

**AN INVESTIGATION INTO THE INTERACTIONS
BETWEEN A CHILD PSYCHOTHERAPIST AS A
CONSULTANT/RESEARCHER AND THREE PRIMARY
SCHOOL SENCOS**

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Abstract

This thesis examines the work of the author, a Child and Adolescent Psychoanalytic Psychotherapist who is a former Special Educational Needs Co-ordinator (SENCo), taking the role of a consultant to three SENCos, each of whom are attached to three separate primary schools. Its method is participation observation in so far as it is the practice of the consultant herself that is the subject of the research. Two kinds of uncertainty are central topics of study: the continuing uncertainties surrounding the role of SENCos in schools, and the uncertainties surrounding the role of a Child and Adolescent Psychoanalytic Psychotherapist taking on a consultancy role in a school. The research demonstrates the emotional complexities of SENCos' work in schools, and of the situations of the children with whom they work. A particular perspective brought to this work by a Child and Adolescent Psychoanalytic Psychotherapist includes the understanding of the place of 'the baby in the child' (as one respondent put it), and of the importance of transference and countertransference processes, which the thesis examines in detail.

The author traces the interactions that take place during the consulting work with the three SENCos over the course of an academic year. There are ten sessions in the first school (Barnswood School), eleven in the next (Valley School) and fourteen in the last school (Ashurst School). Each session is summarised. Three sessions from each of the three schools are presented and analysed in detail, using an adaptation of the methods of Grounded Theory. Main themes emerging from the coding outcomes of all three schools can be summarised as: consultant containing difficult feelings; the conflicts of the SENCo Role. These two themes are thought about within a framework of psychoanalytic knowledge. The author makes references to her countertransference responses in her analysis of the sessions and she uses these responses to gain more insight into the themes that emerge from the coding outcomes. She charts the countertransference responses and links them to projections from children and their families into the SENCos.

The thesis draws some conclusions both about the development of the SENCo role in schools, and about the role of Child and Adolescent Psychoanalytic Psychotherapists as consultants offering support to this work. What emerges strongly is the extremity of the

feelings that are projected into the SENCOs, and the importance of the SENCOs being able to access consulting work that can help them not only to endure the projections, but also to understand them.

Keywords: SENCO; Child and Adolescent Psychoanalytic Psychotherapist; consultant; Grounded Theory; participation observation; transference and countertransference processes; containing; projections

All names used in this study, of people and of schools, are fictitious, to preserve confidentiality and anonymity of schools and staff involved.

Declaration

This thesis represents my own research and original work. It cannot be attributed to any other person or persons.

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Definitions and Abbreviations

ASD	Autistic Spectrum Disorder. Children on this spectrum have autism of varying degrees, thus the word spectrum.
CAMHS	Child and Adolescent Mental Health Service
CAF	Common Assessment Framework
CT	Class Teacher
DfEE	Department for Education and Employment
DHT	Deputy Head Teacher
EBD	Emotional and Behavioural Difficulties
HT	Head Teacher
PE	Physical Education
PEP	Personal Education Plan
PMHW	Primary Mental Health Worker. Workers employed to liaise with services in the community, primarily schools, and to perform a liaising role between other agencies and CAMHS
SA	School Action. When this work took place, School Action was the first stage of a child being officially registered on the Special Needs Register. It meant that the school as an organisation would take action to intervene in the child's education to assist him with his special needs
SAP	School Action Plus. School Action Plus was the second stage of the register; the plus refers to the bringing in of other agencies, such as Learning Support, Behaviour Support, CAMHS, Educational Psychologist
SEN	Special Educational Needs
SENCo	Special Educational Needs Co-ordinator
SN	Special Needs
Statement of Educational Needs	Formal recognition of a child's statutory need to receive specialist help beyond what is usually offered in the school. Funding is usually part of a child's statement to gain dedicated staff or other resources
TA	Teaching Assistant

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1. Introduction

This thesis presents an investigation into the interactions I observed when working as a consultant for one academic year with three primary school Special Educational Needs Co-ordinators (SENCOs). This took place during my last year of training as a Child and Adolescent Psychoanalytic Psychotherapist.

I had been a teacher and a SENCO before embarking on my training as a Child and Adolescent Psychoanalytic Psychotherapist. I therefore had a personal interest in the SENCO profession. As a SENCO I had become increasingly aware of the isolation experienced by many of my SENCO colleagues within their schools, and by my own sense of isolation too. I initially considered that there were many reasons for this sense of isolation. Firstly, I became a SENCO when it was a newly constructed post in schools. At that time, the role was not as clearly defined as it is now. Head Teachers (HTs) did not readily give up their previous roles of being responsible for liaising with other professionals to SENCOs. They did not initially view SENCOs as part of a senior management team. Secondly, Class Teachers (CTs) viewed the SENCO to be outside of the teaching group, so a SENCO in a school was neither part of the teaching group nor part of the senior management group. Thirdly, the Teaching Assistants (TAs) too were slightly distant from the SENCO because she had a managerial responsibility for them and needed to ensure they were fulfilling their duties.

In working through my training, I began to consider other reasons for the sense of isolation in many SENCOs. I made a link between the isolation of the SENCO and the isolation of the children in a school who are on a Special Needs (SN) register. For emotional, behavioural, physical, social or academic reasons (and sometimes all five reasons were apparent), children on the SN register often stood out from their peers as not quite belonging to the group. This link became increasingly interesting to me. In choosing the subject of investigation for my doctoral thesis, I decided that I wanted to study the SENCO role more closely, from its creation up until its current evolution. I initially wanted to investigate what use SENCOs would make of the offer of consulting work, but as the research findings emerged I became interested in the interactions that took place between the SENCOs and me as consultant. The reason for this was that as

the interactions were analysed, possible reasons for the isolation of a SENCo strongly emerged.

I chose as my area of study a cluster of eight village and small town schools. These schools were in a part of the county in which I worked where no other outreach work was being offered by the Child and Adolescent Mental Health Service (CAMHS) team. Resources were being directed into the more socially deprived areas of the county so the schools in question reported that they had very few resources to help them with children on the Special Needs Register who fell within the category of Emotional and Behavioural Difficulties (EBD).

The style of consultation was rooted in the psychoanalytic model, as I was a Psychoanalytic Psychotherapist. In my explanation of what I was offering to the SENCos, I outlined that I was interested in exploring what use they would make of a Child and Adolescent Psychoanalytic Psychotherapist consulting to them on a regular basis. What took place was primarily of a 1-1 nature with SENCos. There was in addition a facilitation of larger meetings, spontaneous conversations with other members of staff and an arranged series of meetings with a CT.

Through examining themes that emerged using a Grounded Theory research approach, it became clear that with each SENCo I contained extremely powerful feelings. In my use of the word 'contained' I am referring to the psychoanalytic meaning of the word whereby feelings are projected into someone, who in turn makes sense of them and returns them in a more acceptable form (Section 2.2.5). What emerged strongly was the extremity of the feelings that are projected into the SENCos, and the importance of the SENCos being able to access consulting work that can help them not only to endure the projections, and to 'bear the unbearable feelings,'¹ but also to understand them. It also became clear how conflicted the SENCo role is, with SENCos having ambivalent feelings about the role, there being a lack of time, space and resources, and SENCos often struggling with the complexities of the role. Countertransference responses that took place between the SENCos and me were analysed; this analysis led me to examine

¹ Personal communication Christine Bradley

in more detail the link between my countertransference responses and the projections from the children and their families into the SENCos.

1.1 Research Question

At the start of the study, the research question was: What use would SENCos make of the offer of consulting work with a psychoanalytic consultant? As the study progressed, and research findings emerged, the research question changed its form from asking what use the SENCos would make of the offer of consulting to asking what actually happened in the interactions that took place between the SENCos and the consultant.

The form of the research question changed because as the research findings emerged, I became increasingly interested in the frequency with which I found myself to be the recipient of negative projections. Linked with this, I became interested in the response of the SENCos to my attempts to contain these projections. I began to see shifts in my work with the SENCos, and noted positive developments. I had not anticipated how powerful the interactions would be, and how much change would be effected.

The SENCos were clearly making good use of the consultancy, but in the light of the emerging findings, the original research question seemed to be superceded by the question of what it was that actually took place in the interactions to effect such changes in the SENCos.

2. Literature Review

2.1 Introduction

The literature review examines the following:

2.2. A Psychoanalytic Approach to Consultancy

2.2.1. An Introduction to Psychoanalytic Consultancy

2.2.2. Transference

2.2.3. Countertransference

2.2.4. Projection and Projective Identification

2.2.4.1. Projective Identification in Organisations

2.2.4.2. Projective Identification in Groups

2.2.5. Containment of Anxiety

2.2.6. Links between Projection, Projective Identification, Countertransference and Containment

2.2.7. Defences against anxiety

2.2.7.1. Exploring Anxiety in the Nursing Profession

2.2.7.2. Exploring Anxiety in Schools

2.3. Process Consultancy

2.4. Expert Consultancy

2.5. The Development of the SENCo Role

2.2 A Psychoanalytic Approach to Consultancy

2.2.1 An Introduction to Psychoanalytic Consultancy

Maltby (2008) began to develop outreach work consulting to schools after she had qualified as a Child and Adolescent Psychoanalytic Psychotherapist. She described a piece of work with a Class Teacher where Maltby helped her to come to terms with a personal loss. In doing this work, the teacher was helped to manage her class more easily, particularly with a disruptive boy. Maltby felt that this piece of work was one of

her first interfaces between clinical work and consultation. The outcomes were very favourable: the teacher had new energy, she negotiated some boundaries in her personal life and her energy for her professional work increased. Maltby's work and the resulting outcomes are similar to the work in this study, particularly in Ashurst School, where the consultant helps a Class Teacher with personal issues, resulting in her having an increased ability to manage boundaries in the school.

Maltby found in her consulting work with individuals or groups that the institutional dynamics impact on the personal, although her focus was on the individual or the group sooner than the institution. It seems that a key feature of Maltby's work was attentiveness to emotional experiences. This feature is discussed in detail by Obholzer (1983) and by Armstrong (2005). Obholzer (1983) spoke about consulting to organisations as being fundamentally a psychoanalytic style of consultancy. He compared the space created in which the institution might look at itself to be similar to what happens in an analysis where the analyst creates a containing space for the patient to reflect on his or her emotional life. Armstrong (2005: 5) stated that the 'proper object of a psychoanalytic approach to working with organisations is attention to and interpretation of emotional experience, in the meeting between a consultant and a client.' He saw the emotional experience as being located in the individual to whom one is consulting, but that it always contains at least a part of the emotional experience of the organisation as a whole. Through attending to the emotional experience of the organisation within the individual, the consultant gains some understanding of the inner world of that organisation.

In this study, I seemed to be at times creating a containing space for an individual SENCo to look at her emotional experience within the school setting, and at other times creating a space where the staff group were able to look at their emotional experiences with children in their school. In attending to these emotional experiences, I tried to be aware of the unconscious processes within the individual and within the staff group. Armstrong (2004) gives a good summary of what characterises the work of the consultants in the Tavistock Consultancy Service: they 'work below the surface'... and focus on 'both what is known and consciously attended to and also what is unknown, unattended, or unconscious in the individual and/or in the group' (2004: 3).

In order to give proper attention to emotional experience, both conscious and unconscious, the psychoanalytic consultant needs to be aware of the transference relationship and of her countertransference responses.

2.2.2 Transference

Freud (1905) first named 'transference' where he discovered that the patient was 'transferring' internal infantile feelings onto him. He was particularly aware of this with Dora, a female patient he treated who he considered to have a case of hysteria. He described how the transference relationship that had developed between Dora and himself, where she transferred her infantile feelings about her father onto Freud, took him unawares. This led to Dora acting out 'an essential part of her recollections and phantasies instead of reproducing it in the treatment' (1905: 161). Transference shifted from being seen by Freud as an obstacle to being a therapeutic tool. Once Freud became aware of the transference relationship, he could use that awareness to help Dora not to act out but instead to integrate her recollections, phantasies and past experiences into her current life. Freud noted that:

Transference, which seems ordained to be the greatest obstacle to psychoanalysis, becomes its most powerful ally, if its presence can be detected each time and explained to the patient (1905: 159).

Ninety-two years later, Coren (1997) referred to examples of the transference process in education as being 'widespread.' He stated that transference can affect: a) the way we perceive e.g. a boy who was adored by his mother might expect to be able to charm his teacher; b) the way we interpret e.g. a girl with an ailing father will interpret a teacher's absence as him being ill due to her being a burden on him; c) the way we behave e.g. a boy who expects punishment and so behaves outrageously to force his teacher to become punitive. If school staff can be aware of the transference process, it can lead to more understanding of the pupils' needs and learning potential.

Salzberger-Wittenberg, Henry and Osborne (1983), in applying child psychoanalytic thinking to teaching and education, devoted a chapter to 'Aspects of the student's relationship to the teacher' and a chapter to 'Aspects of the teacher's relationship to the

student.’ By dividing them in this way, the authors highlighted the differing transference experiences of both the teacher and the student. They stated that a heightened awareness of these issues helps the teacher to understand more the processes that are happening between them.

In this study, I was at times successful in heightening the awareness of differing transference experiences in the SENCOs with whom I worked. Linda (Barnwood School) and Helen (Valley School) in particular became aware of how they affected other staff and vice versa, and of how staff and pupils were differently perceived. In my interactions with the SENCOs and their staff, I became increasingly aware of my countertransference responses within the transference relationships.

2.2.3 Countertransference

In 1910, Freud referred to countertransference as a reaction of the psychoanalyst to the patient’s influence on his unconscious feelings. He initially thought that these reactions were a hindrance to therapy, which echoed his original reaction to transference. However, he then became aware of the usefulness of the countertransference reaction as a guide to the patient’s unconscious.

Freud’s ideas were further developed by later theorists. Countertransference became understood as the state of mind in which the patient’s feelings were experienced as one’s own. Heimann (1950) came to realise that her disturbed feelings when working with a patient were actually unconscious communications from the patient. She came to see these communications as the analyst’s ‘instrument of research into the patient’s unconscious’ (1950: 81). She described the analyst’s countertransference as the ‘most dynamic way in which his patient’s voice reaches him’ (1950: 82). Heimann’s ideas about countertransference connect closely with Klein’s theory of projective identification (1946), which is outlined more fully in Section 2.2.4.

Money-Kyrle (1956) developed thinking about countertransference by discussing deviations from the normal, in which the analyst can become ‘stuck’ with really difficult feelings, which belong to the patient, and the analyst is unable to adequately think about them and help the patient with them. Money-Kyrle was describing what

happens when an analyst is unable to contain feelings, in Bion's sense of containment. Bion's work on containment (1962) was developed from the ideas of projective identification and countertransference. Containment is further described in Section 2.2.5.

Copley and Forryan (1987) summarised the meaning of the term countertransference for the psychotherapist – it is a disturbance in the therapist herself. They stated that the therapist should be asking to whom the feelings belong. This is a central part of examining one's countertransference responses. At times in this study, the countertransference responses were so powerful that I initially felt overwhelmed by them and needed supervision to help me to see the feelings as not just belonging to me but also to the SENCo with whom I was working. An example of this is when I spent a session being ignored by Jane (Ashurst School) who attended to other things while I was left waiting for her. When I brought this to supervision, my supervisor expressed the anger for me, which I had split off from my feelings, as to admit the anger would have been to admit the sense of rejection I experienced.

Coren (1997) saw the usefulness of the countertransference in schools as being a way of thinking about the tutor's feelings towards the student. Whatever the tutor feels is a strong indication of how the student is feeling. An example of this relating to my own SENCo work was a boy I taught individually who brought about a feeling of fear in me. This feeling was puzzling because he was not outwardly aggressive or challenging. He left me with a feeling of uncertainty, of not knowing whether his mood might suddenly change or whether he might 'explode in a temper' or run out of the room. He had displayed episodes in school with peers of losing his temper but always loved 1-1 sessions with me and behaved well. In looking at the boy's history, I learnt that his father was unpredictable and violent, and the family never knew when the next outburst of violence would occur. My feelings and my reflections on them enabled me to understand this boy's beliefs about adults and whether they could be trusted. His survival strategy of always being ready to escape situations helped me to give particular attention to helping him to feel safe with me.

Maltby (2008) described her experience of consultancy work in schools as being demanding and lonely. She related this to countertransference experiences and pointed to the clarity of thought that resulted from an awareness of these experiences:

I found myself increasingly focusing on what I later understood to be transference and countertransference experiences both with children and staff. Although at the time I was aware of these concepts only in a rudimentary way, they enabled some clarity of thought to take place and made difficult situations more manageable (2008: 85).

Armstrong (Tavistock Clinic Paper 185) stated the importance of recognising and managing countertransference feelings of vulnerability when consulting. He often felt:

on the receiving end of something akin to hostility: a kind of dead eyed challenge to say anything useful or illuminating that had a quite physical charge. In short, I felt frightened, both punished and tempted to be punitive in turn (Tavistock Clinic Paper 185: 5).

Armstrong spoke of himself feeling temporarily in and of the organisation for whom he was working, as if he was experiencing ‘something akin to a kind of institutional projective identification’ (Tavistock Clinic Paper 185: 5). In thinking about these responses and trying to make sense of them, he formulated the thought that the primary process of the organisation, which was a psychiatric hospital, was to manage vulnerability, or ‘more exactly of managing the emotional experiences of being vulnerable and of making others vulnerable to oneself’ (Tavistock Clinic Paper 185: 6). This was the nature of the relationships between staff and patients, and was central to the institution.

These countertransference responses of feeling frightened, punished or the recipient of hostility are very similar to some of those experienced by myself in this study. SENCos, as individuals in schools, would be particularly susceptible to carrying feelings of vulnerability or anxiety for other staff, as they are the staff members who are responsible for the most vulnerable children in schools. Vulnerable children hold more anxiety than less vulnerable children, as they have to cope with physical, academic or social struggles at school.

2.2.4 Projection and Projective Identification

Projection occurs when a person unconsciously attributes to someone else a feeling that is in fact his own. This is a process whereby we can push away and split off negative, uncomfortable feelings, thus experiencing them as outside us rather than in our minds, creating a source of anxiety. Projective identification occurs when the recipient of the projection ‘takes in to himself’ the feeling and actually experiences it as his own.

In 1946 Klein wrote a seminal paper entitled ‘Notes on some Schizoid Mechanisms’ where she introduced the concept of projective identification. In this paper she described how the infant is born into a world that makes him or her feel anxious. The cocoon of the womb suddenly is gone and the infant is exposed to many new and frightening stimuli. The state of mind that the infant adopts is referred to by Klein as the ‘paranoid-schizoid position,’ where he is operating in a primitive mode of survival, against what he experiences as an attacking and persecuting world, causing the infant much anxiety. When Klein described ‘projective identification,’ she referred to the unconscious phantasies of the infant, as he projected into his mother his terror and anxiety, by showing her his distress:

Together with these harmful excrements, expelled in hatred, split-off parts of the ego are also projected onto the mother or, as I would rather call it, into the mother. These excrements and bad parts of the self are meant not only to injure but also to control and to take possession of the object’ (1946: 8).

As the mother, who feels the infant’s distress, helps the infant to feel less anxious and to experience her as a recipient of these projections who can manage them, so the infant reaches a more integrated, thoughtful state of mind, which Klein called the ‘depressive’ position. The infant feels less of a need to control and possess the mother, and the process of separation can begin. Throughout our lives, we shift in and out of a more integrated state of mind or a less integrated one, according to our developmental stages and our circumstances.

2.2.4.1 *Projective Identification in Organisations*

In thinking about schools as an organisation it seems to be important that we bear in mind what sort of organisations they are. Are the staff able to retain their own ability to

think, and remain largely in the depressive position, or are they operating in the paranoid-schizoid position, where they might be more inclined to project their feelings into others and/or to become projectively identified with other's projections? In reality, the position of staff groups shifts from one state of mind to another as each year progresses. For example, around the end of terms, which are more stressful in schools due to tiredness and an approaching transition, staff might tend more towards projecting their anxieties into the Head Teacher, and towards entering the 'paranoid-schizoid' state of mind; thus, for example, they might blame him or her for the way they are all feeling. The Head Teacher might become projectively identified with the staff group and begin to feel blaming and resentful. If a Head Teacher is leaving, or is new, or other significant changes have happened in a school, the state of mind of the staff group will be affected accordingly.

Young (2002) stated that the concept of projective identification is 'basic to all communication and learning' (2002: 3). He stated that it is vital that we understand the concept in society because we need to understand our destructive primitive anxieties in order to overcome them. Projective identification is the basic mechanism for becoming a member of any group or organisation. In becoming a member of an organisation one acquires the projective identifications of the organisation. For example, a SENCo starting work might begin to acquire feelings of isolation and resulting hostility as a result of receiving other staff's projections of loneliness. In taking on the SENCo role, which is set apart from other teaching staff and from managerial staff, the SENCo is in a prime position to be the recipient of everyone's feelings of loneliness and 'not belonging.'

2.2.4.2 *Projective Identification in Groups*

A major contributor to the understanding of group dynamics and unconscious processes in groups was Wilfred Bion (1961). He based much of his thinking on the concepts of Klein, most notably that of projective identification. He studied group processes in detail during World War Two and later at the Tavistock Clinic. Bion defined two main tendencies in the life of a group: the first was the more conscious tendency of a group, which was to work on its task (work-group mentality); the second was the more unconscious tendency to avoid work on the task (basic assumption mentality). This way

of thinking about groups has helped us to understand what can happen when a group of people organise themselves to fulfil a task and unconscious processes get in the way of the task being fulfilled.

Bion (1961) pointed to the co-operation of the individuals in a group to fulfil a task. The work group is a rational group, whose 'characteristics are similar to those attributed by Freud (1911) to the ego' (1961: 143). The work group assigns roles within the group in order to achieve their purpose. The basic assumption mentality, however, is led by powerful emotional drives, not always conscious or rational. Bion (1961) noticed in the groups he ran that the rational voice of the individual was often lost; in fact, 'the paramount need is for the group to survive – not the individual' (1961: 64). He highlighted three basic assumptions, and said that only one could operate at once although they were in a constant state of flux. The assumptions operate to ensure the survival of the group, and as long as a group is in existence, one of them is in operation at any one time:

- The first assumption is that the group needs a leader to nourish and protect it. This is a dependent group (basic assumption dependent group).
- The second assumption is that a pairing is needed to develop a new group leading to improvement (basic assumption pairing group).
- The third assumption is that the group has met to fight something or to run away from it – (basic assumption fight/flight group).

In all of these groups, projective identification is in operation, as the unconscious need for survival brings about a regression into the paranoid-schizoid position. For example, Bion (1961) said of members of an organisation who are in a dependent state of mind that they have projected into the leader their power of thinking. He stated that:

Members of a group in a dependent state of mind are finding that their experiences are unsatisfying. Anyhow, their mood contrasts with that which they experience when, having thrown all their cares on the leader, they sit back and wait for him to solve all their problems (1961: 145).

