

Case studies

Case study 1

BD is a young white British male with two younger brothers in the same foster placement. He has been in his foster placement with his two siblings for three years. BD and his siblings are in foster care because of the neglect they experienced when in the care of their parents and exposure to substance misuse, domestic abuse and a chaotic home environment.

BD was referred to CIC because he was being disruptive in the home through his behaviour with his female foster carer by pushing boundaries and also soiling. BD's foster carer was asking for guidance on how to manage his behaviour in the home and the soiling. Guidance was also being sought around transition of schools. BD was also talking about his birth mother and how he wanted to go back when he was 18 years old.

Intervention provided by CIC

- Professionals meeting.
- 3 weekly network support which involved all key professionals i.e. Foster carer, social worker VSK and school.
- 8 Sessions of direct work with BD and the Foster Carer in the home around attachment / bonding.

Outcomes

- BD engaged well with the sessions in the home between himself and the foster carer.
- His engagement with the sessions enabled him to talk about and name some of his feelings around his mother.
- There has been a decrease in soiling and BD is starting to acknowledge when he is soiling and taking some responsibility for it.
- The transition between the schools was a positive experience for BD and he has settled well into his new school but he was also able to acknowledge some of the difficult feelings around the loss of relationships from his previous school.

What went well

- BD engaging with the therapeutic work.
- The transition between schools which the network supported.
- The foster carer using the therapeutic sessions to bond with BD so that his attachment to her can grow and develop.
- The network was open to and engaged using the space from the network meetings to focus and understand BDS needs.

The work with BD remains on going as he has asked for individual sessions which reflect his trust in the therapeutic process. The network remains in place to support the foster carer as the individual therapeutic work with BD takes place.

Case study 2

X is an 8-year old boy. He was referred to the CIC team because his behaviour included aggression towards his sibling, not settling at night, questions about his birth family, disruptive behaviour, expressing distress, trying to run away and being verbally abusive to the family.

Intervention provided by CIC

- A network meeting with his foster carer on a two-weekly basis. This focussed on supporting the carer to manage X's behaviour at home and to cope with the demands of caring for him.
- CIC CAMHS met regularly with the network, this helped the social worker plan giving information about his birth mother.

Outcomes

- Improvements in X's behaviour.
- School provided play therapy and the therapist attended and contributed to the network.
- X made such good progress that the case was closed to the CIC team.

What went well

- The foster carer engaged really well with the support and used the sessions well. She was able to think of ways of changing how she responded to X.
- The Play Therapist joined the network.

X was re-referred as a number of factors combined to lead to an increase in more unsafe behaviours at home and also increased aggression to the carer.

The following factors impacted on his behaviour

- His social worker leaving
- Being told new information about younger siblings
- Play therapy coming to an end
- A younger child entering the placement

Since re-referral CIC CAMHS have met with him, his carer and brother for family therapy. CIC CAMHS have also resumed foster carer support. Feedback from the network and carer is very positive and they feel the team provide good support for them.