopted and fostered children?

Ryan and Walker (2016) speaks about the fact that many looked after children who have been separated from their birth families and had multiple placement moves do not get the opportunity to know about their past, in the way that children who live with their birth families would.

'A child that is lost within her own family, community and culture is neuro-developmentally vulnerable. Without a life story, a child is adrift, disconnected and vulnerable.' Perry (2012:10)