The leader will most often accept the projection and become projectively identified with it, as it is felt so powerfully within a group setting. In schools, this could lead to the reinforcement of the authoritarian approach. Two of the SENCOs in this study had particular issues with their Head Teachers, and the Head Teachers from Ashurst School and Valley School were planning to retire. If we look at the fact that the SENCOs were frequently projectively identified with anxious, vulnerable and often isolated children, it could follow that they would project their powers of thinking into their Head Teachers, particularly in an organisation where the 'authoritarian structure of schools is a way of dealing with anxiety' (Caspari, 1965: 10). They then could feel uncontained by their Head Teachers, who the SENCOs might have hoped at an unconscious level would 'solve all their problems.'

2.2.5 Containment

Bion (1962) developed the theory of containment from Klein's theory of projective identification (Klein 1946). Bion used the idea of a container 'into which an object is projected and the object that can be projected into the container: the latter I shall designate by the term contained' (1962: 90). He coined the phrase 'maternal reverie' (Bion 1967) referring to the mother's capacity to act as a receptor, or a container, for the infant's projections, to make sense of them, to transform them and to return them to the infant in a more thought about and acceptable form.

Coren (1997) described containment as a process where 'one person temporarily holds part of another before returning it in a transformed and benign form' (1997: 61). This is what the mother of the infant is able to do if she can remain calm in the face of her baby's distress, tolerate it, think about it and make sense of it. Mothers who are feeling emotionally contained themselves can be observed talking to their infants, making sense of their cries, with comments like, 'Oh dear, does that nappy need changing?' or 'Nothing seems to work today, does it? Poor baby'. Coren applied this innate ability possessed by good enough mothers to teachers, who can talk about a book with a student:

The student who, terrified of a book he does not understand, or is unable to digest, projects this into his tutor, who experiences the anxiety and is able to

metabolise it in such a form that it can be 'returned' to the student in a less frightening form (1997: 61).

Salzberger-Wittenberg (1983) referred to her teaching experience with senior teaching staff. She contained the teachers' anxieties and fears at the start of the course by encouraging them to talk about their emotional experiences of starting a new course. She referred to the importance of the acknowledgement of their fears. She explained that by acknowledging fears, we can access a more mature part of our personalities:

Instead of being overwhelmed or denying their existence, we can recognise them as a legitimate part of ourselves and utilise our adult capabilities to deal with the situation (1983: 5).

Obholzer (1994) described schools as containing the anxieties of society about the huge responsibility for bringing up children and helping them to acquire the skills necessary to survive. This description contributes to understanding why in this study I had to contain some very difficult negative feelings, in working with SENCOs who were responsible for helping already disadvantaged children to survive in society.

2.2.6 Links between Projection, Projective Identification, Countertransference and Containment

I have pointed to the link between projective identification and countertransference (Section 2.2.3). It seems that a countertransference response occurs and is recognised when the recipient of the projection recognises it as a communication of the other person's unconscious infantile feelings and resists becoming projectively identified with that person's feelings. Halton (1994), in discussing projective identification in organisations, highlighted this point of difference between projective identification and countertransference. He pointed out that if staff groups begin to act out their countertransference reactions eg. the staff of an adolescent unit behaving in adolescent ways, that is the indication that projective identification is at work. In other words, the projections by the adolescents into the staff have been taken on by the staff as if they were their own; the staff have become projectively identified with the adolescents.

The analytic aim is that the analyst performs the important function of containing the projection; he or she uses the countertransference response as a way of helping the

patient to feel understood, and to make sense of powerful feelings that can overwhelm and inhibit thinking. The container model used in psychoanalytic consulting is one where feelings can be conveyed to the consultant who, like the analyst, acts as a container for the feelings and modifies them. In order to do this, the consultant has to be able to be aware of her own countertransference reactions, and also to be able to bear and think about any negative feelings she might be experiencing. In other words, she needs to be primarily in the depressive position in order to adequately process feelings projected into her. In this study, we can observe the many negative feelings that were projected into me and were contained by me. I in turn needed supervision help to remain thinking and in the depressive position, in order to avoid becoming projectively identified with the negative feelings and therefore unable to help the SENCos to remain thinking. Caspari's (1965) thought that Head Teachers needed their own supervision still applies today to individuals working within organisations where there is a strong need for anxieties to be contained (Section 2.2.7.2).

2.2.7 Defences against Anxiety

De Board (1978) saw anxiety as central to psychoanalytic theory. He pointed to the physiological changes that anxiety brings about, such as increased pulse-rate and faster breathing, as being autonomous mechanisms designed to aid the fight/flight survival response. These changes are effective when the danger is external. However, when the danger is perceived and originates in the person's inner world, there is no obvious solution to the anxiety other than using ego defences, which are: repression, regression, sublimation and projection. As stated, projection occurs when a person unconsciously attributes to someone else a characteristic that is in fact his own (Section 2.2.4). De Board, drawing on the theories of Jaques, stated that projection is most commonly used in organisations as a defence against organisational anxiety.

De Board referred to Jaques' view that defence against anxiety in organisations is one of the primary elements that bind its individuals together. He saw a correlation between social anxiety and psychotic processes in individuals. In other words, when an organisation is highly anxious, it views the world as being a threatening place and is in the paranoid-schizoid position. Its individual members reinforce the organisation's defence mechanisms against anxiety. The challenge that organisations face is of

changing defence patterns at an individual level. This requires individuals to remain thinking.

2.2.7.1 *Exploring Anxiety in the Nursing Profession*

Anxiety and resistance as defences against anxiety have been explored in organisations, the most notable of which was one of a number of projects that the Tavistock Institute of Human Relations and associated workers undertook in the 1950s in hospital settings. Menzies Lyth (1951) gathered her data in a general teaching hospital in London, which was also a training hospital. It consisted of a general hospital, three small specialist hospitals and a convalescent home. She studied in detail the roles that nurses performed in their work.

Menzies Lyth explored the primary task of the hospital, which was to ‘accept and care for ill people who cannot be cared for in their own homes’ (1951: 46). She observed that the major responsibility for the performance of that task lay with the nursing staff, who must provide continuous care. She stated that ‘the nursing service, therefore, bears the full, immediate and concentrated impact of stresses arising from patient care’ (1951: 48). Menzies Lyth pointed to the fact that the nurse is the recipient of projections from patients and their families:

Such feelings as depression and anxiety, fear of the patient and his illness, disgust at the illness and necessary nursing tasks. Patients and relatives treat the staff in such a way as to ensure that the nurses experience these feelings instead of – or partly instead of – themselves: for example by refusing or trying to refuse to participate in important decisions about the patient and so forcing responsibility and anxiety back on the hospital (1951: 49).

Significantly, Menzies Lyth discovered increasingly as she became more familiar with the work of the hospital that in some cases the patients had been hospitalised not because of their physical condition but because they and their relatives could not tolerate the stress of their being ill at home. The way that the nursing organisation dealt with this immensely stressful work was to erect powerful socially structured defence mechanisms. In this way, individuals can externalise their personal defence mechanisms into socially structured defence mechanisms. These social defences included:

- the workload of each department being broken down into a list of tasks, thus effectively restricting nurse contact with any one patient
- depersonalisation of the patient: Menzies Lyth refers to nurses talking about patients not by name but by bed numbers or by their disease eg. ‘the liver in bed 10 or the pneumonia in bed 15’ (1951: 52).
- depersonalisation of the nurses, with a strict uniform leading to nurses being outwardly differentiated by the arm stripe or cap they wear, signifying which year they are in. This creates an ‘operational identity’ (1951: 53).
- nurses are encouraged to be detached and deny feelings, for example, senior nurses giving advice to junior nurses of the ‘stiff upper lip’ variety
- a collusive social redistribution of responsibility and irresponsibility e.g. nurses commonly were found by Menzies Lyth to complain about and blame other nurses, with senior nurses complaining of junior nurses being irresponsible and junior nurses claiming that they weren’t given any responsibilities. Each nurse is considered to be responsible for nurses junior to her, even if they are junior by only a part of a year.
- the nurses were interchangeable between hospitals.

These socially structured defence mechanisms were created to ‘help the individual avoid the experience of anxiety, guilt, doubt and uncertainty’ (1951: 63). However, Menzies Lyth found in her study that the social defence system itself aroused ‘a good deal of secondary anxiety as well as failing to alleviate primary anxiety’ (1951: 65).

2.2.7.2 *Exploring Anxiety in Schools*

Menzies Lyth’s description of the socially structured defence mechanisms used to ward off anxiety in the hospital setting are no less relevant to educational settings. A primary school traditionally has a clear hierarchy, with the Head Teacher at the top of the hierarchy followed by the Deputy Head Teacher, then staff responsible for areas of learning i.e. Class Teachers and Teaching Assistants. This hierarchy is very clear and staff have always in the past been aware of their tasks and roles. This hierarchy was set up to keep anxiety at bay, by providing clear structures of authority and responsibility.

In recent years, the hierarchy has flattened, with the Head Teacher assigning roles of responsibility to other senior staff members. However, the Head Teacher still very clearly leads the school, and the traditional hierarchy is still present.

In 1965, Caspari studied the roles and responsibilities of Head Teachers and teaching staff in primary schools. She found that Head Teachers were the pivot of the system but that the system was weakened by the Head Teacher's lack of trust in the teaching staff. Caspari (1965) attributed the Head Teacher's lack of trust to a sense of anxiety experienced in primary schools. She suggested that 'the authoritarian structure of schools is a way of dealing with anxiety' (1965: 10). She said that the anxiety resided in teachers and parents alike. This resulted in the teacher being idealised or denigrated, as a persecuting state of mind prevailed in this state of anxiety sooner than a more integrated one. Caspari (1965) advocated for Head Teachers to receive their own supervision to help them to understand human processes in their schools. She surmised that in primary schools 'the Head's supervision is the means by which perfection is pursued' (1965: 11).

The reasons why there is an underlying anxiety in the whole field of education are many; they are based on the fact that the task of educators is momentous. The primary task of educators is to educate the children in their school. The word educate has its origin in 'to lead out' (OUP 1996). In order to lead a child out into an understanding of the world one has to take account of the child's physical, intellectual, social and emotional development. This task carries responsibility for the future generation, and is therefore a task that intrinsically carries a correspondingly huge amount of anxiety. Obholzer (1994) pointed out that educational institutions carry society's hopes that their children will be skilled enough to live in and to develop the future society. The responsibility placed on the educators for the success or failure of the next generation brings about competition and rivalry between schools and nations. In addition, learning implies a not-knowing. In order to learn something, we have to not know it first. Jackson (2008) highlighted the anxieties inherent in schools:

...learning is not simply a pleasurable experience, as it takes us out of the realms of what is known and familiar, into what is unknown and, as yet, unfamiliar. And, as we all know, the unknown generates anxieties (2008: 70).

Coren (1997) saw the defences that schools erect against anxiety as including the 'negation of individuality through categorisation and depersonalisation' (1997: 129), where blanket decisions are made that involve rigid enforcement of methods of standardisation. This leads to a denial of individual characteristics or needs. Like Menzies Lyth, Coren claimed that 'the instrument cannot be standardised' (1997: 129) when the instrument is made up of staff and students, all of whom are individuals. Coren outlined the important point of why this standardisation takes place:

The detachment and denial of anything associated with feelings or emotions deals with the need to minimise interaction that might lead to forms of attachment (p.129).

Menzies Lyth also found this in her study. With personal attachments there is much more potential for vulnerability and a wider range of emotional interaction. In this study we can see how all three SENCOs were wary of accessing their more vulnerable feelings but also how, within a containing relationship with the consultant, where emotional experiences could be examined, they benefited from accessing them.

As previously stated, in recent years, with the advent of inclusion policies in schools, a clear hierarchy has become less well defined. There are an increasing number of professionals who now work in schools. Youell (2006) pointed out that such a system works well and is aimed at benefiting the children but it creates its own demands, 'and one of these is a very high level of co-operation and understanding among the adults' (2006: 93). Youell (2006) highlighted the importance of staff in schools remaining thinking in the face of anxiety, to model to children the capacity to think about things even if difficult feelings are stirred up. Youell (2006) also pointed to the challenge that schools face, which is 'how to harness anxiety in the interests of learning and creativity' (2006: 27). In Menzies Lyth's hospital study the social defence system was seen to arouse secondary anxiety in addition to the original anxiety. It is important that schools face the challenge of how not to create secondary anxiety but still to provide a social structure that helps to contain anxiety in schools and allows learning and creativity to take place.

2.3 Process Consultancy

Process consultation is defined by Schein (1988) as ‘a set of activities that help the client to perceive, understand and act upon the process events that occur in the client’s environment in order to improve the situation as defined by the client’ (1988: 11).

The set of activities referred to in this quotation can be summarised as being a particular method of interaction employed by the consultant that highlights problems and explores solutions but encourages the client to make his or her own decisions on actions to be taken to improve a situation. It focuses on helping clients to form their own diagnoses, and to find their own solutions. The process consultant seeks to give the client insight into what is going on around him, within him, and between him and other people.

The process events referred to in the quotation relate to human interactions that occur within the work setting. Of particular importance to the client are his or her own interactions with colleagues and clients. The client needs to see his or her impact on others to be able to analyse what processes might need to change to improve the client’s environment.

When working with the process consultation model, it needs to be assumed that the client needs help in identifying what needs improving and how to improve it. This can be achieved using the process consultation model by asking questions in response to the client’s questions. Obholzer (1994) humorously yet with a serious message claimed that his favourite definition of consultancy was ‘licensed stupidity’. He went on to say that:

Being on the boundary, and not of the system, means the outsiders can ask a lot of questions without supposedly already knowing the answers. They are thus in an excellent position to work at the question of whether the organisation is essentially working on-task or off-task (1994: 49).

The process consultant needs to know about the organisation in which the client works, as the culture of an organisation is a vital factor in the success or otherwise of implementing new ideas. However, he or she cannot be expected to know an organisation as well as its members, so in process consulting remedies need to be

worked out jointly with members of the organisation who do know the culture of their organisation.

The key feature of process consultation is that the client must be helped to remain 'pro-active.' Schein is very clear that if any sort of dependent relationship is established between the consultant and the client, although it may feel comfortable for both parties, it will not be successful as there are complex human systems processes involved. A dependent relationship would mean that the client, as Bion stated (1961), would be attributing her powers of thinking to the consultant instead of remaining 'pro-active.'

Hanko (1990) describes the process of consulting in schools as being one of:

enabling teachers to find their own solutions to the problems of dealing with children's learning and adjustment difficulties; pursued, not by telling them what to do, but by engaging in a process of exploration which starts from the other person's perspective, and extends it *together with* the consultant's (1985: 141).

This is an interesting approach which fits the category of process consulting and in addition has an emphasis on the joint learning process for consultant and consultee, where dependency is avoided. In this study, I can be seen to enter this joint process of learning together with the SENCOs. In my role I had to navigate between expert and process consultancy all the time, but I tried to operate as a process consultant wherever possible to empower not just the SENCOs' thinking but also my own. When I was operating in a process consultant mode, I was feeling less anxious and less projected into than when I operated in an expert consultation mode. At times, it was appropriate that I became an expert consultant, for example when I was required to speak about Attachment Theory in Valley School. However, to best enable the process of the psychoanalytic model of containing the anxieties of the SENCO and helping the SENCO to make links between her own anxieties and those of the children or staff, a process consultancy model is more appropriate.

2.4 Expert Consultancy

The expert model of consultation is often referred to as the 'purchase of expert information' model (Schein 1988). It assumes that the client knows what kind of information or service he or she is looking for and essentially 'buys' in the expert service. There is an expectation that the consultant will provide answers to questions, thus providing an educative role, where the expert knowledge lies with the consultant and he or she imparts that knowledge to the client.

The expert model by its very nature creates a relationship where the client becomes dependent on the consultant. In Huffington's (1996) definition of consultation, she refers to the importance of the consultant being responsible for the consultation process, while the client is responsible for fulfilling the task of the organisation:

Consultation is a process involving a person who is incited to help a client with a work-related issue. The client can be an individual, a group or an organisation. The essential issue is one of responsibility for the process... The responsibility for fulfilling the task of the organisation in the consultation process lies with the client, whereas the responsibility for the consultation process lies with the consultant (1996: 104).

We can ask whether the client is able to take responsibility for fulfilling the task of the organisation with the expert model, where a dependent relationship is created. Perhaps the two can be held concurrently: the actual process necessitates a certain dependency, but the client can still retain responsibility for bringing in the consultant, and for the outcome of the work.

If the organisation is in need of clarity and immediate solutions to a problem that is causing a large amount of disruption, the expert model of consultation is one that is very useful. It provides the 'answers' whilst boosting the morale of the staff in the organisation and giving them time to gather their own thinking powers. If a client knows what he or she wants from the consultant, and attempts to 'buy in an expert model,' Armstrong (2005) stated that such a client is not in the realm of 'thoughts,' and will be unlikely to welcome the consultant attempting to think. Armstrong referred to Bion's suggestions about thinking in this instance. Bion (1962) suggested that the instance of thinking can be likened to the phenomenon of birth, in that there is a birth of

an idea, a struggling to make a connection, which is an instance of thinking. A client who seeks an expert consultant may be resistant to the struggle of 'giving birth' to new ideas, and may not be in a position to want to give birth to new ideas, as he or she may be operating in more of a survival mode. In this instance, the expert model of consultation is effective.

2.5 The Development of the SENCo Role

The SENCo role is a relatively recent one in schools. From its inception in 1994, it reflected the beginning of a change in the structure of schools. The responsibility began to be allocated amongst the staff group for many areas of education, including Special Needs.

Orford (1996) described the necessity of clarity in schools in order to perform their primary task. She stated that a school is a complicated organisation in which staff need to be allocated different tasks and responsibilities in order that the task is fulfilled. Orford warned that 'teachers need to be aware of their differing roles and tasks...If the system as a whole is to function satisfactorily, the tasks...need to be well-defined' (1996: 117). This seems to be particularly the case for SENCos because of the nature of the anxiety in their work. The way that SENCos can manage the anxiety in their work is to have 'well-defined' roles.

The role of the Special Educational Needs Co-ordinator (SENCo) was formally established in Britain in 1994 through the Special Educational Needs (SEN) Code of Practice (1994). It was established precisely with the consideration that Orford points to, that in order to carry out a task well, the task and the role of the person carrying it out need to be well-defined. The task and the role of the SENCo was clearly that he or she would be responsible for the special educational needs of the children in his or her school. The Code of Practice listed the responsibilities of SENCos, which included:

- Liaising with and advising Class Teachers
- Teaching children with SEN
- Keeping a register of children with SEN

- Liaising with parents of children with SEN
- Liaising with other agencies, including the educational psychology service, medical and social services and voluntary bodies

The SENCo Guide (Department for Education and Employment (DfEE 1997) further defined the role, but subsequent research pointed out that local interpretation of SENCo roles led to variations in practice between schools. At this time, the training that would have been needed to enable SENCos to liaise confidently with other agencies, for example, did not formally exist. When I became a SENCo in 1996, having been a Class Teacher, there was no extra training required for me to obtain my post.

The National Standards for SENCos (1998), introduced by the Teacher Training Agency, set out the knowledge, skills, understanding and training that SENCos should have to carry out their role effectively. The National Standards said that SENCos should be skilled teachers in their own subject or phase, and should have leadership, decision-making, communication and self-management skills. The standards also said that Head Teachers should ensure that SENCos had the necessary training to develop and maintain those skills.

Every Child Matters (2004) heralded a major change for the SENCo role. It gave SENCos a more defined role than previously. It stated that:

SENCos play a pivotal role co-ordinating provision across the school and linking class and subject teachers with SEN specialists...We want schools to see the SENCo as a key member of their senior leadership team; able to influence the development of policies for whole school improvement (2004: Section 3.14).

In 2005, Cheminais, who was central to advising on the SENCo role in Every Child Matters, pointed out that the traditional role of the SENCo needed reconfiguring in order to meet ‘the exciting and radical changes in schools that lie ahead over the next five to ten years.’ Cheminais noted the discrepancy between the non-contact time given to SENCos; it varied between one to five hours according to the size of school, but she wanted to see it allocated on a more flexible basis, according to the needs of the work. Cheminais pointed out that SENCos in the future would need to be:

- Lead professionals in Special Educational Needs (SEN) and inclusion
- Knowledgeable managers of personalised learning approaches
- Advisers to colleagues within schools and from other external services
- Solution assemblers and key members of the problem-solving school change team
- Advocates for children, young people, parents and carers
- Commissioning agents brokering and mobilising resources and services for children and young people with SEN and disabilities
- Change champions facilitating the learning and well-being of children and young people with a diversity of SEN
- Innovators of sustainable SEN developments in transformed learning communities
- Strategic managers and partners in removing barriers to achievement
- Quality assurers for SEN policy and provision
- Network partners, coaches and mentors in networked learning communities

It could be argued that this list might create anxiety instead of manage it. However, it gave SENCOs the authority and responsibility they lacked when the role was first created.

The Education and Skills Select Committee report on SEN (July 2006) said that there was a lack of clarity over the SENCO's role. The report made two recommendations about the future role of SENCOs:

Recommendation 84: SENCOs should be qualified teachers in senior management positions in the school, as recommended in the SEN code of practice. Firmer guidelines are required, not simply the Government asking schools to 'have regard' to the SEN code of practice. The SENCO's role must reflect the high priority given to SEN in mainstream schools.

Recommendation 85: SENCOs must be trained so that they can keep their knowledge up-to-date. Their non-teaching time must reflect the number of children with SEN in the school.

Despite Cheminai's recommendations and the select committee report, Pearson S and Ralph S (2007) pointed out that consensus about the role of the SENCO had been

elusive. Research carried out by Pearson and Ralph (2007) has evidence of SENCOs working with individual children and small groups, but there was limited evidence of the co-ordination or leadership role of the SENCO.

Nonetheless, SENCOs have been seen to take responsibility for more liaising and leadership roles. For example, following on from Every Child Matters (2004), in 2005 and 2006 trials began in local areas of the Common Assessment Framework (CAF). This is a standardised approach to conducting assessments of children's needs. It emphasises that any lead professional can take the responsibility to call a CAF meeting, which is a multi-agency meeting to focus on an identification and assessment of children's needs and strengths, taking account of parents, carers and the environment. All Local Authority areas were expected to implement the CAF between April 06 and March 08. CAF meetings are now regularly called by SENCOs in primary and secondary schools, and are attended by professionals from health, Children's Services and other relevant agencies. Linda (Barnswood School) can be seen in this study to feel anxious when CAFs were first introduced, but she progressed to calling and chairing them regularly.

The executive summary of the recent Department for Education's SEN and Disability Green Paper (March 2011) does not refer once in its eight pages to the role of the SENCO, yet it outlines major changes to how children should be categorised on the SN register and how statements should be approached. However, in the Department for Education's Good Practice document (December 10) many examples of good practice taking place by SENCOs are given, which involve SENCOs in a liaising, advisory and leadership role, as recommended by Cheminais in 2005.

These differing perceptions of the SENCO role seem to evidence that since it was first created, the role of the SENCO is still evolving continuously to become more defined. Currently, to summarise the role, SENCOs are responsible for managing and devising the educational programmes of children on the Special Educational Needs register in their schools; for implementing and reviewing the programmes; for managing Teaching Assistants in their roles; for liaising with and advising, in a managerial role, Class Teachers, Head Teachers and external agencies; for applying for children to be assessed

for a Statement of Educational Needs; for innovating projects for SEN locally and on a wider scale.

The training of SENCOs is now much more formally organised. There are a series of in-service trainings that enable a SENCO to familiarise herself with the role, and SENCOs can opt to attend management training courses too. They need their HT's approval to attend, but the formal promotion of the SENCO role from government papers provides them with evidence to support training applications.

3. Research Methods

3.1 Introduction

Anderson (2006: 346) argued that Psychoanalysis and Grounded Theory are ‘well-suited partners’ when engaging in qualitative research using a psychoanalytic framework. Anderson used these ‘well-suited partners’ in her own research, which sought an understanding of risk-taking, dangerous behaviour in childhood. She used a small number of clinical cases, and found that with the combined methodological approach, theory was generated that provided ‘explanations, interpretations and predictions’ (2006: 347). She found particularly useful the fact that with this approach, her findings could be made available to other professionals and agencies ‘to the benefit of children and their families’ (2006: 347). Her work provides evidence that this approach is ‘creative, and productive’ and is one ‘for which the child psychotherapist is ideally suited’ (2006: 347).

A similar approach is used in this study, which is also a qualitative research project. As this study is based on psychoanalytic consulting work in schools, it is intrinsically a project where psychoanalytic clinical work is being applied to working with other professionals and other agencies. Three sessions from each of the three schools are presented and analysed in detail, using an adaptation of the methods of Grounded Theory. The method used in the work that took place is participation observation in so far as it is the practice of the consultant herself and of her interactions with the SENCOs that is the subject of the research.

3.2 Participation Observation

Participation observation is a type of research methodology used in many disciplines, particularly cultural anthropology, sociology and social psychology (2003). It has its roots in anthropology and emerged as the principal approach used in studies of ethnic cultures.

The aim of participation observation is to gain a close familiarity with a given group of individuals and their practices through an intensive involvement with people in a given environment, usually over an extended period of time. An extended research time period means that the researcher will be able to obtain more detailed and accurate information about the individuals being studied. In this study, the individuals were the three SENCOs and myself, and I studied our interactions in the school environment during regular sessions over the period of one academic year.

3.3 Grounded Theory

Grounded Theory was first formulated in 1967 by Glaser and Strauss. They defined it as a research method most suitable for qualitative approaches, although it can also be used for quantitative approaches. Glaser and Strauss stated that Grounded Theory is 'the discovery of theory from data systematically obtained from social research' (1967: 2). It was developed for this purpose but can be applied usefully to other areas of research that study social and individual behaviour.

What most differentiates Grounded Theory from much other research is that it is explicitly emergent. It does not test a hypothesis. It sets out to find what theory accounts for the research situation as it is. The aim is to discover the theory implicit in the data. This distinction between "emergence and forcing", as Glaser framed it (1992), is fundamental to understanding the methodology. Grounded Theory is responsive to the situation in which the research is done. It is driven by the data in such a way that the final shape of the theory is likely to provide a good fit to the situation. Glaser suggests two main criteria for judging the adequacy of the emerging theory: that it fits the situation; and that it works i.e. that it helps the people in the situation to make sense of their experience and to manage the situation better.

Glaser (1978) stated that Grounded Theory enables researchers to study processes and to ask the question: what is happening? This 'open' approach to research, where questions emerge from the data, is well suited to psychoanalytic methods of research, where data is studied and analysed in intricate detail to discover 'what is happening' in the material. It should be noted, however, that within Child Psychotherapy research a

significant modification of the Glaser and Strauss position is made. Child and Adolescent Psychotherapists (CPTs) do not approach their data in a theory-free way, allowing hypotheses to emerge from the data without there being any theoretical presuppositions. They bring to the data a theoretical frame of a kind, and then make connections between these 'background' ideas and the phenomena which they help to explain. In this study, theoretical ideas of transference and countertransference, projection and projective identification, containment and consultancy approaches were ideas with which I was familiar prior to my participation observation experience. These theories found a fit with the emerging data rather than being mechanically applied to it as 'hypotheses'.

Charmaz (2006: 2) defined Grounded Theory as methods which 'consist of systematic, yet flexible guidelines for collecting and analysing qualitative data to construct theories 'grounded' in the data themselves.' Charmaz studied under Glaser's and Strauss's guidance, and she provided a practical guide through Grounded Theory, showing how it has evolved since its originators first discovered it. In reflecting on the research process of Grounded Theory (2006: 177), Charmaz acknowledged that, unlike at the beginning of the formulation of Grounded Theory, it is now recognised that no-one approaches data without some theoretical orientation. Grounded Theory has evolved into a theory that can be used more flexibly than was envisaged during its conception.

Charmaz described how the researcher begins the work with no formed hypothesis. Grounded theorists follow leads that they define in the data. Data is studied and coded until categories emerge, firstly using initial coding methods, which can be applied 'line by line,' 'word by word' or 'incident by incident' (2006: 2). Then focused coding is used. These codes are more directed and selective than initial coding, and lead to the development of concepts:

Grounded theory coding consists of at least two phases: initial and focused coding. During initial coding we study fragments of data – words, lines, segments, and incidents – closely for their analytic import.....While engaging in focused coding, we select what seem to be the most useful initial codes and test them against extensive data (2006: 42).

The process that takes place when making an initial coding list is one where segments of data, broken down into phrases, sentences or incidents, are categorised with a label that summarises that piece of data. So, for example, in Session Four in Ashurst School, the material in the first five paragraphs is about the consultant being kept waiting by Jane, the SENCo, in a way which seems dismissive of her and which brings about strong feelings in the consultant. This incident fell into a category of incidents to do with being kept waiting which I summarised as:

1. Consultant being kept waiting and experiencing feelings of abandonment, anger and rejection (Session Four, Ashurst School).

In the subsequent material in the session, the SENCo can be seen trying to be thoughtful about George but she struggles with feeling deskilled and reverts to a mode where action takes precedence as soon as she experiences rejection by the consultant who refuses to work directly with George's parents. Her anger is played out in her rivalrous comments to the consultant. This led me to think further about the effect on Jane of a HT who doesn't value her work or hold it in mind. Through analysing this and related segments of data from the text, I formulated the next initial coding category:

2. SENCo experiencing feelings of abandonment, anger and rejection by the HT (Session Four, Ashurst School).

Charmaz describes the focused or selective phase of grounded theory coding as being one where the most significant or frequent initial codes are used to 'pinpoint and develop the most salient categories in large batches of data' (2006: 46). Focused coding involves the researcher in a process where decisions have to be made about which initial codes are most useful in categorising data incisively. In looking at my two initial codes about my feelings of anger, abandonment and rejection and the SENCo's parallel feelings of anger, abandonment and rejection, I pinpointed the process that was happening where my feelings could be interpreted as a countertransference response to those of the SENCo. Thus, I summarised the two initial codes in one focused code:

1. Countertransference responses of abandonment, anger and rejection (Session Four, Ashurst School).

These are the other initial codes:

3. Oscillation between thinking and reflecting being avoided and between engaging in a reflective process
4. Attentiveness recommended for CT to give to pupil, and attentiveness, or being held in mind, being given to SENCo by consultant
5. Rivalry of consultant's role
6. Fear of vulnerability and feelings of dissatisfaction (Session Four, Ashurst School)

From these initial codes, I pinpointed processes in the SENCo and between the SENCo and the consultant that are summarised under the following focused codes:

2. Attentiveness versus avoiding thinking
3. Unacknowledged rivalrous feelings, which threaten feelings of vulnerability and dissatisfaction if acknowledged (Session Four, Ashurst School).

This process is outlined in Table 3, Appendix 4, where the forming of the initial coding category, followed by the focused coding category, can be traced.

After the initial and focused coding process, a 'constant comparison' method is used to uncover links between categories and concepts. As the data emerges, through the constant comparison method, hypotheses begin to arise. For example, by using this process for this study, I was able to examine the findings as I compared and contrasted the focused coding methods for each of the three schools. I further considered the findings within a psychoanalytic framework. I closely examined my countertransference responses, to gain further insight into the interactions between the SENCos and myself, and linked these to projections from children and their families into the SENCos.

3.4 Research into the Application of Psychoanalytic Work

Twenty years ago, Rustin Ma. (1991: 122) pointed to the strengths of the psychoanalytic model for clinical research. She stated that ‘in one sense, any individual piece of psychotherapeutic work is a research project – patient and therapist do not know what the outcome of their exploration together will be.’ Further, the tools of the psychoanalytic psychotherapist are: close observation of the patient’s behaviour, and of her own behaviour; her theoretical background that helped her to make some sense of the observations she made; her experience of work with other patients; her own life experience.

Since then, an increasing amount of research into psychoanalytic work has taken place. Psychoanalytic research has its basis in the infant observational method, developed by Esther Bick (1964) at the Tavistock Clinic. This method requires that detailed notes are made immediately after a session and what is noticed is not just what happened but also what the emotional responses were of the observer. Subsequent reflections take place in small seminar groups; they focus on the psychoanalytic significance of the interactions that took place, including those between the observer and the observed.

Rustin Mi. has been influential in formalising the infant observational method as one of research. In *Closely Observed Infants* (1989: 54) Rustin first explored the issue of whether psychoanalytic observation methods could be regarded as a form of research. He compared them with developmental psychological methods, where the ‘central tool’ of the psychoanalytic observation methods is ‘an intimate, one-to-one personal contact whose transactions are subjected to self-reflective thought of as meticulous a nature as possible,’ compared to the aspiration of developmental psychological methods to ‘hard empirical science.’ He described psychological methods as ‘aiming for relatively public methods of observation, in contrast to the notably private and observer-dependent settings of the methods derived from psychoanalysis’ (1989: 54).

He argued that, like the ‘ethnographic approaches of some forms of anthropology and sociology, psychoanalytic observation methods require observers both to have in mind a range of conceptions and latent expectations, by which they can give coherence and shape to their experience, and to remain open-minded and receptive to the particular

situations and events to which they are exposed' (1989: 57). Rustin highlighted the importance of recording observations in everyday, non-theoretical language, in order to avoid having preconceptions and that 'the phenomena of the observations can register themselves in all their complexity in the mind before the attempt is made to encode them in theoretical terms' (1989: 57).

What defines infant observational methods from other social science or anthropological research methods is the attention to emotional reactions. Rustin (2003: 141) described how in child psychoanalysis the inner world can best be accessed through the transference relationship, where 'it manifests itself spontaneously.' Psychoanalysis has no standardised tests or interview protocol; instead, it has the unconscious, or the inner world, of the patient as the specific object of study. This is an important aspect of psychoanalytic research because the transference (even in applied settings) and the countertransference responses (especially in applied settings) of the psychoanalytic researcher are the central tools of her trade. In fact, Rustin (2009: 39) went so far as to say that attention to the countertransference in child psychotherapy clinical research is 'theoretically essential.'

The fact that the transference and countertransference are based on emotional responses within the psychoanalytic researcher lend themselves to criticism from other researchers. Fonagy and Moran (1993) pointed to the need for objectivity between the researcher and data gathered from clinical sessions. Midgley (2006) asked the question of whether we should use a therapist's own process notes as the primary data in clinical case study research. He pointed out that a therapist's notes are subjective and not objective. However, Midgley then argued the complexities of the process, stating that some of the most important clinical data of the analytic setting are the thoughts and feelings of the analyst, and transference and countertransference processes and responses. These are inevitably subjective.

A further criticism is that the therapist's process notes are selective. The researcher as the therapist selects from her own memory what happened in a session, and many aspects of the session might not be included. Lush (2011: 40) argued that this selectivity comes about not through a thoughtless omission but 'through the therapist's skill in understanding unconscious processes and following the underlying unconscious

thread that links apparently unrelated ideas.’ She further stated that it could be argued that it is ‘in the therapist’s selection of the most meaningful fact that the skill and art lies’ (2011: 40).

Arguments for and against subjectivity and selectiveness raise the question of the responsibility of the researcher and of the therapist or consultant. Fonagy and Moran (1993) considered that in a consulting relationship where transference and countertransference processes are taking place, it is hard but possible to maintain a sense of responsibility and objectivity by being constantly aware of the following issues:

1. How does the client’s knowledge that I will be researching affect her interaction with me?

This is an interesting question and has been considered in the setting up of this study. The client’s knowledge that the consultant will be researching will affect her interaction, and heighten her awareness of being ‘observed’. The knowledge could have added to the SENCos’ awareness in this study of the training status of the consultant and of her previous vocation of being a SENCo. However, as Schein (1988) stated, just by entering into the work, the perceptions and attitudes of the client would have become altered. He further stated that every act on the part of the process consultant is an intervention, even the act of deciding to work with members of the organisation. The knowledge that the consultant will be researching is one of many acts that change the relationship, and the consultant needs to be sensitive to these processes.

2. How does the relationship that I build with the client affect the quality of her response to my work?

This is central to researching psychoanalytic work, as the relationship between the client and the psychoanalytic therapist/consultant is central. The relationship that the consultant builds with the client can be seen in this study to be central to the quality of her response to the work of the consultant. In the consultant-researcher and SENCo relationship, awareness of transference and countertransference is vital to the work, both for the consulting work to succeed and also for the research to remain objective. To maintain objectivity, the consultant-researcher needs constantly to be asking to

whom the feelings belong in order to understand the experience of the SENCo in her role within the wider school setting. As long as this questioning happens, whether through supervision or self-reflection, the relationship between the consultant and the client is vital to the success of the work.

3. *What role does the client put me in? Does she attempt to abdicate responsibility for the work and hand it over to me? Does she feel empowered by the consultations? Do these positions change as the work progresses?* These questions relate to the ability of the consultant to contain the anxiety of the client to a point where the client is enabled to take some responsibility for the consulting process. If a dependent relationship is not encouraged and a process consultancy approach is the primary one, the client should begin to feel empowered by the consultations. In this study, the outcomes were that all three SENCos began to feel to a greater or lesser degree empowered by the process. We can see Helen and her staff (Valley School) moving from a more dependent role, where they put the consultant in the role of expert, to a less dependent and more autonomous role as the awareness of loss is made more conscious and responsibility is taken to leave a strong SEN ethos in the school after Helen's retirement.

3.5 Sources of Data

I originally managed to gather five SENCos to work with, each from separate schools. Unfortunately, two of the SENCos dropped out of the study early on. This is described in more detail in Section 5.2. Although this decreased my sources of data, I still had an adequate sample for detailed analysis, as material of this kind produces a rich source of data. It is usual practice for Child and Adolescent Psychotherapists (CPTs) to type detailed process notes after sessions, and further analysis of these notes provides more depth and insights into the processes that took place.

I also originally offered more than the number of consultation sessions that were taken. I offered fortnightly sessions as I thought that this would provide a framework of continuity and would provide a sample of forty-five sessions. It emerged for various reasons explained in more detail in Section 5.3. that I had a total of thirty-five sessions

for detailed analysis. So, from a potential of five schools each taking up fifteen sessions, totalling seventy-five sessions, the data I finally had of thirty-five sessions was significantly less. Thirty-five detailed sessions though, proved to be more than enough material and in fact I had to make a decision about which sessions I would present in detail as the depth of the analysis involved in each session would have formed a much larger study than the one I have presented here. The thirty-five sessions, from three different schools, gave me enough of a comparative dimension for my purpose too.

In applying Grounded Theory within a psychoanalytic framework to this study, the data was provided by detailed process notes written after each meeting at the schools. Detailed process notes were written not during but after each session, in a literal way, recalling as much detail as possible, including the emotional responses of the SENCOs and of myself. The emotional responses are a vital part of the data gathered, as it is from them that the transference and countertransference responses can be ascertained. The process notes are at least two sides of an A4 typed sheet and are often longer. The sessions that took place are as follows:

- Barnswood School – ten sessions
- Valley School – eleven sessions
- Ashurst School – fourteen sessions

Thus, there were thirty-five sessions. I analysed all of these sessions myself, and took many of them to supervision. In undergoing this analysis, I began to notice and identify not just emerging themes but also ‘turning points’. These turning point sessions were the ones I chose to present in detail in the thesis.

In 1997, Carlberg began to be interested in child psychotherapy sessions that gave her a feeling of being turning points. She discovered that other therapists had the same experiences and carried out a systematic research into turning point sessions. In describing a turning point with patient Peter, Carlberg cited the actual point as being when Peter was lying on the floor like a baby and Carlberg had an attuned mother-baby interaction with him. However, she also cited the importance of the context, and of the

events that led up to it as being part of the turning point. Carlberg concluded from her study that a turning point is:

a session where the therapist notices that something qualitatively new may be identified concerning the behaviour of the child or the child's way of showing his/her inner world, or where something new enters the interplay between the child and the therapist (1997: 338)

The pattern in the turning point process is possible to describe in three phases. Firstly there is a process preceding the actual change; the second phase is a meeting of emotional impact; in the third phase the change becomes visible.

Lush (2011: 43), in analysing Carlberg's concept of 'turning point' sessions, argued that the turning point concept is suited to research which aims to 'explore and discover rather than justify.' As with this sort of research there is an investigation rather than an 'aim of persuading,' it fits with the psychoanalytic process of being receptive to what is revealed in the material, and it fits with the Grounded Theory methodology.

I chose to present three consecutive turning point sessions, where there was a central point I identified which demonstrated a shift of thinking in the SENCo or her staff, but where the context leading up to the point was also important. This shift of thinking illuminated the essence of the consulting work, which was that staff were helped to remain thinking in the face of difficult feelings. The sessions were also presented in the context of all the sessions, with a brief description of sessions prior and subsequent to them. This context was given in order to show the development that took place throughout the work.

The 'turning point' sessions I chose are particular to each school:

- Of particular interest to Barnswood School is the way in which the SENCo, Linda, struggled to re-engage with the work after the Christmas break. However, when she did re-engage, she seemed to reach a turning point in the consultation sessions, where she could risk showing her vulnerability; this subsequently led to her professional development. Thus, the sessions prior to and after the Christmas break are presented.

- The main feature that emerged from the work with Helen, the SENCo at Valley School, was the significance and impact of her retirement, not just for Helen but also for other staff. This was not initially addressed by Helen. Of particular interest was the shift from Helen and her staff operating in a basic assumption dependency mode, in which there is dependency on a leader to achieve the group's task (in this case I was presented by the SENCo as the 'leader') to a group where more thinking takes place and there is less dependence on the 'leader.' Gradually, with the help of supervision, I became aware of being drawn into the expert role, and tried to come out of that role by helping the SENCO and other staff members to share thoughts and to reach solutions themselves. This coincided with Helen beginning to reflect more about the impact of her retirement. Thus, the sessions that are presented from Valley School are at the end of the work, as they trace this interesting shift in Helen's state of mind, and are more alive than many of the previous sessions, probably because Helen engaged with the issues that were important to her.
- Prior to the Christmas break Jane, the SENCo at Ashurst School, had shown some ambivalence about engaging with a reflective process. When she eventually requested another session after an extended Christmas break from the sessions, an interesting feature of the work emerged. This is that Jane appeared to be reluctant to engage in a reflective process herself, but was very willing to engage me to be reflective with another staff member. This process is traced in the sessions either side of the Christmas break, which are presented from Ashurst School.

One could argue that it would have been useful to examine the sessions around the Christmas break with not just two schools but with all three schools. This was considered and would have been a useful way of comparing and contrasting the three schools. However, to miss the last sessions with the SENCo at Valley School would miss a significant developmental process in Helen. In addition, she had a less prolonged Christmas break than the other two SENCOs.

Nonetheless, the Christmas break was of significance for Helen, if not just in the fact that it was the first two-week holiday break during her last school academic year, and it undoubtedly heralded the much bigger break of retirement to follow at the end of the Summer Term. It could be that Helen's particular reluctance to re-engage after the Christmas break was indeed part of her wider reluctance to think about her retirement, and in that respect it could be compared with the long Christmas breaks taken by the other two SENCoS: the commonality between them all was that of resisting engaging the more vulnerable aspects of their personalities in the work with me. This resistance can be understood when examining the complexities of the SENCo role and of the children with whom the SENCoS work, and is further discussed in Section 5.4.5.²

Reflections on the sessions took place whilst I analysed process notes in supervision or alone. Supervision was essential not just clinically but for research purposes, to aid objectivity and to help me to work out which responses belonged to whom. Each SENCo was given a Needs and Expectations questionnaire to complete before the project. Data from the questionnaires contribute to the material, although as the project progressed, I realised that the more significant material was in the detailed process notes. However, main themes that arose from the needs questionnaires helped my thinking, and were very informative about each SENCo's expectations for the project.

Following the reflections and coding work, constant comparisons were made between the three SENCoS and their staff. Two main themes emerged which were common to all three schools. The themes were:

1. With each SENCo I contained difficult feelings.
2. The SENCo role is conflicted, with SENCoS having ambivalent feelings about the role, there being a lack of time, space and resources, and SENCoS often struggling with the complexities of the role.

² It is also of significance that Christmas breaks for the children with whom the SENCoS work would bring about resistance to being vulnerable, for Christmas represents the expectation of an idealised family time. This can be experienced as a reminder of a less than ideal family, where conflicts and painful feelings might be more prevalent. This experience can lead to strong feelings of disappointment and loss, which children often bring with them into the new term to follow.

At this stage of the research, it became clear that an evolution and process of development happened in all three schools. It also became clear that I made repeated references to my countertransference responses. I became interested in these responses as a way of further understanding the emotional experiences of the SENCos. I had learnt from the Grounded Theory findings that the SENCos were conflicted about their roles and that they made use of me to contain their difficult emotions. To aid my understanding, I drew up a table that outlined my countertransference responses throughout the work. Most of the responses were common to all three SENCos but there were also countertransference responses that were particular to each SENCo. The most common countertransference responses were anxiety, uncertainty, anger and abandonment. I linked these findings to the emotional experiences of the children in the care of the SENCos, by examining the projections from the children and their families into the SENCos.

4. Research Ethics

Written and verbal consent was sought before embarking on any work with the SENCOs. As a matter of courtesy, the HTs of the SENCOs' schools were also verbally consulted before the work began.

All names of people and places are anonymised and no dates are given to protect the identity of schools and their staff. This is particularly important in a study such as this, where at times difficult staff dynamics are examined and investigated. They are examined with no judgement and the aim of the researcher throughout the study is to promote further understanding of some of the complexities that arise in organisations.

All three SENCOs have been sent a summary of the study and the outcomes. They have all been offered the opportunity of further discussions if required.

4.1 The Consultant-Researcher's Relationship to the Role of the SENCO and its effect on the research

This section seems to belong in an ethics discussion because it raises questions about boundaries and whether I should have shared my professional background with the SENCOs. The reason why I did was because it formed such a central part of why I was doing the research at all.

As has been stated in the Introduction, prior to completing the Child and Adolescent Psychoanalytic Psychotherapy training, I worked firstly as a Class Teacher then as a SENCO in primary schools for some years. This experience gave me first-hand knowledge of the work involved in the SENCO role. The effect of this shared background on the research was noticeable in all three schools. It had both a positive and a negative impact.

The positive effect of the SENCOs knowing about my professional background was that they all, at various times, conveyed the fact to me that they were pleased that I

understood and knew what it was like to do their work. This helped communication between us. An example of this can be seen in a comment made by Jane (Ashurst School) in the concluding session. Jane related the fact that she had not been allocated a white board amongst the recent allocations because 'she wasn't attached to a white board,' in the same way as a Class Teacher in a classroom would be. This feeling of being marginalized from the other teaching staff was one with which I was familiar and had experienced myself as a SENCo. I responded by conveying understanding and empathy to Jane. As can be seen in the research findings, Jane did not access her more vulnerable feelings until near the end of the consultation period. It is striking that it was only in the last session that she was able to invite me to empathise with a feeling of being marginalized. My professional history can be seen to be used more by the other two SENCos. This ability to identify with the SENCo helped the containing relationship (Bion 1962) with all the SENCos. I, as the container, was able to understand and make sense of the feelings, aided by my own work experiences.

The fact that I shared my background with each SENCo at the first meeting also had an adverse affect on the working relationship. The risk in my mind for sharing my background with them was that the SENCos' view of me as a Child and Adolescent Psychotherapist (CPT) could be compromised by them also viewing me as an ex-colleague. Questions that might arise for SENCos, albeit unconsciously, could be: why I left the profession as a SENCo, which links in with feelings of professional abandonment in a profession that is still struggling to be recognised; what my view is of SENCos, in the light of having left the profession; what the level is of my professional expertise as a CPT and as a consultant, linked with a thought that I might in fact be closer professionally to being a SENCo than to being a CPT.

What actually happened was that it became clear that at times the SENCos identified with me and viewed me as a colleague with similar experience, not as a colleague who could offer something different. This most often happened after a long break, as with Linda after the long Christmas holiday. At times, it was as if the psychoanalytic training was denied. Perhaps it was more comfortable for the SENCos to view me as being the same as themselves.

This outcome would imply that the risk in my mind for sharing my background with them was a genuine one. The denial of the psychoanalytic training could imply a feeling in the SENCos of professional abandonment.

5. Research Findings

5.1 Context of the Consulting Work in the Schools

5.1.1 Setting Up

I initially contacted the Educational Psychologist and the Manager of the Special Educational Needs Co-ordinators (SENCOs) for the area in which I wanted to work. They each gave their verbal and written consent for the study to go ahead and invited me to a termly meeting where all eight SENCOs would attend. I went to this meeting prepared with a verbal and written summary of the study and what it would entail (Appendix 1).

5.1.2 Initial Meeting with SENCOs

I told the SENCOs about my background and my current work and training. I explained that before undergoing my Child Psychotherapy training I had worked as a class teacher and subject teacher for many years, and had then specialised in the area of special needs, working as a SENCO in primary schools.

After introducing myself and my background, I summarised the study, emphasising that it would be a study to explore what use a SENCO would make of the offer of regular consultations by a Child and Adolescent Psychotherapist (CPT). I outlined the duration of the study (an academic year), the duration of the sessions (one hour) and the frequency of the sessions (approximately up to fortnightly to be arranged between the SENCO and myself.) I handed out consent forms (Appendix 2), Needs Assessment Questionnaires (Appendix 3) and stamped addressed envelopes.

After speaking to the SENCOs for fifteen minutes, a space was made for them to ask questions. The questions that were asked are listed below, in order of highest frequency first:

- The most commonly asked question was that of a time-related issue. I was asked to repeat the time and commitment involved. Some SENCOs commented on being part-time in their schools and on not having the time to fit in anything extra. I said that it was possible this extra time invested in the study might help them to think about areas like time management, but this suggestion was not pursued by anyone.
- The second most commonly asked question related to whether I would have the capacity to see children individually. I explained that the study was not for me to see individual children and suggested referring to the local Child and Adolescent Mental Health Service (CAMHS) for children who were causing concern. This suggestion was received with some doubt, and two SENCOs related tales of long waiting lists when they made referrals to CAMHS. This sense of disappointment was perhaps as a result of the SENCOs wishing for magical solutions and hearing that they were not on offer. By implication, this wish for magical solutions reveals a lack of confidence that they can do good work with their troubled children, and that they need 'experts' to come in.
- There were two separate questions about practical issues ie. which days would be offered and what times. These questions were addressed by me handing out Needs Assessment Questionnaires, on which SENCOs could specify the days that they worked and preferred times (Appendix 3).

After having addressed these questions, I was left with the thought that time was a very pressing issue for SENCOs and that this issue, as well as a wish for magical solutions, was linked with the SENCOs' wishes to have individual children seen. It could be the case that SENCOs were thinking that if children whose behaviours took up a lot of SENCO time were seen for individual work, the SENCO might then have more time, and the children in turn would receive some help from an 'expert' in the area. It could also be the case that some children took up all of the SENCOs' thinking space, and this left them with an overall feeling of not having enough time in their own minds for the rest of their work. This thought continued and developed as the work progressed.

5.2 Opting In with SENCOs

The meeting was held in June and I specified that I would like to begin the study during the academic year beginning in the September following the June meeting. A follow-up phone call was made to each SENCO in July. By September, five SENCOs had returned their Needs Assessment Questionnaires and consent forms. I contacted the five SENCOs and arranged initial meetings throughout September.

After their first meeting, two of the SENCOs dropped out of the study. Reasons for this differed with each SENCO. The first SENCO only worked for her school one day a week, and it was a day that was the only immovable day for me. Thus, we had no way of establishing a working relationship. The second SENCO was also a Head Teacher (HT). She felt upon reflection that she had enough support from her colleagues to enable her to be thoughtful about children on the Special Needs Register. She had formed a team of Special Needs teachers in her school and they met regularly. The other three SENCOs went ahead with the study. They were SENCOs at what will be referred to as Barnswood School, Valley School and Ashurst School.

5.3 Amount of Sessions Worked

I worked with the three SENCOs at their schools for one academic year. Although originally the amount of sessions offered was up to fortnightly, fewer than fortnightly sessions were taken, due to all three SENCOs not wanting to immediately resume sessions after the Christmas break, and due to the demands of school life leading to regular periods of three weeks in between sessions for much of the time. Due to variations between each SENCO's demands and needs, the amount of consultation sessions that took place at each school varied in number. The sessions that took place are as follows:

- Barnswood School – ten sessions
- Valley School – eleven sessions
- Ashurst School – fourteen sessions

5.4 Close Analysis of Three Sessions from each School

5.4.1 Introduction of Schools

Each school is introduced under the following headings:

- Context
- How the SENCo experienced her work
- Initial Needs and Expectations Feedback
- What took place in the consultation sessions?
- My experience of the SENCo and the consultation, and the relevance of this

After introducing the schools under the five headings outlined above, a detailed analysis of three chosen sessions is presented, within the context of brief summaries of the sessions prior to and after the three chosen sessions. After each session, the themes that emerge are summarised. Using a Grounded Theory methodology, I initially analysed emerging themes from all the sessions. These themes are summarised under the title of Initial Coding.

In supervision, I was pointed towards more detailed themes for each session. I examined the emerging themes and the material more closely, using a more focused coding method, and the themes were thus defined more clearly. They are summarised under the title of Focused Coding. At the end of all three sessions, the summaries are repeated under the title of Focused Coding. Links between the three sessions are examined.

In examining summaries of themes, I became interested in reasons why these themes emerged. I decided that if I traced my countertransference responses throughout my work, I could gain an insight into the emotional experiences of the SENCos. I made a table of the countertransference responses and a brief analysis.

From the Focused Coding themes and the countertransference responses, I looked more closely at the relationship between the projections from the children to the SENCos and from the SENCos to me.

5.4.2 Barnswood School

5.4.2.1 *Context*

Barnswood School is a small village school with an intake of mainly White British children from owner-occupied houses and about a third of children from the village council estate, who are also White British. Many of the children living in the council estate receive free school meals. The school has eighty children on the school roll. Twenty of these are on the SEN register. This is twenty five per cent of the school. Of the twenty children on the register, there is one child who receives a Statement of Educational Needs for Autistic Spectrum Disorder (ASD), seven on School Action Plus (SAP) and twelve on School Action (SA). Of these children, five have Emotional and Behavioural Difficulties (EBD).

It is of note that there are a proportionately large amount of children on the Special Needs Register. Nearly half the register is made up of children on free school meals, all of whom live in the village council estate. The other half of the register is made up of children from the rest of the population. There is a stark contrast in this village between the owner-occupied houses and the council estate. Thus, the reason for there being a disproportionately large amount of children on the Special Needs Register is not just a socio-economic one, as half of them are from owner-occupied houses. In my own experience of being a SENCo in village schools, it is the case that in a school with a relatively small amount of social deprivation, more children are put on the register, as there is more room in the SENCo's mind for those children who struggle. This reason is further evidenced by the large proportion of children on School Action (twelve out of the twenty on the register). School Action is categorised by children who are considered by staff within the school to need extra help and support. School Action Plus is categorised by children who are receiving help from agencies outside the school as well. Thus, the large proportion of children on School Action in Barnswood School reflects the fact that the SENCo, together with the CTs, has more room in her mind, and in her capacity for resources, for children who, in a larger school with more social deprivation, might not reach the category of School Action.

5.4.2.2 *How the SENCo experienced her work*

At the time of participating in the research study, Linda, the SENCo, was relatively new to being a SENCo; she had two years previous experience. Prior to that she had been a Class Teacher (CT). Linda worked one and a half days a week at Barnswood Primary School as a SENCo and one and a half days a week as a CT. At the time of this study, she had worked there for a year and throughout our work together was still employed on a temporary basis. Thus, there was a lack of permanence and security in Linda's role. She supervised Teaching Assistants (TAs), devised timetables and Individual Education Plans (IEPs) for pupils, advised and liaised with CTs, took small groups and met with other professionals from outside agencies.

Although there might have been room in Linda's mind in this village school for her SENCo work, there was no room provided for her by the management of the school in a practical sense. She had no room in which to work and her resources were stored on a small shelf in the staff room. Linda had a desk in the staff room and took her small groups in the corridor. There was a distinct lack of space. The reason for this could be linked with the possibility that in a small village school with little social deprivation, Special Needs do not rate highly in the Head Teacher's and governors' list of priorities. Linda was a SENCo who had to be there by government recommendations but who was perhaps slightly unnecessary in managers' views.

Linda stated that she was on a 'mission' to create a higher profile for Special Needs in her school. When she first arrived at her school, there was no area in which to take small groups. She decided to try to create a Special Needs area in one of the corridors. She moved a cupboard and a desk into the corridor and created a display board for Special Needs. She regularly asked the Head Teacher for meetings to discuss her working space, her resources and her position within the school. Linda felt that she should be a part of the senior management team within the school in her position of being a SENCo, and wanted to try to address this. Her lack of status was apparent throughout our work together.

Linda had two of her own children at the school and she was very involved in the school both as a teacher and SENCo and as a parent. She ran after-school clubs and was an

active parent in the school. Linda stated that she loved the school and loved to teach the children. She enjoyed the 'family' atmosphere and felt that the children benefited hugely from the 'small school' ethos. Linda's parental role and love of the school could contribute to why she seemed to lack status, space and security in her role as SENCo. She joined the school as a parent before she joined it as a SENCo, so it could have been the case that the Head Teacher was still making a transition in her own mind from Linda being a helpful unpaid parent to being a professional within the school.

5.4.2.3 *Initial Needs and Expectations Feedback*

In her 'Initial Needs and Expectations' form, Linda stated that she would find the following useful:

- she would find useful a deeper exploration of the theme of self esteem
- she would find useful a deeper exploration of the motivation of reluctant learners
- she wanted specifically to discuss individual children

What came across in this form was Linda's wish to more deeply explore themes that later emerged as being relevant to the two individual children that Linda eventually focused on, although in the work she clearly explored the theme of self-esteem in herself too.

5.4.2.4 *What took place in the consultation sessions?*

I met with Linda for ten sessions, consisting of five in the Autumn term, two in the Spring term and three in the Summer term.

The boys Linda focused on were Tim and Matthew. Linda said that she chose these boys because they caused her the most concern and took up a lot of her time. Both Tim and Matthew had low self-esteem and were reluctant learners. A brief summary of the current situation of both boys is relevant here as Linda presented them quite frequently in the work.

Tim

Tim is an eleven-year-old boy who lives with his mother. The father is absent and there are no siblings. Linda describes the mother as having mood swings. She is often depressed and Tim, aged ten, is at those times seen wandering around the village by himself. He often comes to school with no packed lunch, no P.E. equipment and is sometimes dirty and smelly. He can be disruptive in class. Children's Services are involved.

Matthew

Matthew is a nine-year-old boy who is on the Autistic Spectrum. He functions at a Reception level academically. His parents are very supportive and try to help the school but their natural anxiety often means that Linda spends a lot of time reassuring them. Matthew is reluctant to learn and struggles to socialise. He is described as being 'in a world of his own.'

As well as a focus on Tim and Matthew, what took place in the consultation sessions was a focus on Linda's role and her struggles to be given more space, security and status. At one point in the sessions she referred to them as her 'own supervision.' This awareness of how she was using the sessions took place after the Christmas break, when she re-engaged with the work after some initial reluctance to do so. For that reason the sessions prior to and after the break will be looked at in detail.

5.4.2.5 The consultant's experience of the SENCo and the consultation, and the relevance of this

I identified with Linda's struggles as a SENCo, and initially experienced her as a conscientious but anxious worker. By the end of the consultation sessions, I felt that they had been successful, with the positive outcome of Linda feeling less anxious and confident enough to re-negotiate her status in the school; further, Linda applied and secured a more senior post for the rest of her working week.

Of all three SENCos, Linda was the one who used me the most for her individual development. I experienced this as affirmation of my worth as a consultant. Yet during the course of the sessions I experienced feelings of an opposite nature, especially during

the period after the Christmas break when Linda didn't re-engage until March of the following year.

If we view these experiences in terms of the transference and countertransference we can trace Linda's lack of confidence matching my own. Initially, I identified with a struggling but conscientious SENCo who felt that she was 'only a teacher'; in turn I was struggling to be a good consultant when feeling very new to the job. Linda was perhaps unconsciously communicating her feelings to me; I recognised them in myself, but was helped in supervision to see them also as countertransference responses.

This pattern continued. Linda then experienced a crisis of confidence as she reflected on her role. She clearly didn't want to continue with the consultation sessions; I in turn was considering abandoning the study as I felt that it was not working. Then as the sessions reached an end it seemed that what had been worked through reached fruition, with a new confidence in Linda; I in turn felt confident in my role as a consultant, and felt affirmed by Linda, as Linda felt affirmed by her senior management team.

This relationship between the SENCo and the consultant is of great value in giving us information about what might be experienced within the school. Linda's lack of space, permanence and status would be likely to have been also experienced by the children and CTs with whom she worked, affecting their confidence in the provision of Special Needs. As Linda increased in confidence, it is likely that not only I increased in confidence but also the school staff and children. It would be interesting to carry out a follow-up study tracing the confidence of the staff group around the area of special needs and tracing the confidence of the children on the SEN register.

5.4.2.6 Detailed Analysis of Three Sessions

Brief account of work so far

SESSION ONE

In Session One, the contact between Linda and me consisted of a useful discussion based on her Initial Needs and Expectations form. She showed me her lack of space in the school and seemed to value the time to talk about the struggle she had had trying to set up a Special Needs Department. She remained slightly distant throughout the session.

SESSION TWO

In Session Two, Linda discussed Tim, with an emotive rendering of him not being allowed to perform in assembly due to bad behaviour in school. She described herself intervening for him and then his mother not appreciating his efforts when he eventually did perform in assembly. Linda told me that Tim was on a reward chart. She initially questioned the value of reward charts but when I agreed with her that it was a problem if children were unable to achieve targets, she became defensive. She then became more thoughtful when I spoke about Tim and his mother seeming not to want to take responsibility for their actions, instead giving all the responsibility to school staff, especially Linda. Linda became quite emotional, as can be seen in the following excerpt:

Linda stopped again. She said how difficult this had been. It felt a bit beyond her. There was another child she wanted to talk about and she wasn't going to get round to that. She said she was just a teacher, and she had to be a SENCo, which was completely different. I agreed that the SENCo role was different to the Class Teacher role. It seemed a bit unclear at times. She agreed. She said she was trying to take on the nurturing role, and keep in with mum. She said that it could be hard to make Tim and mum take responsibility. She said that her fifteen years as a CT had hardly helped her for this job. There were so many different people. (Session 2)

SESSION THREE

In this session Linda was enthusiastic about the consulting work and was keen to get started. She talked about Tim again and also Matthew. At the end of this session, Linda said this was like her own supervision. She spoke about how much she valued it.

I began to identify with Linda and recognised her anxieties and struggles to be a SENCo when she felt unqualified to be one. I identified with her from my own previous SENCo work, and also with my current role of trying to be a consultant when I felt new to the process.

Three Sessions in Detail

SESSION FOUR: 22ND NOVEMBER

Linda's busy working life was immediately apparent at the beginning of the session, as she came into the reception area just after I did, telling me she had just come from teaching a group out in the annexe in the playground. Once in the staff room, she had to leave me for a couple of minutes while she went to check on a group she had left in the care of a TA.

Having fulfilled her duties, Linda was able to attend to her task of our meeting. She showed me a copy of a letter I had written to Tim's mother. Linda described the letter as 'a softly softly letter,' as she really wanted to keep Tim's mother 'on board.' Linda asked me if I thought the letter was OK, seeming to want to put me into the expert consultant role.³ On reflection, this was probably to do with her need for reassurance, as she had stated in a previous session that she felt unsure about what she was doing with this family, having to fulfil tasks she felt were more suited to social workers. It

³ In my original submission I wrote 'Linda asked me if *she* thought the letter was OK' rather than 'if *I* thought the letter was OK'. This is an interesting Freudian slip, highlighting my identification with Linda at that time. She was uncertain about whether what *she* had done was good enough, and I identified with her feelings of inadequacy. This was a common theme, and I frequently had to untangle in supervision how much the feelings of inadequacy emanated from me and how much they emanated from Linda.

struck me as a thoughtful letter, encouraging and clear, and I shared my thoughts with Linda. Linda's response to the reassurance can be seen in the following excerpt:

She responded to my reassurance with a sigh of relief, then said that if the Deputy Head had his way, they would not be being so gentle with mum now, but Linda wanted to give mum one last chance. She said she was hoping to get her along to a Common Assessment Framework (CAF) meeting. It was noticeable that as soon as Linda felt some relief at my reassurance, she was able to tell me about the split in the school system, where the Deputy Head wanted to be firm, perhaps adopting a more paternal role, and Linda wanted to be 'softer,' leaning more towards a maternal role. It was presented as a split rather than as a potential use of two different styles that could be applied to the problem, and provided some evidence for Linda's statement in the first session with me that she was not part of the communication between senior managers in the school, which was hard for her because she was fulfilling a role that was senior to that of Class Teachers. I wondered where the firmer, more paternal part of herself was in her current role. (Session 4)

This response can perhaps be understood as an internal split and conflict Linda experienced, indicating her own difficulty with the firmer, more paternal role in herself, currently fulfilled by the Deputy Head (DH).⁴ We could see Linda's comment about the DH as a projection into him of the paternal part of herself, leaving her feeling more comfortable with the more maternal part of herself.

Linda then went on to ponder her problem of when and how she should give the letter to Tim's mother. The conflict between Linda's different roles emerged strongly as she told me that Tim was coming to her house for tea that evening with her son who was in the same class as Tim:

I said it was so hard to hold onto roles and boundaries. Linda agreed, saying it was 'doing her head in' at the moment. She said that at school, she was Mrs H, then at home, she was mum. (Session 4)

Subsequent supervision pointed me to the fact that Linda in reality holds dual roles as teacher and mother and normally manages those dual roles, but with Tim's family in her

⁴ It is of note that while Linda was struggling with an absent internal father, Tim was also struggling with an absent father. Etchegoyen (2002) points to the father's capacity to contain the mother's anxieties to help her respond to the infant's projections and needs. That capacity seemed to be missing for Linda and Tim, both internally and externally.

mind Linda is feeling a huge split within herself, and has already alluded to a split within the school over the family too. The reassurance I gave enabled Linda to feel some relief, and to talk about personal and school splits. This could have led to more bringing together of authority (the Deputy Head's stance) and nurture (Linda's stance) and the lessening of the split roles and positions. However, I had previously agreed to observe Tim in class for that session, so the discussion had to end when the observation began.

It was frustrating not to be able to pursue the discussion but gave me an experience of the many different roles a SENCo currently has to have within a school, encompassing teaching, advising, observing, facilitating meetings and consulting with parents. In choosing whether or not to respond to Linda's previous invitation to observe the child, I had already been drawn into an internal conflict about whether to observe or not, as I had stated that I would not be working with individual children. I eventually considered that an observation did not fall into the category of individual work and would give the SENCo the benefit of my Child Psychotherapy observational experience. My role as a consultant, a researcher and a Child Psychotherapist was beginning to feel split like Linda's role as teacher, SENCo and mother.

THE OBSERVATION

The observation took place during a literature lesson, where the CT had just read a text to the class, and she was now telling them to find a partner and to work together on a work sheet. I was able to observe Tim being more pre-occupied with his peers than with the CT, so that when she was talking to the class, his chair was almost facing away from her towards his peers, whom he was watching and checking. He found a partner but was distracted from working with him by a girl sitting opposite, who he kept kicking, until the girl complained to the CT. Tim and his partner were moved and Tim tripped up on his way to another seat. I was beginning to feel quite anxious. When the CT came close to Tim and explained to him what he should do, he visibly calmed down and engaged with the work very well. He asked her several times for reassurance that he was doing well. He kept checking with other people to see if he and his partner were 'doing it right' and he asked the CT three times if he was

‘doing it right.’ When the class became too noisy the CT asked them to lower their voices. She asked twice and each time Tim was unable to lower his voice, while the rest of the class managed to lower their voices. However, when the CT came over to Tim, put her hand on his shoulder and asked him, he did lower his voice. (Session 4)

FEEDBACK FROM OBSERVATION

This observation enabled me to feedback to the CT and to Linda how helpful it seemed to be for Tim to have frequent moments of an adult coming close to him, reassuring him, explaining things to him. The CT seemed to be helped by this feedback. She told me that she was becoming increasingly annoyed by Tim’s mother, and she was finding it hard not to tell her that she was ‘an unfit mother.’ Because of these feelings, Tim’s CT said that she was trying to remove herself from Tim’s mother and leave it to Linda to deal with her.

I thought about the fact that the CT left it to Linda, who in turn told me that she felt unsure what to do. It seemed that there was a process of a projection of overwhelming feelings around Tim’s mother, who was projecting into the staff her own feelings of being overwhelmed at managing to be a mother. She must have felt aware of the ‘authoritative’ school and Social Services ‘keeping an eye’ on her, which she could have experienced as helpful but perhaps her continual refusal to engage with the services could reflect a mother who felt ‘unqualified’ to be a mother, as Linda felt unqualified to be a SENCo.

I began to feedback my thoughts to the CT and Linda about the projection of overwhelming feelings but was interrupted by the TA coming into the room. Linda brought the TA into the conversation too. I explained to her that we had just been thinking about Tim’s mother feeling overwhelmed and about Tim’s anxiety. The TA replied, ‘Excuse me, are we talking about the same boy? It is Tim we’re talking about, isn’t it? I don’t see him as anxious at all.’ This comment was made angrily and was experienced by me as anger against myself. The TA then seemed to state what really angered her – Tim’s mother. She said she thought a lot of it was to do with home. He

just came in to school some mornings in a mood. She said his mother didn't bother. The similarity of the CT's anger and the TA's anger towards mother was striking. I wondered where I stood in the transference relationship, as I had felt the recipient of anger with the TA's comment. I thought that I might be perceived as a 'mother figure' coming into the school giving advice but not really bothering to do the work required of her, to work directly with the children. Linda suggested that everyone should go into the staff room to get some coffee. I wondered if the TA's anger with Tim's mother being so directly expressed was too painful to hear and led to an exit into the staff room.

This exit into the staff room can be linked with Linda's 'exit' from the sessions that followed over the Christmas break. She prolonged the break, and I wondered subsequently if the feelings of abandonment that were prevalent in this session contributed to the extended break. Linda and the CT began to speak to other staff members, leaving me with the TA, feeling slightly irritated that I had been abandoned with the TA's anger. I was perhaps experiencing what the TA often experienced, as she had to deal with Tim's anger and might have felt abandoned by other staff members to manage him. Tim in turn might feel abandoned by his mother and angry with her, and these feelings are triggered at school if he does not get more than his share of 1-1 adult attention, as if to make up for what he doesn't receive at home.

I tried to pursue the TA's thoughts about Tim's problems being to do with home and asked her to explain more. In the following excerpt, we can see the TA jokingly bowing to the 'expert' consultant, in an almost mocking way, but the beginning of a shift in her thinking can be seen after she is told that she and her colleagues have the insights into Tim, and she seems to respond to having her own 'expertise' affirmed:

She said she was a single mum, so she knew what it was like, but Tim's mum just didn't bother. Then Tim just flips off into one. I said, 'So we could think that Tim is not getting enough attention at home'. The TA replied that I was the expert, so she bowed to me (making the gesture), with some contempt, but she thought that they at school always gave him good attention – they didn't encourage negative attention. I said if we could think about him not getting enough attention at home, perhaps he might be seeking attention in whatever way possible. The TA began to listen. She said to me, 'So what are the strategies then?' I replied that I really wasn't ducking out of strategies and it would be useful for us all to meet again to discuss it further, but for now I really thought that the people working with Tim had the insights into him, and I could

help them to think about them. The TA said yes. I asked her what thoughts she had about it. She said that she sorts Tim out when he flips into one. I asked how. She replied that she tells him to stay calm. I added that perhaps she could even pre-empt the mood and help Tim to think about how he was feeling and what could happen when she could see him needing extra attention. She nodded. I quoted from my observation when Tim needed to check with everyone to see if he was doing the right thing. The TA responded by saying, 'Aah, poor lad.' She seemed to soften. (Session 4)

The break had finished and it was time for me to go. Before leaving, I agreed with Linda that we would meet in a couple of weeks.

THEMES EMERGING FROM SESSION FOUR

- Initial Coding

1. The busy schedule of a teaching SENCo
2. SENCo's need for reassurance
3. SENCo's senior role not being included in the senior management of the school
4. The staff group feeling unsure about how to manage Tim's mother, and Tim's mother feeling overwhelmed and unsure about how to manage parenting
5. Feelings of anger and abandonment in staff, Tim's mother, in Tim and in the consultant

- Focused Coding

1. Lack of time, space and resources
2. Uncertainty about complex roles and need for reassurance
3. Feelings of anger and abandonment experienced by child, mother, staff group and consultant

SESSION FIVE: 6TH DECEMBER

I waited in the reception area for about five minutes for Linda. This was unusual in my experience so far. In the staff room Linda was welcoming, as usual, but she asked me if I had received her message that morning to cancel the session. Feeling slightly anxious, I explained that I had been in a meeting all morning and had come straight to the school.

This wish of Linda's to cancel the session can be thought about in terms of the previous session, where the exit was made into the staff room. Feelings of anger and abandonment were palpable in that session. My feeling of anxiety could be understood in terms of a countertransference response to Linda's anxiety about the negative feelings. In supervision, I saw how the material from Session Four had spilled over into Session Five.

Linda had prioritised the Educational Psychologist above her appointment with me; she had been offered a last minute appointment due to a cancellation to discuss Matthew, for whom Linda was trying to obtain a Statement of Educational Needs. I offered to leave but Linda said she would use the time with me anyway and shorten it to thirty minutes. She added that she would like to cancel the appointment in two weeks' time because they had so much going on at school, with plays and parties.

I offered my understanding and said that we could pick up the work again next term. At the time, I did not register my feelings about Linda prioritising the Educational Psychologist. It was only afterwards when I had had time to process what had happened that I felt hurt and abandoned about the fact that Linda had squeezed in and prioritised the Educational Psychologist, who was offering something that might have felt more concrete than the help I was offering. I knew that rationally Linda had probably made the correct choice, as the result of seeing the Educational Psychologist would be that Matthew, who Linda had discussed with me, would be another step further towards receiving his Statement of Educational Needs. I thought that this prioritisation was one that I might have made as a SENCo, given the time restraints and the pressure on SENCos who want extra help for their children and are only able to obtain it through Statements of Educational Needs. However, I now began to question

my value compared to the 'expert' Educational Psychologist. My confidence as a consultant was adversely affected and my slight anxiety returned.

Reflecting further on my feelings of abandonment, I wondered about the strength of the feelings conveyed to me in the previous session by Linda. Linda had expressed some conflicting feelings around her roles; the CT and the TA had also expressed some angry feelings towards Tim's mother, and Linda had abandoned me at coffee time to pursue the TA's angry feelings by myself. I wondered if perhaps Linda had now entered a form of flight from the prospect of focusing on such difficult feelings again.

After this difficult beginning, the session continued. Linda and I began to talk about my observation from the previous session, on Linda's request. I took out my observation notes and spoke about Tim's behaviour in class, in more detail than I had done last time during the feedback. The discussion that followed reveals a lack of confidence not just in me but also in Linda:

Linda told me that Tim's mother had not responded to her letter. Tim's school attendance was very erratic. Linda thought that his mother might be low in mood at the moment. I said that Tim's mother might be responding a bit to the time of year, and that it could be hard to keep going with the dark mornings and the cold weather. I thought to myself that Linda's letter, about which I had reassured her, had not been effective. She told me that she would have to hold a professionals' meeting for Tim and that she really wanted a representative from CAMHS to be there i.e. myself. I said I thought that I could do this but I would talk with my CAMHS colleague to see if he was going, as he would be starting therapy with Tim soon. Linda looked slightly disappointed. We went back to the observation notes, both seeming to need a framework to help us with this session, possibly because we felt a lack of our own internal frameworks.

(Session 5)

In looking back at this discussion, the lack of confidence in me about the letter, and my uncharacteristic, almost dismissive explanation for Tim's mother's mood, could be seen in terms of a countertransference response to the lack of confidence Linda felt about the situation around Tim and his mother. Compared to the clearer needs of Matthew, where an application for a Statement of Educational Needs could really help him, Linda might have felt quite abandoned and alone with this more complex case, where there were fewer clear cut answers. My comment about the dark and the cold could have been directed to Linda and myself, trying to keep going with this difficult case. Linda was

clearly feeling alone with this problem, and perhaps abandoned by other services and colleagues, including me, who wasn't offering answers. In turn, Tim's mother was most likely to be feeling alone and unconfident, as Tim himself probably was too.

The discussion about the observation became more focused. I began by pointing to Tim's anxiety. I responded to Linda's request regarding what the CT should do by offering advice. This is an interesting contrast to my response to the TA in the previous session asking for strategies. In that instance I had helped her to feel empowered to think about her own strategies:

I said that the main point that had struck me from my observation was Tim's anxiety. Linda looked surprised. She asked how this was the case. I said that his continual looking around his peer group seemed to have an anxious quality to it. Linda said that seemed to make some sense. She said that the CT had asked what she could do to help Tim to listen and to join in. I suggested that the CT frequently speak individually to Tim, as she passed him in the classroom, that she frequently looked at him, and that she let him know that he was in her mind. I was aware that the strategies were given from an expert consultant stance, which seemed appropriate. However, in doing this, I was also aware that I might be inadvertently bypassing Linda's existing knowledge and capacities. (Session 5)

I was clearly aware that I might not be enabling Linda to find her own knowledge and capacities but I remained in the expert role. Perhaps it not only felt appropriate but also necessary in the face of the anxiety in the staff about Tim.

A shift in the confidence of Linda and of myself took place when I offered some thoughts about Tim feeling like he might have done as a young baby, not being held in mind:

Linda asked me why Tim was like that. I talked about how he might have felt as a very young baby with a depressed mother, who couldn't hold him in mind, and that she still couldn't, as she forgot his PE kit, his lunch etc. It was as if he felt dropped out of her mind all the time. Linda looked very sad and said how really sad that was. She said the session had actually been really helpful and perhaps next time we could focus on Matthew a bit too. I said of course. I was aware of feeling more confident, as Linda affirmed for me that my work was helpful to her, and that she wanted to use it for Matthew too. Perhaps Linda in turn felt more confident that she now had more insight into Tim to offer the network around him. (Session 5)

At about this time, other staff began to come into the staff room. Linda suggested that she and I move into the HT's office for a while. Linda checked with the HT if this was alright, who responded by saying that she needed to move some things from her room first. In the privacy of the room, Linda complained about the removal of things, saying that all we had needed were a couple of chairs and some peace. She told me that the HT could be difficult at times. I replied that I was aware that it had been hard for Linda to open the lines of communication. Linda nodded.

Linda talked about Matthew, about how the CT could manage him, because he was different to Tim; he needed bringing out of himself. I wondered about the fact that Linda could now feel able to focus on Matthew a little. We both thought about how Matthew's CT could let Matthew know by her words and gestures that he was in her mind. We thought further about the similar needs of Tim and of Matthew, despite their different presentations, where they both had a young needy unmet part of themselves.

It was time to finish. Linda said in parting that she would call me during the first week of next term.

THEMES EMERGING FROM SESSION FIVE

- Initial Coding

1. What will emerge from anger? Fear of anger leads to flight.
2. Feelings of abandonment, feeling alone, feeling a lack of confidence, feeling anxious, in Tim, his mother, the SENCo and the consultant
3. A mutual feeling of increased confidence in the SENCo and the consultant as they each feel more affirmed in their skills.
4. Variations in valuing expert and process consultancy approach
5. SENCo feeling resentful of not being allowed free entry into HT's room
6. CTs letting pupils know that they are being kept in mind

- *Focused Coding*

1. Feelings of anger, abandonment and anxiety in child, mother, SENCo and consultant
2. Flight from anger
3. Considerations of consultancy approach – which approach leads to more confidence and reflects more confidence?
4. Uncertainty about complex roles between the SENCo and the HT

SESSION SIX: 6TH MARCH

This session took place three months after the previous session. At the beginning of the Spring Term, during the second week, I had phoned Linda to arrange another appointment, aware that Linda had not phoned me, as agreed. Linda had said during this phone call that she would call me once the term had settled in properly. After waiting for a month, by now feeling anxious, I called again a week before the half-term break. Linda was a little apologetic and said the term had flown by. She said she would call back after the half-term break. I waited until the end of the first week back after the half-term break and called Linda again, offering to end the consultation sessions if she wished. Linda expressed a wish to continue and again apologised for not calling back. An appointment was arranged for 6th March.

I was unusually ten minutes late for this appointment. Linda was sitting in the reception, clearly waiting for me. This was a reversal of the beginning of the session before the Christmas break, where Linda had kept me waiting. There was a good reason for being late but it is of note that my lateness took place in the first session back after Linda had kept me waiting for three months, and perhaps there was an unconscious anger in me at having had to wait and to chase.

In the beginning of the session Linda asked me about my training, perhaps showing that there was a feeling in Linda that the consultation sessions were more for me than for her. I was aware of feelings of uselessness and abandonment around feeling 'not needed' as a professional:

We spent the first ten minutes reconnecting. Linda asked me how my training was progressing. She asked me what my job had been before this training. I reminded her that I had been a teacher and SENCo, like she was. She remembered and said it seemed like a natural progression to go from being a SENCo to a Child Psychotherapist. I said I remembered her interest in my training at the beginning of our sessions together. She said she was still interested. (Session 6)

On reflection, in terms of re-connecting, I was reminded of Stern's chapter on 'Mis-steps in the Dance' (1977). In the two sessions before the Christmas break, Linda had kept me waiting, and in this session, I had kept her waiting; we had 'mis-connected,' like the mothers and infants Stern refers to who are not able to achieve attunement and reciprocity. By remembering points of interest about each other, we seemed to be attempting to re-connect. After this re-connecting, we were able to begin work together again, and we soon began to reflect each other's anxiety and lack of certainty in our roles:

We sat down at the table in the corridor that Linda uses for her groups. Linda suggested that she should update me, as there had been a long gap. She told me that she had applied for Matthew to have a statement, and hoped that she would get it soon; then he could have a TA assigned to him. I said that sounded really good for him. Linda asked me if I had ever made a statement application as a SENCo. I said I had but that was a long time ago and it had probably all changed now. Linda said it had. I was left wondering if Linda was asking me if I knew about her work, if I remembered how hard it was, and if there was an underlying parallel process of her feeling uncertain about being a SENCo, and of me feeling uncertain about being a consultant, after this long break. (Session 6)

Linda went on to talk about Tim. She said they had held the professionals' meeting, and the therapist from CAMHS had been there. I thought to myself that my background work had been successful, as I had spoken to the therapist who had just begun work with Tim after my last meeting with Linda, and had asked him if he could attend the professionals' meeting. Linda said there had been some good outcomes. The therapist was going to liaise with Adult Mental Health Services for Tim's mother's recently diagnosed bi-polar disorder. Therapy would begin for Tim and a local outreach service was put in place where someone would go into the home every week. I said it sounded like some good measures had been put in place to help with this family's struggles. Linda said she had had to be the lead professional, as the school had called the meeting,

and it had been quite daunting. It had been her first CAF meeting. She said that she didn't really know what she was doing – she was only a teacher. At this point, I had a thought about Linda's struggle to remain with a point of development. I perhaps also had this thought because of an unconscious awareness that I too was 'only a Child Psychotherapist' and not a consultant:

I was reminded of a recent supervision, where it was pointed out to me that as soon as Linda became aware of a point of development, in this case leading a professionals' meeting, she retreated to being a teacher. Both she and I felt more confident as we thought about the good work we had done, but Linda found it hard to remain in this more confident state. (Session 6)

Linda went back to talking about Matthew, and I thought about a flight from difficult feelings. Linda said she had put Matthew in a Social Skills group and he had been really hard work. An exchange then followed where Linda and I connected and re-connected, as before:

She said that Matthew always managed to spoil things for himself and for others. She said that of the two boys, Tim was much more approachable and endearing. I said that Linda was clearly drawn to Tim. She quickly answered, 'No more than to Matthew,' adding that she would never favour one child over another. I said of course not, endorsing Linda's defensive response, and added that perhaps Tim was a child who made people feel warm towards him. Linda nodded, then asked me how my research project was going. I felt that we were re-connecting, then losing the connection, as Linda changed the subject each time it became too challenging. (Session 6)

Linda became defensive about her feelings towards Tim, then quickly changed the subject back to my research project, perhaps again unconsciously wanting to remind me that my need for the consultation was greater than hers. I answered Linda's question about my research project in a positive and general way. It seemed that she in turn needed to become a little defensive and on her guard. On reflection, the negative feelings that were being discussed were perhaps difficult for Linda to make use of. What followed seemed to confirm for me that Linda was struggling with many negative and conflicting feelings:

Linda said she hoped she wasn't the only SENCo wanting to see me alone. I said it might feel hard to show a wish for supervision help. I added that by the very nature of her work she was inevitably going to encounter feelings of

vulnerability, being unsure of her role and feeling daunted at meetings, so of course she didn't want to show more vulnerability by seeming to need supervision. Linda said yes, sometimes she went home after a day at school, did some work at home and she felt like her head was being ripped apart with all the things pulling at her. She wondered if it would be easier to get a job at the stables mucking out the horses. We smiled. I said I thought it would help her to be an effective SENCo to be aware of her vulnerabilities. (Session 6)

This interaction shows a shift in Linda's state of mind from repressing her anxiety to expressing and addressing it. This was a significant turning point for Linda. It was brought about after I addressed Linda's fear of vulnerability, although the two sessions before the Christmas break, with strong expressions of anger and withdrawal, together with the discussions Linda and I had had about the 'baby in the child' of Tim, all contributed to this turning point. Once Linda did express her vulnerability, I went on in the rest of the session to contain her anxieties, feeding them back to Linda in a different, more positive form. Linda experienced what she undoubtedly did for the children in her care as a SENCo, and seemed to respond well to having her own anxieties contained by someone else.

It was time to finish and as we arranged the next meeting, I was aware that the atmosphere felt easier between us; Linda seemed keen to meet again. I considered that the shift of Linda's state of mind had allowed us to connect for our work together. I also wondered about the length of the break we had just had being something to do with Linda resisting making that shift, and me feeling unconfident to help her to make it.

THEMES EMERGING FROM SESSION SIX

- Initial Coding

1. Re-attunement and re-connecting; not staying connected
2. SENCo and consultant both feeling anxious and uncertain about their role
3. Shift from a state of mind where anxieties are repressed to one where anxieties are expressed and addressed; subsequent re-connecting between SENCo and consultant, and consultant connecting with supervisory thoughts
4. Containment of anxieties by consultant and by SENCo

- *Focused Coding*

1. Anxiety and uncertainty about complex roles
2. Attunement and connecting aided by containment of anxieties

Brief Account of Completion of the Work

There was one more session before the Easter break and three after it, totalling ten sessions.

SESSION SEVEN

In Session Seven, Linda apologised twice for 'rambling', revealing perhaps a thought that she was 'too much' for me. I thought about Linda's work feeling like it was 'too much' for her, especially when Linda said that she had been having nightmares recently and needed a break. Tim was the discussed child, and Linda expressed a feeling of everything being 'too much' for Tim and his family.

Linda focused on the difficulty with having the SENCo/parent role, but also on the confusion within the school and within herself about her role. She questioned whether she was senior management and whether she should be paid accordingly. She did say that she felt a bit better after the last session, and was less anxious.

There was frustration about lack of space and in fact most of the session took place in a cold corridor.

SESSION EIGHT

In this session, Linda began by being more interested in my training than in talking about the work. As it was the first session after the Easter break, and the last session had been one in which Linda had expressed her struggles, I initially wondered whether Linda was attempting to enter a flight from difficult feelings again, especially in the light of the start of the last term of our work together.

Linda reported improvements in all sorts of areas: Matthew had received his Statement of Educational Needs and there was a TA in place; Tim was managing much better; Linda felt more sure of her role and had negotiated a more permanent post with the HT; Linda was applying for a new job that was part-time, like her present one, and involved a more senior post where she would advise other SENCOs on Special Needs. This led me to wonder if Linda's interest in me was more because things were improving for her at work and she therefore had space in her mind to have a genuine interest in me. It could also have been an expression of gratitude that she had felt helped to make improvements in her working life.

The lack of space was still an issue, and the session was moved twice; even the corridor was full as exams were taking place.

SESSION NINE

In Session Nine, Linda appeared composed and confident. The session took place in the HT's room, which Linda had arranged beforehand with the HT. This was a contrast to the previous session where Linda and I had experienced a homeless feeling of having nowhere to go. Linda had secured her new post and was excited about it, although she expressed some anxieties. She was able to focus on Tim and Matthew. She was particularly concerned about Tim's mother and, after talking to me, decided to call another CAF meeting. Again, the contrast between her initial reticence about chairing a CAF meeting and her confidence to call one was striking.

SESSION TEN

This was the last session, and there was a sense of mutual congratulation on me having successfully completed my Child Psychotherapy training and Linda's development of her current and new posts.

Linda discussed both Tim and Matthew in the session. As usual, Tim was the subject of more concern. There was a discussion about whether Tim's family should be referred to Social Services. Linda felt a little overwhelmed by this prospect and I was reminded of Linda's insecurities about the tasks in her role.

Linda gave me a thank you card, which confirmed for me Linda's gratefulness, and improved my confidence as a consultant. I felt a sense of immense pleasure at having helped Linda to develop the confidence to progress in her career.

Summary of Themes Emerging through Sessions Four, Five and Six

SESSION FOUR

- *Focused Coding*

1. Lack of time, space and resources
2. Uncertainty about complex roles
3. Feelings of anger and abandonment experienced by child, mother, staff group and consultant

SESSION FIVE

- *Focused Coding*

1. Feelings of anger, abandonment and anxiety experienced by child, mother, SENCo and consultant
2. Flight from anger
3. Considerations of consultancy approach – which approach leads to more confidence and reflects more confidence?
4. Uncertainty about complex roles between the SENCo and the HT

SESSION SIX

- *Focused Coding*

1. Anxiety and uncertainty about complex roles
2. Attunement and connecting aided by containment of anxieties

5.4.2.7 *Links between Sessions Four, Five, and Six*

Feelings of anger, abandonment and anxiety experienced by child, mother, SENCo/staff group and consultant is a theme that is common to two sessions. This theme is directly linked to the theme of a flight from difficult feelings. We can see the link when we trace through Sessions Four and Five in which there were feelings of anger and abandonment; these feelings were followed by a flight from anger in Session Five. In Session Six there was initially a lack of connection, which, together with the reluctance to re-engage, can be seen as a further flight from difficult feelings. The difficult feelings were exacerbated by the SENCo's continuing uncertainty about her role within the school and how it fitted in with other roles. Uncertainty about complex roles is a theme that is common to all three sessions.

In summary, a reaction to difficult and uncomfortable feelings can be traced through the sessions, and could explain why there was a long break in-between Sessions Five and Six. The reaction of the SENCo and her staff to the difficult feelings in Session Four can be seen as the point where the 'flight from difficult feelings' began. In Session Five, a clear wish can be seen in the SENCo to have cancelled the session. It was in Session Six, after the long break, that a shift took place when I named the vulnerabilities and contained the anxieties of the SENCo. This was a significant turning point. The theme of lack of time, space and resources can be seen to be a contributing factor to the anxieties and difficulties of the work throughout the sessions.

One of my main contributions to the developmental process undergone by the SENCo seemed to be not just what I said but my ability to remain with the uncertainty, the anxiety and the difficult feelings and to bear them through the process of the work. I bore feelings of abandonment, rejection and was the recipient of anger; I remained with the process, thereby helping the SENCo to do the same.

5.4.3 Valley School

5.4.3.1 Context

Valley School is a small village school with an intake of mainly White British children from owner-occupied houses and about ten per cent of children from the village council estate, who are also White British. The school has one hundred children on the school roll. Twenty-five of these are on the SEN register. This is twenty-five per cent of the school. Of the twenty-five children on the register, two children receive Statements of Educational Need, one of whom has been diagnosed with ASD and one of whom has EBD and is a looked after child. Five other children are on School Action Plus for learning difficulties and thirteen are on School Action for learning difficulties. Six of these have EBD.

It is of note, as with Barnswood School, that proportionately there are a large amount of children on the Special Needs Register. With Valley School, a smaller proportion of children on the register were receiving free school meals; this points to the likely reason for the large register being that in a school with a relatively small amount of social deprivation, more children are put on the register. As stated in the discussion around this area with Barnswood School, it was my own experience of being a SENCo in village schools that in a school with a relatively small amount of social deprivation, more children are put on the register, as there is more room in the SENCo's mind for those children who struggle. This reason, as with Barnswood School, is further evidenced by the large proportion of children on School Action, which is categorised by children who are considered by staff within the school to need extra help and support. School Action Plus is categorised by children who are receiving help from agencies outside the school as well. Thus, the large proportion of children on School Action in Valley School reflects the fact that the SENCo, together with the CTs, has more room in her mind and in her resource capacity for children who in a larger school with more social deprivation might not reach the category of School Action.

5.4.3.2 *How the SENCo experienced her work*

At the time of participating in the research study, Helen, the SENCo, was in her last year before retirement. She had thirty years' experience of being a CT and ten of being a SENCo. There was permanence and security in her role as a SENCo. Helen worked for two days a week as a SENCo and taught for a third day. In her teaching work, she took a mixed Reception and Year 1 class, consisting of ages four to six years. In her SENCo work, she supervised TAs, devised timetables and Individual Education Plans (IEPs) for pupils, advised and liaised with CTs, took small groups and met with other professionals from outside agencies. Helen was recognised as the Special Needs 'expert' within the school and was remunerated accordingly. Her status within the school was high.

Helen was an integral part of the school. In conversation, Helen told me that she had been teaching at the school for twenty years and was 'part of the furniture.' Her presence would be clearly missed. Helen stated that she loved the school and would miss it terribly when she retired. Her own children, who were grown-up, had gone to the school. She took an after school gardening club. She had been very active in helping a member of staff who had recently had to take time off work with personal problems. Helen was particularly committed to continuing the development of Special Needs within the school.

At the beginning of the consulting work, the school had just moved to new purpose built premises. Helen had her own Special Needs room where she held meetings and worked on her administration, and there was an area for small groups to be held in the school. She therefore had adequate space for her work.

Helen's experience of her work appeared to be in direct contrast to Linda's, as she had permanence and security, status and space, all of which Linda lacked. However, it emerged in the penultimate session that the HT and DHT were planning to retire the following year, and this added to Helen's feeling of deep insecurity about her post and her successor. All of her work in establishing the role of the SENCo in the school was suddenly under threat.

5.4.3.3 *Initial Needs and Expectations Feedback*

In her 'Initial Needs and Expectations' form, Helen stated that she would find the following useful:

- her overall goal for the project was to leave a strong SEN ethos.

Helen was making a clear statement that she wanted to plan her succession. She stated that she was keen to involve other staff members and families in discussions and meetings. There was a sense of a 'belt and braces' approach; Helen wanted to share what I had to offer with as many staff as possible, so that a way of working that Helen found useful could be reliably imparted to other staff who could apply it after Helen's departure.

5.4.3.4 *What took place in the consultation sessions?*

I met with Helen for eleven sessions, consisting of five in the Autumn term, three in the Spring term and three in the Summer term. The reason why there were more sessions in the Autumn Term was because Helen did not immediately re-engage after the Christmas break. The complexity of Helen's retirement, its impact on her and on other staff members, eventually became more of a focus of the work, but at first Helen did not appear to wish to use me to think about it. Very early on in the sessions with me, Helen introduced other members of staff and arranged meetings with parents and other professionals for me to facilitate, so it was not actually until the Summer Term that she had some sessions exclusively for herself. When these sessions took place, it became clear how painful and worrying her approaching retirement was for her. Bearing this in mind, Helen's wish to involve other staff in her work with me was a conscious part of her wish to leave a strong SEN ethos in the school after her retirement, and the work with other staff and parents seemed to be useful, but it could also be viewed as a response to not wanting to face the pain of her retirement in a one-to-one process, where the subject could arise.

The pattern of the SENCo not re-engaging after the Christmas break is similar to the one that emerged with the SENCo at Barnswood School. I examine this pattern in more detail in Section 5.4.5. However, of more interest with the SENCo at Valley School was the way in which she faced the pain of her retirement only in the last sessions. Sessions Nine, Ten and Eleven, the last sessions, will be looked at in detail.

Whilst involving other staff members and families, the focus of the work was on two children: Bradley and Ben. A brief summary of the current situation of both boys is relevant here as Helen presented them quite frequently in the work.

Bradley

Bradley is a seven-year-old child in the care of the Local Authority who is looked after by his foster mother. His behaviour at school can be very challenging: he persistently needs to be toilet trained, which requires special help from TAs and a separate toilet; he is unable to concentrate in class and easily distracts his peers by talking to them or irritating them when the CT is speaking; he can be aggressive in the playground.

Ben

Ben is a nine-year-old child of separated parents who both run very different households. Both parents are very devoted to Ben and share his care equally. Extended family help father in his care of Ben. Ben is often chaotic at school, and can hurt other children in the playground. He is easily distracted in class and distracts other children too.

5.4.3.5 The consultant's experience of the SENCo and the consultation, and the relevance of this

I experienced the SENCo as a warm and open-minded person who was very grateful for the work being offered. She often put me in expert role and would introduce me to other staff as an 'expert.' This was flattering and confidence building for me, and the relationship between us was very comfortable. Unlike Linda, Helen seemed to be confident enough, at the end of a successful career, to accept help and advice from

elsewhere; indeed, she welcomed it. I experienced this as evidence of how committed Helen was to her work, and it often felt as if Helen wanted to use every available part of my advice and experience for her staff.

There was a different experience in the middle of the consultation sessions, with reluctance to re-engage around the Christmas break. Sessions before the break occurred where Helen had forgotten I was arriving or had prioritised other commitments. At this time, I began to lose my confidence in the sessions and considered abandoning them. This was part of the pattern that was emerging with Barnswood School too, so perhaps it was inevitable that the experience of a lack of confidence in one school would affect the other school.

With supervision help, I continued with the work and it was then that Helen began to use the sessions more for herself, to look at her own process of retiring and what it meant for her. My experience of the sessions at this time deepened. I was challenged to use more of my psychotherapy skills and became more involved with Helen's thoughts of retirement. Helen became much more engaged again with the work during the last sessions. A parallel process can be seen between Helen and me where both of us entered into the work with more depth during the last sessions.

5.4.3.6 Detailed Analysis of Three Sessions

Brief Account of Work so far

SESSION ONE

Helen spent much of this session discussing her two pupils who caused concern – Ben and Bradley. She talked little about herself. I experienced Helen as a warm and conscientious SENCo. Helen invited me to observe the two boys as they played in the playground.

SESSION TWO

Helen spent this session talking in more detail about Ben and Bradley. She invited me to observe the boys in class and to talk to the CTs and TAs about Bradley, who was causing particular concern. I found Helen to be receptive to my thoughts about Bradley in terms of his early traumatic attachment history.

SESSION THREE

The beginning of this session was slightly chaotic, as Helen also had a visit from a Speech and Language therapist and seemed to have double-booked our visits. I moved quickly to the observation of Bradley, as it was difficult to engage Helen in any sort of conversation. Below is an excerpt from the observation that gives a sense of Bradley:

The CT called the Year Two children over to the carpet. They wandered over to it, with a bit of encouragement from the TAs. One TA left the room. The Year One children came in. The CT pointed out Bradley to me. He sat down, looked around him, saw the TA behind him and crawled nearer to her. He then turned around and stuck his tongue out at a girl near the back. The CT went straight into singing a song with the class. Bradley was attentive and joined in. He at times played with some cars on a shelf near to him, but he kept singing. He caught the TA's eye, who was singing the words with exaggerated gestures, so that her face was very animated. Bradley kept her gaze, entranced by her, for a minute or more.

The children were asked to stand up and make a shape with their bodies. Bradley refused to do it. He remained sitting. He became more involved with the cars. He also refused to join in with a number activity, where they had to hold a number square. He became more withdrawn, moved to the back and looked out of the window. (Session 3)

SESSION FOUR

As with the previous session, this one began with chaos. Helen explained that she had forgotten that I was going to talk today to the staff members who worked with Bradley. Helen had arranged to teach but she had managed to re-arrange last minute.

I talked to the staff about Bradley, helping them to think about his struggle with toilet training and its link with being removed from his parents' care at eighteen months old.

Many of the staff members found this link between Bradley's current behaviour and past experience to be very helpful.

SESSION FIVE

This session consisted of an observation of Ben. He was singing in a class assembly practice and managed to stay focused for five minutes then looked away and appeared to go into his own world for the next five minutes. This pattern continued throughout the practice. I discussed Ben's behaviour with the CT, who said that sometimes Ben was 'good as gold' and at other times he was very distracted and uncooperative.

SESSION SIX

This session took place near the end of term, on 11th December. Helen was caught up with the infant play rehearsal and with helping to cover a class for a CT who had just lost some money.

Helen only had time to talk briefly with me. She thanked me for my observation notes about Ben. They had helped to form part of the application for a Statement of Educational Needs.

At the end, Helen said she had lost her diary and couldn't make another appointment. I said that I would call early next term.

SESSION SEVEN

This session took place during the second week of February; this date was agreed after a phone conversation between Helen and me, after I had phoned her during the second week of the new term. I was shown into the infants' classroom. Helen and the TA immediately engaged me in conversation about Bradley; the children had just gone out to play.

Helen then took me into her room and talked alone with me. This was the first sustained session that was a 1-1 with the SENCo and me since the second session. During it, Helen entered areas of conversation that expressed more emotion than

previously. For example, she talked about loving the Reception class. She also talked about levels of stress in the staff group and the parent group, especially in a recently bereaved family.

I experienced a sense of Helen wanting to engage with the work at a deeper level, at a more exploratory level of the dynamics and emotions involved within the school as an organisation. I wondered about Helen entering this stage of the work after a slightly prolonged Christmas break, which might have been a resistance to thinking about her painful retirement. Also, the New Year heralded her retirement, and her retirement might have felt much nearer. Further evidence of a possible resistance could also be seen in Sessions Three, Four and Six, all of which had varying degrees of chaos in their beginnings, as if Helen hadn't kept her sessions with me in mind.

SESSION EIGHT

This consisted of another pre-arranged meeting with school staff about Bradley. The foster carer was also invited. She shared how life was at home with Bradley. The group talked again about Bradley's early life and I related my observation of his intent gaze at the TA in class when her face was animated and looking at him, followed by withdrawal when he had to join the group. I related this to him not receiving this experience enough as a baby. The foster carer told us that it was actually his older brother of seven years old who had cared for him. We considered how his absence would have been felt as a loss. The pain was palpable in the room as everyone focused on the infant Bradley, suffering neglect and possible sexual abuse.

Again, there was a lot of positive feedback, affirming for me a sense of confidence and usefulness.

Three Sessions in Detail

SESSION NINE: 4TH MARCH

Before this meeting, Helen had asked me if I could facilitate a meeting for all the adults involved in Ben's life. Helen's use of me seemed to be one where she wished to use me to support other staff members and to facilitate a family meeting. I was put into the role of expert and readily adopted that role, although an interesting dilemma happened at the beginning of the meeting, where neither Helen nor I were sure which of us should actually be the facilitator:

We all squeezed into the room, Helen and myself seated behind the HT's table. Helen moved the plant so I could see. There were five members of staff present, five family members and myself. I asked Helen quietly if I should kick off, feeling rather anxious and under a lot of pressure to be the expert. She nodded, but then kicked off herself. She said it was lovely to see everyone. (Session 9)

This seemed to show uncertainty and anxiety in the SENCo and in myself about our roles and about our level of expertise. I felt a little like a successor being catapulted into the 'chair' of the meeting, and perhaps Helen wanted it to be the case that someone who seemed competent would succeed her, (she had even moved the plant to give her new successor as much advantage as possible) but then at the last minute Helen took her power back by starting the meeting herself, showing her ambivalence about her retirement. It could be the case that the pressures at the start of the meeting affected our confidence equally. The pressures were in the form of there not being enough time and space, and also emanated from the anxieties of the family members as they waited in a crowded corridor:

I walked into the school a little early as I wanted to arrive before the family we had arranged to see. However, on my arrival, the secretary let me in to join the waiting family squeezed into the corridor. There were a mother and daughter, a young man, an older man and an older woman in a wheelchair. The family were joking about how many of them there were. The older man turned to me and said, 'He must be really bad to call us lot out.' Helen appeared and called out hello to me through the midst of the family members. I called hello and squeezed my way through them to join her. She and her assistants were busily moving chairs into the HT's room. Helen told me they had pinched this room to fit them all in, but it still wasn't big enough. (Session 9)

After Helen's introduction to the meeting, she reported that Ben was doing quite well. She turned to the CT for evidence. The CT said he had settled beautifully. He was to start full time school now. He hadn't been able to join in with the class and used to hide, but now he was much better. He could sit with them now and was able to put up his hand. He listened to books being read, with TA help. The CT showed the group one of his drawings, with the beginning of writing on it. Mother commented that he wrote his name everywhere. The CT summarised that he was doing really well.

I could see from the family's expressions and mutterings to each other that they were wondering why they were there with such a glowing report. When I addressed this issue, there were several nods in the affirmative. I said that Ben had been a concern, but was clearly now settling in, so this meeting was an attempt to keep him settled, and to bring the different parts of his life together. It was afterwards in supervision that I considered that my role was not just to bring the different family members together but to bring the different parts of thinking about Ben together too. I was also alerted to the fact that although Helen had introduced the meeting in her role of facilitator, I made my presence felt quite early on in the meeting by addressing the family's confusion about the meeting being called. Perhaps I was aware of not wanting to feel redundant, rather like Helen might have also been feeling about her retirement.

I continued taking a lead role:

I said we were aware that he lived with mum, dad and grandparents. It was lovely that they had all managed to come, and it would be useful for the staff to get a picture of the different people who looked after him, so we could ensure that we were all using similar approaches. Paternal grandmother said that Ben's father was very good with him. He did make sure he behaved well before getting what he wanted. She described how her son, Ben's father, read to and played with Ben. Helen said this was very good. (Session 9)

There appeared to be a possible power struggle between the two sides of the family, and between the SENCo and myself, as Helen then took the lead, and changed the focus of the discussion to Ben's eating:

Helen said that Ben's eating had been a problem. She asked one of the TAs, who goes to lunch with Ben, how he was. The TA said he was a messy eater, so

they gave him lunch in small stages. She said he would experiment with the menu and he always ate. She said he would never go hungry. (Session 9)

Another TA changed the subject again, perhaps vying for leadership as she sensed the power struggle between the SENCo and myself:

The TA moved on to the issue of Ben putting his coat on after lunch. She said he was a challenge but he is better now. Mum added that that might be her fault. She said that there is only her to look after the children and when she is in a rush, she does it for Ben. (Session 9)

A third TA changed the focus of the discussion again, to the subject of Ben's language:

The other TA brought up the subject of Ben's language. She said she felt that because that had improved, he was more coherent and could understand more. The CT nodded, saying he had improved. Even his tone of voice had changed. He used to stop listening but now he didn't do that so much. Helen said he used to hate loud noises. The first TA said he still did. His father said that he put his hands over his ears and squealed. (Session 9)

The question about who was leading the meeting led to me feeling quite overwhelmed, as it seemed that an increasing number of people in the large meeting were vying to initiate their own ideas about the focus of the discussion. This seemed to galvanise me into taking control:

At this time, I was struggling to facilitate the meeting; I was feeling rather overwhelmed myself, and wanted to put my hands over my ears, just like Ben had done. I took a deep breath and launched in with saying that I was aware we only had an hour and it would be good to hear a picture from each of Ben's carers of how he is. The family nodded. I began by asking what his week was like. Between them, the family told us that Ben was with his mother on Monday to Wednesday, and every other weekend, and his father on Thursday and Friday and every other weekend. Paternal grandfather dropped him off to school Thursday and Friday mornings and father picked him up. When he was with his mother, he spent quite a lot of time with maternal grandmother. I ascertained who was who and there was a sense of relief in the room as we all made sense of Ben's week and of his family. (Session 9)

This revelation about the structure of Ben's life offered relief to the group possibly because I had finally taken some control but also because the real question of leadership was addressed in Ben's life, as it became clear that Ben might experience a sense of there being not one parental couple as leaders but a group of parents, possibly leading to

him feeling overwhelmed like I had done as a countertransference response in the meeting. The vying for leadership could be seen as a countertransference response in all the professionals in the meeting, as they replicated a group of adults all trying to take responsibility for Ben.

It seemed that as a reaction to the relief, the CT suddenly said that Ben had got Pritt stick all over a chair recently. It felt very hard to keep the group on task. Everyone laughed about Ben's antics. On reflection, there might have been an unconscious link between glue all over the chair, sticking to the chair, and a boy who made the CT and TAs feel like he wanted to 'stick' with them, to make a connection, however fragile. This unconscious link was made more conscious by me when I asked Ben's mother if she could give a picture of him at home with her, and a lack of early connection between Ben and his mother was revealed, initially by grandmother:

She said she was alone with him. She described him as a pickle. She had recently ignored the bad behaviour and that was working. At bedtime, he wanted to be with his older sister and that was a problem for the older sister, although she was very good about it. Maternal grandmother said that she was a TA in another school, so she knew about children. She said that the big sister had received a lot of attention from her mother but that mother hadn't bonded with Ben. Mother agreed that she had really struggled with Ben and that she hadn't bonded so easily with him. Maternal grandmother said, almost as an aside, that she thought it was a case of baby blues going un-noticed. (Session 9)

After this disclosure of mother's lack of connection with Ben as an infant had been made, the mood in the room became more subdued. I felt a need to reassure, which seemed appropriate but can also be seen as a reaction to un-named anxiety about whether everyone had given enough to Ben:

I commented on how brave and honest mother had been to talk about her struggles. I said her explanations could help us to understand why Ben thrived on 1-1 attention. Ben's father said that he always tried to give 1-1 attention but he didn't want to force it on Ben. I said that of course that wasn't necessary, but when Ben wanted it, to give it where possible. Both grandmothers said that Ben received a lot of 1-1 attention from them. I realised as they spoke that at times maternal grandmother visited paternal grandparents to visit Ben at their house. Despite the separation of Ben's parents, there was a sense of an extended family trying to work together. (Session 9)

Finally, I asked father for his picture of Ben at home with him. He said the two households were together on things. They often phoned each other up to discuss things. Father said that Ben often refused to open his bowels. This comment led to agreement and views from the TAs. There was a general feeling that lots of children do this and Ben would grow out of it. Paternal grandparents said that Ben was ‘a lovely kid.’ Paternal grandfather said he couldn’t understand what the problem was; he said Ben was easy and ‘a great kid.’ A TA said Ben’s self-esteem had improved. She said he loved one-to-one time with her in reading sessions.

It was nearly time to finish the meeting. I closed it by summarising my impression that all Ben’s family cared very much about him and were willing to all sit in a room and think about him together. The CT and TAs added that it had been very helpful for them to get a picture of how Ben was at home. I thanked the family for all coming. Helen said how impressed she was with their care of Ben. Everyone agreed. As everyone finished and said goodbye, Helen suggested a home/school book. Everyone thought that was a good idea. The home/school book seemed to represent a linking function between all the different adults in Ben’s life.

THEMES EMERGING FROM SESSION NINE

- Initial Coding

1. Uncertainty and anxiety in SENCo and consultant about their roles
2. Ambivalence in SENCo about her retirement and her wish for a successor
3. Lack of a leader, expert role and subsequent vying for leadership in meeting and in child’s family
4. Consultant feeling overwhelmed and chaotic in the meeting and the thought that this might have been Ben’s experience at home
5. Lack of time and space
6. Unconscious feelings of guilt and anxiety about parental separation
7. The linking function of the home/school book and of the consultant in bringing together the different parts of thinking in Ben’s life

- *Focused Coding*

1. Uncertainty and anxiety about complex roles
2. Ambivalence about retiring
3. Confusion about responsibilities and leadership in family and staff group.
4. Consideration of consultancy approach and role
5. Lack of time and space
6. Role of consultant to bring together different parts of thinking

SESSION TEN: 18TH APRIL

This session took place six weeks after the previous session. There had been an Easter Holiday in between the two sessions. In the session, Helen directly addressed her anxieties about her retirement. Up until that point, she had mainly used the work with me to increase understanding in the staff and in herself about the complexities underlying children's behaviour, and not to think about her retirement. It was in Session Seven (our last individual session before Session Ten) that Helen had shown the first signs of wanting to use the work with me to reflect more on her own situation. Interestingly, Session Seven was also the first session after the Christmas break, where Helen had shown a little resistance to returning, but having had a break from our connection then reconnecting with me had possibly led to her being able to begin to use the sessions to think about her own situation. Now it seemed, with a return from the second break in our work together, plus the advent of her last term, and increasing awareness of her impending retirement, that Helen felt confident enough to use the work for self-reflection even more, and to address her difficult feelings about her retirement.

Helen began the session by saying that there were lots of issues arising in the staff room, in the absence of the HT and Deputy HT (DHT). Perhaps these were issues that had been stirring for her as she had entered the last term of her teaching life:

The receptionist led me to the staff room, where Helen was sitting. She greeted me warmly. She stood up and offered me a cup of coffee. As she made it, she asked me how I was. I said very well and I asked her how she was. She said there were lots of things coming up in the staff room, lots of views being aired. She said it was good. She said the HT and Deputy HT were away today and

there were lots of views being aired. The emphasis was on lots. I said 'while the cat's away.' She said yes, they needed that space to talk freely. Armed with coffee, we made our way to Helen's room. On the way, Helen said she also wanted to talk to me about Bradley. She said he'd been having a really bad time recently. (Session 10)

Helen and I sat down in Helen's room. She had continued to talk about Bradley, reluctant to stop. Helen's statement that she had really wanted to talk about Bradley could have been based on a guilty feeling that she was using the time with me to talk about staff issues 'while the cat was away' instead of focusing on the children, or it could have been that she was focusing on Bradley's 'really bad time recently' to communicate symbolically her own 'bad time' with her impending retirement. It seemed that the issues previously mentioned had temporarily disappeared. Bradley might have been a welcome distraction from the issues, or Helen might have wanted to hold on to her professional role, in which she focused on the children:

Helen said he had hit and bitten the CT yesterday. She had been quite upset. I said I remembered him settling a bit when I last visited, and it made me wonder what was going on for him. Helen said she wasn't sure. She said she had spoken to the carer, who had told Helen that that was what he was always like at home. I said so nothing has changed at home, and it sounded like the carer might be quite relieved to know that the school was seeing this behaviour too. Helen said yes, she thought she was. (Session 10)

Helen, staying with the subject of Bradley, asked me if she thought it might be anything to do with the play therapy. I asked several questions about the timing and duration of the therapy. Helen felt that the therapy caused a disruption to Bradley's school day because he had to leave school, go to therapy, then come back for the afternoon. This comment led me to ask about Helen's contact with the therapist. Helen said she hoped the play therapist would be attending a school review soon.

I asked about other contributory factors to Bradley's recent behaviour, such as him becoming more familiar with the school now, or the time of day incidents happened:

Helen said the incident yesterday happened at home time. I said that was a transition time, in between school and home, and children like Bradley often felt unsafe at those in between times. They might wonder who was in charge. Helen asked me if I would be able to come to the review. She gave me the date. I said I would if it would be helpful. She said my calm way of talking about

Bradley's very early life had been really useful. She said I could be useful at the review. (Session 10)

In supervision, I was struck by how Helen immediately thought of inviting me to the review as soon as I said something that Helen found useful. This had also happened when we had discussed Ben, and had led to the family meeting. It was as if she couldn't trust herself to feel strong enough to hold those thoughts herself and to share them with the professional network. In adopting an expert consultant role at times, I undoubtedly fuelled Helen's feeling of wanting to depend on me. For example, I offered my own thoughts about transition times; in a process consultant role, I might have asked Helen for more of her thoughts. This movement between the two styles of consulting could be linked to Helen's mixed feelings about her retirement; she wanted to enable other staff to succeed her but felt compelled to take charge and be the 'expert,' as can be seen in the family meeting in Session Nine.

It was in the following part of the session that I managed to get in touch with what seemed to be the pressing issue for Helen i.e. Helen's impending disruption to her life and the school's special needs provision with her approaching retirement. Helen began by being distracted from her concerns about Bradley as she saw a man outside her window:

Suddenly, Helen was distracted by a man she saw outside her window. She said it was a boy's grandfather picking him up from school. This boy had Crohn's disease, which meant he couldn't manage a whole day at school. He needed some home tuition, which meant getting a letter from his consultant. Helen told me she had been trying for months now to get one, and had 'ranted and raved' at the secretaries. The files were off site. The secretary she had last spoken to had said she was leaving that day. Helen had told her to put a big red note on the boy's file. Helen said it was terrible; it was this boy's right.

I said it seemed to be a very frustrating part of being a SENCo. It was part of her role to liaise with other professionals, and that could be very frustrating, trying to pull people together. Helen agreed, and said that was what she was worried about, what she was talking to the staff about today. She said there was someone internal lined up for her post, but she wouldn't be the right one. Helen was trying to get this other person, who she thought would be good, to be interested. It wasn't being advertised externally. I said that sounded difficult. Helen said the HT was leaving next year, and the Deputy HT, and they wanted to make changes to their jobs. (Session 10)

This sudden expression of Helen's concern was initially triggered by the sudden appearance of the grandfather at the window. The boy with Crohn's disease and the complexities of Helen's role led me to comment on the SENCo role, which seemed to remind Helen not only of the complexities of her role but also of her concerns about her successor. My intervention in this interchange was much more like that of a process consultant than in the previous interchange when I gave 'expert' advice about managing Bradley's routines and visits to play therapy.

This interchange led me to comment on there being some big changes about to happen for the school, not long after the physical change of a school move. I added that it would be no surprise if the staff might be struggling with these transitions, as they might be left feeling a bit unsafe with their jobs or futures. Helen's response led her to name her own retirement, which in turn led to her expressing her anxieties about her successor:

Helen said yes, they had all thought how lovely it would be with a new building, but the arguments, the territory fights. She thought the children had handled it better than the staff. I said I wondered if the staff managed all the fighting, and made it OK for the children by the time they arrived. Helen said yes, it did all happen before the children arrived. I said these transitions might help the staff to understand how the children might feel, but also I wondered if the children were aware of these changes at some level. Helen said yes, some children had come up to her and had asked her why she was leaving.

Helen said it did make her feel really anxious. Her son had told her that she couldn't leave the job in perfect condition for her successor. She smiled, saying she wanted to. She said her son has a child now, so is suddenly very wise. I smiled back. She said no actually he had always been good like that. She said there's just so much in the job. I agreed, and I asked if it was also about keeping the child in mind, thinking about the children with SN. Helen said yes, that was exactly what it was. How could she pass that on? I agreed it was a really hard thing to pass on and that she was saying that part of the job description was too difficult to write down. She wanted the right person to take it on. Helen said yes, that was why she got anxious. (Session 10)

This was a turning point for Helen, where she managed to express her anxieties about retiring and about her successor. In talking about her son, Helen seemed to be reminding herself that she had managed to be a successful parent and had 'passed on' her wisdom to the next generation. She was expressing both a hope and a concern about the next 'generation' of SENCos in her school.

Having had the opportunity to express her anxiety about her role and her successor, Helen seemed then able to return to her concerns about Bradley. She discussed his incontinence in the classroom. She said he filled his trousers, and the staff had to change him. I began to ask questions about how Bradley was managed at these times. I gave advice to Helen that the TAs should check with the foster mother to find out how she managed it so that they could ensure they were all using similar strategies. I necessarily adopted an expert consultant role but perhaps also the pain of Helen's retirement was too much and had to be visited at this point in short bursts. It seemed a welcome relief to focus on Bradley's problems and to think about possible solutions.

At this point Helen and I were interrupted by Debra, a TA. She looked through the window, came in and asked if she was allowed to interrupt. Helen said yes; her reply in the affirmative could have arisen from relief that here was a further interruption to the painful topic of her retirement:

Debra said she had just been in the social skills group and a boy had come out with information that had left her not knowing if she had said the right thing. He had said that his new stepfather shook his fist at him sometimes. He made faces at him too. He thought his stepfather didn't like him. Debra said she had told the boy to tell his mother. It had all started when they were talking about feelings. Helen said it was really hard for this boy. He had found it worse than his younger brother when his father had left. Helen turned to me. I said it sounded like Debra was thinking she hadn't said the right answer, but I was thinking what a good job she was doing to get the boy's trust and to help him to talk. Helen agreed. I said I was also thinking that if the boy was so upset about his father going, he certainly wasn't going to want a step-father coming in. I said it could be useful to name the feelings. I added there might be some books about new families getting together. (Session 10)

It is striking that with this interruption, I was again an expert, and expected to do the thinking. This had been a feature of which I had been aware throughout the sessions, but one which emerged more strongly at this point in the sessions, when the pain of Helen's retirement was beginning to be discussed.

There seemed to be further avoidance of discussing her retirement when Helen asked Debra to find Bradley's home-school book so they could look at it together:

Debra apologised for interrupting us. Helen said it was OK. She said we had just been talking about Bradley. Debra began to join in with talking about their worries. Helen asked Debra if she could go and get Bradley's home book and see if the therapist's number was in it, and also find out how he'd been today. Debra went. (Session 10)

This can be seen as a good use of everyone's time, but in the context of the discussion in the middle of the session about her anxiety regarding her successor it can be seen as a further unconscious tactic by Helen to not return to that subject. The uninvited interruption by the TA could have been heard and responded to, and then Helen could have said that she and I needed to carry on with our discussion. However, she didn't, instead inviting more discussion about Bradley with the TA. It could also unconsciously have been an attempt on Helen's part to bring together in her mind the different parts of thinking she had about Bradley and about her retirement, just as the home-school book provided a linking function too. I can often be seen to provide a linking function for Helen, for example when I make a comment that reminds Helen of the pain of her retirement.

While Debra was gone, Helen asked me how I was getting on with my studies. It was apparent in looking back at the timing of Helen's question that she was also aware of the pain of the ending of her work with me. Helen had perhaps asked Debra to leave, possibly even finding a reason for her to do so, so that she could further address the two endings:

She said it had been really helpful. Helen said the most helpful thing to her had been the thinking I had about the early years. She said especially about Bradley – the way I had managed to get all the staff seeing beyond the schoolboy Bradley who stood in front of you to the baby Bradley. Helen said you'd never think it would do so much damage, how much that first eighteen months would impinge on his behaviour, all that time ago. She said they all said after that meeting how I had put across so clearly the effect of those early years. I said I was really pleased I had helped. (Session 10)

Helen's ambivalence about discussing endings and her retirement is apparent. It is unclear whether she wanted to focus on Bradley as an avoidance or not, and this is most likely how she felt about her work. She wanted to do the job, to focus on the children, yet her retirement was looming and she was aware of her need to focus on that.

Debra returned. She said there was nothing in the book bag. She said she had noticed on her way past the classroom that Bradley was not being disruptive in class but was being unco-operative – quietly doing what he wanted to and not working. What followed was an interchange mainly between Helen and Debra where they were thinking about the emotional life and early experiences of the children in their care without needing to draw on my ‘expertise’. They simply drew on one comment of mine about feeling safe enough to gaze, and from that they made their own conclusions:

Helen repeated how amazed she was about the first eighteen months impinging on Bradley’s life. She said her grandchild gazes up at her and it’s such a look, you wonder what’s going on in there. I said some children didn’t feel safe enough to gaze. Debra said that was funny but not one child in the social skills group managed to look you in the eye and hold eye contact. Helen commented on their difficult backgrounds, all of them in that group. She said it wasn’t surprising none of them felt particularly safe. Debra nodded thoughtfully. (Session 10)

Perhaps Helen (and Debra in turn) felt that her anxieties had been adequately contained by me to allow her the mental space and freedom to think around painful issues.

On the way out, Debra said she would try naming the feelings. It was time to go and Helen saw me to the door. On the way out Helen commented on the surprising amount of deprivation in a ‘nice middle class school like this.’ I agreed.

THEMES EMERGING FROM SESSION TEN

- Initial Coding

1. Anxiety in SENCo about who her successor will be
2. Concern about Bradley’s aggressive and disruptive behaviour in school
3. Consultant adopts expert role when SENCo seems to want to avoid thinking about painful issues and process role when SENCo begins to think about loss and pain.
4. SENCo’s anxieties about the capabilities of her successor, within the context of acknowledging the complexity of her role

5. Ambivalence in SENCo about whether she should discuss her retirement and her wish for a successor, or whether she should focus on her job i.e. thinking about the children
6. The linking function of the home/school book and of the consultant in bringing together the different parts of thinking for Helen

– *Focused Coding*

1. SENCo's awareness of the complexity of her role and her resulting anxiety about her successor's capabilities
2. SENCo's professional concern about Bradley
3. SENCo's ambivalence and resulting oscillation between thinking about her own retirement and between thinking about the children in her care
4. Consideration of consultancy approach as a reaction to the thinking of the SENCo
5. Role of consultant to bring together different parts of thinking

SESSION ELEVEN: 30TH JUNE

This session took place approximately two months after the previous session. However, I had attended Bradley's review during June so this had replaced a normal consultation session. Session Eleven was the last session that took place with Helen.

When I arrived at the school, the receptionist was initially unable to find Helen. After a couple of minutes, Helen appeared looking quite flustered. She took me into her room, explaining on the way that she had been teaching a lot recently covering the Reception Year teacher's class, so she hadn't had time to sort out all her things. Her room had evidence of lots of papers being sorted.

When Helen and I sat down, Helen immediately asked me how I was and how my job applications were progressing. This was perhaps a way of beginning to talk about the next stage in her life i.e. her retirement; it was possibly easier to approach the subject by beginning with my next stage. The contrast between me beginning my new job and the SENCo ending hers was apparent, although Helen managed it bravely:

When I told her the good news about getting a job, she was very pleased for me. I asked about her leaving. She said she hadn't quite managed to yet. She would be returning next year, just to run the gardening club, as she had started it and really wanted to see gardening as part of the curriculum. Helen said she couldn't take on too much though as she needed to leave, otherwise it would make a mockery of her retirement. I said it must be hard to leave after all this time. She said she had been at the school forever, but it was time to extricate herself. I sensed Helen trying hard to hold herself together and the sadness in the room was palpable. I was relieved when Helen changed the subject to Bradley. (Session 11)

It seems that both Helen and I found it too hard to think about and to remain with the sadness that Helen felt at this point, although Helen herself had unconsciously brought up the subject, through asking me about my future. Perhaps part of the difficulty for me was the contrast between my beginning a career and Helen ending hers. In looking back at the session, I was aware of a sense of guilt about being at my stage in life. I could also have been expressing for Helen her sense of guilt at leaving a SENCo post that was still unfilled.

It was Helen who managed to return to the painful subject, after her brief reference to Bradley:

Helen said that my comments about transitions had been absolutely right. Bradley had been wetting himself a lot this last few weeks. I said it was possibly a change of year approaching, and the end of Reception. Helen agreed, and said that Ben as well had been difficult. He was off to his secondary school in September. As if the thoughts of Ben's and Bradley's struggles with the transitions had given her confidence to talk about her own transitions, Helen then talked about her sense of sadness. She told me about a girl in Year 6 who had performed really confidently in the school play. When the girl had said goodbye to Helen, she had begun to cry. Helen said that she had been able to say, 'We'll manage,' with the emphasis on the 'we,' identifying with the girl's loss of the school and with her own loss of the school. I said it was a lot of loss to manage, especially with a small school like this one. Helen replied that she was OK but she might be feeling it by Wednesday. She said they had had a tea for her last week and the children had written her a book of poems, which was just lovely. (Session 11)

By telling me about the girl who cried, Helen was able to also tell me how she might feel like crying, especially on Wednesday. This was a further turning point for Helen, following on from the previous session, as she increasingly became aware of her own

sadness at retiring, which helped her to think about her successor. Increasingly, Helen was able to access and think about her difficult feelings without being prompted by me. One of the ways she did this was to use her expression of the children in her care to help her to think about her own issues.

As the session came to a natural end, Helen thanked me for all I had done. Helen proceeded to boost my confidence, as if practising how she would pass on the SENCo post to her successor:

She said she would never forget my phrase about being able to see the baby in the child. I thanked her for being so receptive to the thinking I had brought. I said that she had managed to be so open to it that she had made really good use of it. Helen said she had, and the rest of the staff had too; they were more confident in that area now. She said that after those meetings we had had where lots of staff were present, staff members had often referred to something I had said afterwards. I said I was glad to hear that the thinking was still going on in my absence. Helen said it was. I said I hoped the school staff could carry it forward after Helen had left. Helen replied that she felt sure they would. She said it was so good to take time to think about a child, and it was so necessary for these complex children. I agreed. (Session 11)

The conversation about the ‘thinking still going on’ in my absence and ‘carrying it forward after Helen had left’ was a striking reference to Helen’s successor. One is left wondering whether Helen’s reassurance that ‘she felt sure they would’ carry it forward is more to reassure herself or me. The question of Helen’s legacy seems to be played out by our discussion about my legacy.

THEMES EMERGING FROM SESSION ELEVEN

- Initial coding

1. Contrast between consultant’s beginnings and SENCo’s endings
2. The difficulty around transitions
3. SENCo’s sadness and guilt about leaving a SENCo post unfilled
4. Difficulty in consultant to bear loss and guilt
5. SENCo accessing more difficult feelings through the children in her care
6. SENCo’s need to be reassured about the legacy she leaves

– *Focused Coding*

1. Beginnings, transitions and endings
2. Difficult feelings emerging about ending a post
3. Sadness and guilt difficult to bear for SENCo and consultant
4. The legacy the SENCo needs to leave for her successor

Summary of Themes Emerging through Sessions Nine, Ten and Eleven

SESSION NINE

– *Focused Coding*

1. Uncertainty and anxiety about complex roles
2. Ambivalence about retiring
3. Confusion about responsibilities and leadership in family and staff group.
4. Consideration of consultancy approach and role
5. Lack of time and space
6. Role of consultant to bring together different parts of thinking

SESSION TEN

– *Focused Coding*

1. SENCo's awareness of the complexity of her role and her resulting anxiety about her successor's capabilities
2. SENCo's professional concern about Bradley
3. SENCo's ambivalence and resulting oscillation between thinking about her own retirement and between thinking about the children in her care
4. Consideration of consultancy approach as a reaction to the thinking of the SENCo
5. Role of consultant to bring together different parts of thinking

SESSION ELEVEN

- *Focused Coding*

1. Beginnings, transitions and endings
2. Difficult feelings emerging about ending a post
3. Sadness and guilt difficult to bear for SENCo and consultant
4. The legacy the SENCo needs to leave for her successor

5.4.3.7 *Links between Sessions Nine, Ten and Eleven*

The complexity of the SENCo role and the difficulties this brings for a retiring SENCo are common to all three sessions. The SENCo's ambivalence about her retirement and her wish to leave a good legacy for her successor are also common to all three sessions. The turning points can be seen in Sessions Ten and Eleven, as the SENCo increasingly accesses her sadness at retiring, which seems to leave more space for her to think more about her successor.

In Session Ten, the SENCo's ambivalence about her retirement results in her oscillating between thinking about it directly and in thinking about the children in her care. The themes that emerge about the work with the children reflect the preoccupying issues for the SENCo, and it could be argued that she particularly wanted to bring the children she did to me because in working with them she was able to work on some of her own issues. In Session Eleven, it was through thinking about a child crying that the SENCo was eventually able to admit to her immense sadness at leaving her post. There is more painful material about insecure attachments made in early years, which touches the SENCo, as she often refers to it in her conversations with me.

The SENCo's shift from operating in a basic assumption dependency mode, in which there is dependency on a leader to achieve the group's task (Bion 1961) to a mode of operating where there is less dependence on the leader can be seen to take place throughout these last three sessions of the work.

I helped this process by fulfilling the role, as seen in Sessions Nine and Ten, of bringing together different parts of thinking. I did this to help the staff group to think about the children in their care but I also did this to help the SENCo to access her more difficult and uncomfortable feelings about her retirement. I had to bear those uncomfortable feelings myself throughout the work, as Helen was erratic about booking sessions, the fortnightly rhythm originally offered was never taken up, and I was sometimes greeted with slight chaos and a feeling of having been forgotten about. Further, the SENCo used me quite unconsciously to 'play out' her ambivalent feelings about letting go of her leadership or holding onto it. This use of me by the SENCo led to me observing and becoming increasingly aware of which consultancy approach I used, and noticing an increasing ability in the SENCo and her staff to be less dependent on my thoughts and to manage difficult feelings themselves. I helped them in this process by containing their anxiety and uncertainty, both personally and about the children in their care.

5.4.4 Ashurst School

5.4.4.1 *Context*

Ashurst School is a primary school located in a small town. Its intake is a mix of eighty five per cent White British, ten percent White Northern European and five per cent Asian. The surrounding area is a socio-economic mix of housing. There are approximately two hundred and thirty children on the school roll, and thirty-six of these are on the SEN register. This is approximately fifteen per cent of the school.

Four children have Statements of Educational Need, and a fifth child receives a Statement of Educational Need but attends the school part-time. Five children are on School Action Plus, and one of these is undergoing statutory assessment. The other twenty-six children are on School Action, mainly for learning difficulties. Of the children on the register, six have EBD.

Ashurst School is different to the other two schools in the study. It is bigger and has a different intake of children, in that there is a more diverse cultural and socio-economic mix. There are proportionately not as many children on the SEN register as in the other two schools. The size of this school compared to the others means that it has more facilities and resources, and this can be seen in the SEN department.

5.4.4.2 *How the SENCo experienced her work*

The SENCo, Jane, worked two and a half days a week in the school. She was an experienced SENCo who had worked at the school for some years. Jane presented as extremely efficient and took her work very seriously. She described herself in our first meeting as often taking on a Social Work role. She was very keen to attend courses on issues that help understanding of families and children with social and emotional difficulties.

Jane was very busy in the time she had at the school, dedicating all her time to her SENCo role, which consisted of: supervising (TAs), devising timetables and Individual Education Plans (IEPs) for pupils, advising and liaising with CTs, taking small groups

and meeting with other professionals from outside agencies. She had a dedicated room for Special Needs and a group of ten TAs who worked with her.

It would appear that Jane had space for Special Needs in the school, and status, with a managerial role and responsibility for ten members of staff. However, Jane experienced frustration with the HT, who was planning to retire soon. She told me that she felt that her work was not adequately recognised by the HT. He also insisted on attending multi-agency meetings about children but gave the less interesting meetings to Jane. Some of the CTs felt similarly to Jane. Thus there was a split within the school of the staff that felt unrecognised by the HT and staff that didn't. However, Jane reported a close and happy staff group, who had many social events outside school.

5.4.4.3 Initial Needs and Expectations Feedback

In her 'Initial Needs and Expectations' form, the emphasis for Jane was on:

- Procedures and resources
- Reporting and recording behaviours

This emphasis reveals how her expectation of the work with me was perhaps different to that of the other two SENCOs, who wanted to explore themes that were more linked to roles and relationships. Jane wanted to think about the smooth running of her work administratively with me. Yet it was clear from the initial meeting that Jane was interested in the more social aspect of her role too. I wondered why Jane's initial needs and expectations didn't reflect more of her interest in the social aspect of her role, given that she knew I was a Child and Adolescent Psychotherapist nearing the end of her training. As the work with Jane progressed, some explanation was given for the emphasis on administrative aspects of her role.

5.4.4.4 What took place in the consultation sessions?

Interestingly, from the beginning of the sessions, Jane's wish to address procedures, resources, reporting and recording behaviours seemed to be abandoned by her. Instead,

she was keen for me to work with the children, teaching staff or parents individually. She struggled with the amount of time she needed to dedicate to talking with me without reaching any action points at the end of the meeting. This struggle seemed to fit with her wish to improve procedures and resources; she was very aware of using time and resources efficiently. Perhaps she saw me as a potential resource to work with children or adults individually. I felt pulled into being quite pro-active and did meet six times with a staff member who was struggling with boundaries. I included Jane in two of these meetings, and Jane reflected that it had been helpful to see the process of my work, but saw it as a tool that could be applied to staff in her school, rather than to herself.

Jane's other main focus was a Year Four boy called George. Jane wanted me to meet with George's parents or to work with George himself. I resisted these invitations, as I was clear that my project didn't involve individual work, and instead suggested that I observe George in class and help Jane to work with the parents by thinking about the work with her.

George

George is a ten-year-old boy. He is one of four children who have two different, absent fathers and live at home with their mother. He is unable to focus, lacks concentration, doesn't respond to rewards and seems to have his own agenda, lacking social awareness. He also has dyslexia and joins a small group for spelling and writing.

George's mother tries hard to look after the children but she has told the SENCo that she really struggles at weekends and holidays. George's two older siblings, aged eleven and twelve, are often reported to be out late in the evening by themselves.

I met with Jane (or her staff) for fourteen sessions, consisting of four in the Autumn term, four in the Spring term and six in the Summer term. As with the other two schools, there was some reluctance to re-engage after the Christmas break. Three sessions that span this break will be looked at in detail, with the break in mind, but they are mainly of interest because they demonstrate a feature of the work that emerged as the dominant feature. This was that Jane appeared to be reluctant to engage in a

reflective process but was very willing to engage me to be reflective with other people. A turning point happened for Jane through my work with the CT, who had her own turning point in her work with me.

5.4.4.5 The consultant's experience of the SENCo and the consultation, and the relevance of this

I experienced the SENCo as being quite resistant to thinking with me about dynamic processes that could be taking place in the school. She also wanted me to act sooner than to talk, and on several occasions I was forgotten by the SENCo, as can be seen in Session Four. This affected my confidence; particularly around the Christmas break, it was only with the help of supervision that I continued with the work.

When I met with the other staff member for several sessions, I felt that I was being used much more productively. It seemed to be the case that the SENCo managed to appreciate what it was I had to offer only through seeing what took place in my sessions with the other staff member. This was encouraging for me, although I felt overall that the work in this school had not been as successful as the work in the other schools.

I felt often rejected and unappreciated, which could have reflected how the SENCo felt in her school with a HT who didn't appreciate her work and was preparing to leave the school to which the SENCo felt attached.

5.4.4.6 Detailed Analysis of Three Sessions

Brief Account of Work so far

SESSION ONE

Jane spent much of this session discussing five pupils who caused concern. She asked me if I could work directly with the five children. When I outlined my role as being one of consulting with the SENCo, and not doing individual work, Jane accepted this.

SESSION TWO

In this session, when I asked Jane about the five children, she replied that the other four had measures in place, but the one who caused the most concern, George, was a problem. Jane invited me to observe George in class. I agreed, and suggested that other staff, including Jane, might want to make a few observation notes too. Jane agreed.

SESSION THREE

At the beginning of this session, I was met by the TA who worked with George. She told me that she hadn't been able to complete an observation as she hadn't had time. Jane also told me that she hadn't had time to observe, and listed the tasks that she had to complete. I sympathised and regretted having asked Jane to observe George. I also considered the fact that I hadn't asked SENCOs in the two other schools to make their own observation notes. I wondered if unconsciously I was trying perhaps rather too hard to engage Jane in the work, sensing that she didn't want to engage, and in doing so, I might have been inadvertently pushing Jane away even more.

In my observation of George, I found him to be exactly how Jane had described him. He was unable to sit still, fidgeting constantly, getting up out of his seat and annoying children next to him. The CT was very vigilant; she constantly reassured him, spoke quietly to him and helped him with his work.

Three Sessions in Detail

SESSION FOUR: 12TH DECEMBER

The secretary let me in to the school to find Jane. The secretary seemed very busy and said that Jane would be around somewhere. I thought that the secretary allowing me free access into the school could reflect a school where there was an atmosphere of trust, but could also reflect a school where normal rules and processes were sometimes not adhered to. I thought about Jane's wish to improve processes as I tried her room, then the staff room, then went back to her room. Jane arrived shortly after, but while I

waited for her, a TA walked in to Jane's room and told me that she would be holding a group in there, and she hoped it would be OK. I replied that I felt sure it would be, although inwardly I was thinking that the group would intrude on a thinking space for Jane and me. The TA explained that she needed a biggish room, as it was a biggish group.

When Jane arrived, she told me that she had to go out on playground duty, and asked if I would mind waiting for a little while. I felt initially a slight lack of respect for my time, and thought to myself that our appointment had been pre-arranged. Then I remembered that I had seen parents coming out of an infant production as I had entered the school, so I assumed that playtime was late. This thought led to me feeling empathy for Jane in a school where it was sometimes hard to adhere to appointments. Jane told me that I could go and get a coffee in the staff room. I hesitated, thinking that I at least should stay in the appointed place. Jane followed this hesitation by giving me her observation sheet of George to read. She said she had managed to do it. Her attitude was not one of apology for the muddle, but slightly nonchalant. It made me think that she perhaps unconsciously wanted me to have an experience of the chaos that can enter schools at the ends of terms, and perhaps she was also feeling angry about being asked to complete an observation sheet.

Jane went to do her playground duty and I sat down to read her notes. At first I felt slightly angry, as I thought of all the work I could have been getting on with, but then I accepted the situation and began to use the time to think. I thought that I was experiencing some of what Jane was feeling, and that Jane was successfully projecting into me feelings of being overburdened with work and overwhelmed with not having enough time to do it. On further reflection, it became clear that Jane was coercing me into behaving in a time and resource efficient way, rather like Jane did, as Jane had given me the sheet to look at while she was away. I felt like I was a TA under Jane's supervision. A more reflective thought process with no clear answers felt unwelcome, and perhaps too threatening in an environment where many staff members felt unappreciated by a HT who was considering his retirement from the school.

After about five minutes of comparing the two observations of George, I took a clean piece of paper and began to make some notes on my thoughts about them. Most

striking was the different times of day the observations were made, and the different behaviour exhibited. I commented on this on the observation sheet, and came up with a few suggestions of how to let George know that he was being held in mind. As I was writing, the TA and her group arrived. The TA conducted the group in an ordered way that didn't particularly disrupt my thoughts.

After the infants had gone in, Jane still didn't arrive. I waited five minutes, then decided that I would go and photocopy the sheet I had just written. I met Jane in the corridor talking to a staff member. She signalled that she would be with me soon. I did the photocopying and passed Jane to return to her room. By now I was beginning to really struggle with feelings of abandonment, anger and rejection. It seemed there was an intentional avoidance of me by Jane and I tried to keep thinking about what Jane was projecting into me, although I could feel myself withdrawing from feelings that were quite overwhelming. It seemed very clear now that I was experiencing countertransference responses of abandonment and rejection that were so overwhelming that they led to an avoidance of thinking. It was only after the event in supervision that I thought about the fact that Jane was struggling with all her SEN children, many of whom had their own issues of abandonment and rejection, and Jane's hard work was unrecognised by the HT, which could have been contributing to why she wanted to hold on to procedures and writing records, as these were at least concrete things to take hold of and feel safe with.

Jane finally arrived in her room. She apologised to me, explaining that she had had to be out in the playground on duty to make sure a particular child didn't get into a fight. Despite her best efforts, he had got into a fight, so in the corridor after playground duty she had had to follow it up. I, immediately feeling full of empathy again, said it was OK, and explained that I had been using the time to think. This was an unconscious modelling to the SENCo of what she struggled with in the school – thinking. The comment about thinking did seem to help Jane to sit down with me and give some dedicated time to thinking, although it might also have been Jane's guilt about ignoring me for so long that led her to finally engage:

The group had now finished, and I felt relieved that at least we would now be able to talk privately. I gave Jane a copy of my notes comparing the two

observations. I talked her through it, pointing out my line of thought – the different times of the observations, George being particularly focused after a 1-1 with the HT and subsequent thoughts about staff letting him know that he was being kept in mind. Jane looked with interest and said she would pass it on to the CT. I said that George's CT was wonderfully attentive, and added that George did need that extra attention, as he seemed to be quite anxious and uncertain of what to do in the classroom. I added that you could think of a mother- infant sort of attention, where mother holds the infant's gaze and directs her voice to him. My comment reminded Jane of an incident when George had gone to her room to have some time out with her. She hadn't been there, and he had been very upset. Three members of staff had found her and had said that George needed her. We agreed that George needs that 1-1 sort of attention. At this point, I felt that Jane was beginning to engage with the work and was thinking about George in a different way. This was possibly because I was giving Jane 1-1 attention, having accepted her projections of abandonment and rejection; I was modelling an attentive mother myself. (Session 4)

A shift can be observed to have taken place in Jane's thinking by the end of the above excerpt, which seems to have been brought about mainly by me offering a working relationship where the SENCo was held in mind and thought about. Jane's usual experience in her working life was not to be held in mind and thought about by her HT. This turning point for Jane was brief and she soon reverted to a mode where 'doing' was more comfortable than 'thinking'. A further turning point didn't appear for Jane until nearly the end of all the sessions. Instead, the next significant turning point was demonstrated through a CT, Gill, in Session Six.

Jane continued to think with me about George. She said that CAMHS were being a bit more involved as both parents had each said separately that they couldn't cope. Jane was worried about the older brother in Year Six too, as he used to be like George, but he was now much more withdrawn, as if he was depressed. I asked if he had the same father. Jane replied in the affirmative and said it was made worse because his father had set up home with a new family, and that must be hard for the boys to see. I agreed that it sounded painful for them.

After this thoughtful interchange, Jane can be seen to shift back to a mode where action takes precedence:

Jane suddenly asked if I could meet with mother. I replied that my role was to consult to Jane and to help thinking around this family. Jane suddenly seemed to take control and said that she would do it, as she had been on a ten-week

parenting course, and needed to put into practice some of what she had learnt. (Session 4)

The point at which Jane took control came directly after I rejected her request for me to see the mother. The previous shift that Jane had made could be seen to retreat as Jane adopted her more usual self-sufficient attitude, where action was needed. However, there was still perhaps a wish in Jane to engage in a thoughtful process, and she might have been telling me that she too could reflect, as she referred to her ten week parenting course. The pressure on her to take control and to put into action what she had learnt was strong, and suggests a rivalry with me too.

It is interesting that I so strongly held to my own role when asked by Jane to meet with the parents. I had after all agreed to meet with families in Valley School, but that had been within the context of one meeting with the SENCo present. On reflection, it seemed that I had experienced such strong countertransference responses of abandonment and rejection from Jane that I was responding by being clear that I wasn't going to take on any work that might take over my direct work with Jane. I was now fully aware of Jane's strong wish to 'opt out' of the direct consulting work with me.

I responded to Jane's declaration that she would meet with George's mother herself by expressing interest in the course. Jane talked about her experience of the course:

Jane said it had been very deskilling during it, because you had to go straight into role, and practice exploring more and not immediately challenging. Then when you came to the challenging bit, you were busy trying to explore more. She said it was hard, but a good course. I thought that perhaps Jane thought her sessions with me were hard but potentially good too. I said that perhaps it might be useful if Jane and I discussed her meeting with George's mother after it had happened. Jane said that would be really useful. (Session 4)

I had been unconsciously attempting to push Jane to draw on her competencies by being interested in her parenting course. However, the element of rivalry was still present, as Jane referred to feeling deskilled, perhaps in contrast to me as a previous SENCo who was now nearly at the point of completion of a Child Psychotherapy training and was acting as a consultant. Evidence for Jane thinking about my role as a SENCo emerged in the next interchange, when Jane directly referred to my previous role as a SENCo:

We agreed that we would meet again next term after Jane had met with George's mother. We agreed a date that I would call her. On the way out, Jane thanked me for all my help this term. I thanked her for her co-operation. She replied that it was much easier knowing that I knew how it really was. I agreed that I did know how it was in schools. I thought about my old SENCo role, and how important it was for Jane to know about it, but also how that might present a challenge for her in that I left the role and she was still in it. (Session 4)

The reference made by Jane to me previously being a SENCo was a positive one, but it was easier to refer to me having been a SENCo in a positive way than to admit to oneself a professional rivalry, which in turn stirs feelings of dissatisfaction and vulnerability.

THEMES EMERGING FROM SESSION FOUR

- Initial Coding

1. Consultant being kept waiting and experiencing feelings of abandonment, anger and rejection
2. SENCo experiencing feelings of abandonment, anger and rejection by the HT
3. Oscillation between thinking and reflecting being avoided and between engaging in a reflective process
4. Attentiveness recommended for CT to give to pupil, and attentiveness, or being held in mind, being given to SENCo by consultant
5. Rivalry of consultant's role
6. Fear of vulnerability and feelings of dissatisfaction

- Focused Coding

1. Countertransference responses of abandonment, anger and rejection
2. Attentiveness versus avoiding thinking
3. Unacknowledged rivalrous feelings, which threaten feelings of vulnerability and dissatisfaction if acknowledged

SESSION FIVE: 11TH MARCH

As with Barnswood School, the SENCo was very reluctant to re-engage after the break. I wondered if this was because my work with Jane had proven not to be as productive as Jane had hoped, although in the last meeting before the Christmas break, Jane had made a brief shift and had found the reflective space quite helpful. This in itself may have led to Jane feeling reluctant to engage on a reflective level, which could potentially be more painful than operating in a 'doing' mode. On entering the school I encountered the secretary reporting that Jane had double booked me:

As I signed in to see Jane at reception, the secretary said she wasn't sure if Jane was in. She had been trying to contact Jane because someone had phoned to say they had a meeting with her at 9am, and the secretary didn't know what to say to them. I thought to myself that there was a double booking, because my appointment had been at 9am. The secretary tried Jane's phone again. No reply. She said I could go down and look for her. I went down to Jane's room, feeling slightly irritated and anxious. (Session 5)

As I entered Jane's room, I saw that Jane was on the phone to the secretary, explaining that she was expecting to meet with me. Just as I was beginning to feel less anxious, and was about to speak to Jane, who had just put the phone down, the school nurse came in, looking for some records of children on the SEN register. The nurse looked at Jane and me, and, addressing Jane, said that she wanted to talk but that she would come back. It seemed to me like there was no time at all in Jane's busy day for her to meet with me to think reflectively. I referred to my thought as she finally had a chance to greet me:

We said hello with a slightly hysterical air. I said I didn't need to ask how things were. I added that they seemed to be busy. Jane agreed, then added that she wished that people would just have the meeting times and stick to them. She had said 9.30 for these people. I sympathised, saying things got very complicated, thinking to myself that Jane had only allocated 30 minutes for our meeting. (Session 5)

Having realised that Jane had only allocated thirty minutes for her meeting with me, it seemed to confirm my thoughts about Jane having no time, but I also wondered about Jane avoiding having time to think and reflect, given my thoughts in the session before

the Christmas break about Jane's feelings of vulnerability and lack of recognition by the HT.

The work seemed to commence as Jane and I sat down. Jane began to feedback on progress with George:

Jane said that they had really got somewhere with George. CAMHS were on board. He had been diagnosed with ADHD. The person who saw him was brilliant. I said that was good and asked if things felt a bit more held with him now someone was on board. Jane said yes. Strategies had been suggested and put in place. She added that the nurse was very switched on. I said it might also hold the family too. Jane agreed. I thought to myself how the ADHD nurse had provided a tangible result, which I had not been able to do. I felt rather inadequate in my role as a consultant. (Session 5)

I was very quickly experiencing feelings of inadequacy in my role, and I wondered in supervision after the session how much these were countertransference responses that were being conveyed to me by Jane, and how much they were my own feelings of inadequacy about being in a consultative role. It could have been the case that things had moved on with George partly because of Jane's discussions with me about George. These discussions could have led Jane to reflect further about him and to enlist further help. If this were the case, I had no reason to feel inadequate about my work with Jane, yet the sense of inadequacy seemed very present. Perhaps I was holding the feelings of inadequacy that Jane couldn't bear to acknowledge.

Jane moved the discussion into voicing concerns about George's older brother:

Jane said that there was still a concern with the brother in Year Six. He had a very detached air. He had sat on the friendship chair at break time recently and no-one had sat next to him. Jane said they needed to talk about that as a staff group, but it showed where he was. I agreed. Jane said he was fine at lunch-times, where structured games were used. He loved to help with them. I said so he needed a structure. Jane said yes. She said she would hate him to go to secondary school thinking that he couldn't make any friendships. I asked about transition work. Jane said they liaised with the secondary schools. I said I was wondering about a group to look at issues such as new friendships and different teachers. Jane said she was thinking that was a good idea but should be applied to all Year Sixes, so she would look into that. She wrote it down. (Session 5)

I can be seen in this excerpt to be the one who instigates moving away from a reflective process where there are no ready solutions. I wondered about a group in secondary school to look at new friendships and different teachers, which was a good suggestion, but it was very readily taken up by Jane, and both of us moved away from reflecting to finding action points. I became an expert consultant. I can be seen to be searching for a balance between providing a reflective space where difficult feelings can be aired and between meeting Jane's need to act. I am pulled more into meeting Jane's need to act, possibly because I am carrying the difficult feelings. It is interesting to note with this thought in mind that the older brother who Jane brings to me is possibly someone with whom the SENCo identifies, in his need for structure and in his 'very detached air.' The SENCo could have been unconsciously trying to think more about her own difficulties in engaging with a thoughtful colleague, i.e. myself, who might think and talk about difficult feelings.

I was aware of time running out. There were ten minutes left of the thirty minute meeting. I asked Jane how she wanted to use the remaining time. Jane replied that she did have something. Jane described an issue with a Year Four CT who was having problems with boundaries between being a mother and a teacher at the school. Jane said that the CT's daughter wasn't popular. Jane asked me if it would be possible for me to meet with the CT. I thought for a moment and replied in the affirmative. Jane said that would be good. She said she particularly wanted me to meet with the CT because then she could step back. This made me think that Jane had finally 'stepped back' from the work, which was what I had been trying to avoid. I said I would need to assure the CT of the confidentiality of our discussions; it was clearly quite a delicate matter. Perhaps in saying this, I was unconsciously aware of the SENCo's own struggles that were reflected in the CT's struggles; struggles around confidentiality and trust between colleagues (CT/SENCo and SENCo/consultant) when difficult feelings existed.

A TA walked in and began to work. She checked first if Jane and I minded her being there. Jane told her it was fine. Jane and I continued to talk, without using names. I was struck how confidentiality was an issue that had to be managed by Jane with flexibility in the school. Jane began to arrange details of whether I should contact the CT or vice versa. I directed Jane to talk to the CT and to arrange the meeting. As I

directed this, I thought to myself that Jane needed to remain involved, even if it was as the person who had set the meeting up.

Jane phoned me the next day to confirm the appointment. I emphasised the need for a private uninterrupted space. Jane said the best they could do was that the meeting take place in the classroom with the door closed during assembly time. On reflection, I thought that I could have insisted on a private uninterrupted space for my work with Jane, but I clearly hadn't done so. It seemed that I was able to model a way of working where a reflective space was valued with another member of staff but not with Jane herself. I thought about the strong feelings of anger and abandonment in the session before the Christmas break.

Before saying goodbye, Jane asked me if I knew anything about CAF. I replied that I had just worked with a Senco who had called a CAF meeting. Jane said her HT had gone to the training morning and hadn't liked the look of it so had given it to Jane to deal with. This was said with humour. I was left thinking more about Jane feeling unrecognised and 'dumped on' by the HT, and about Jane feeling that she needed to recruit people to take on some of her work, including recruiting me to work with the CT.

THEMES EMERGING FROM SESSION FIVE

- Initial Coding

1. SENCo's seeming reluctance to engage in reflective work with consultant versus valid time constraints
2. Consultant holding feelings of inadequacy
3. Pull for consultant to 'act' and to engage in direct work with CT
4. Identification of SENCo with child's older brother and unconscious significance of his struggles for her
5. Easier to value reflective work with CT than with SENCo
6. SENCo feeling unrecognised and 'dumped on' by HT

- *Focused Coding*

1. Lack of time
2. Feelings of inadequacy
3. Attentiveness and reflective work versus acting and avoiding thinking
4. SENCo's struggles in her work role symbolised in the case she discusses

SESSION SIX: 18TH MARCH

As I entered the school, the secretary told me that she would find Jane. She asked me to wait in the library. I was surprised at the more formal approach of the secretary than previously. It slightly threw me, especially as I was due to meet with the CT that day. I told the secretary that I would be seeing Gill, the CT, today. As I said it, I felt unsure about confidentiality.

As I waited in the library, Gill passed me with her class. She smiled at me with recognition, which made me feel relieved. I wondered if Gill felt uncertain about the meeting too. Not long after, Jane appeared with the secretary. She seemed assured and confidently led me to the classroom. Gill walked in and Jane went, leaving the door a little ajar, as she said that was as far as it could go. It seemed that with this prelude to the meeting, it was me who was holding the feelings of uncertainty, whilst Jane and Gill were holding the feelings of certainty. On reflection, my feelings of uncertainty could have been countertransference responses to Jane and Gill's feelings of uncertainty. It struck me that it seemed to be an important part of my work that I needed to be able to bear negative feelings and to work with them.

Jane and I sat down. I began by saying that I had asked Jane if we could have a private space, and it seemed to be very hard in schools to find one. I added that even with the arrangement we had, the door wouldn't properly close. Gill responded to this enthusiastically:

Gill agreed with me instantly, saying that often, even if you closed the door, someone just walked in. She said that they had had meetings about it recently, saying that what schools needed was a meeting room, where children and adults

could go. She said she had worked in a school once where there was a room, a tiny one, not much bigger than a cupboard, no good for group work, but the HT had kept it as a room for people to meet. I said that sounded like a good idea. (Session 6)

Gill's eager response struck me as Gill conveying to me that she valued the opportunity to meet with me privately, and that she, like Jane, possibly struggled with her HT, who didn't appear to value reflective meetings.

I offered to tell Gill a little about myself. Gill nodded. I told her about my background and training, and summarised what I was doing in local schools. Gill said it sounded a lot of work. She then asked why I was specifically seeing her. At this question, I thought to myself that Jane hadn't explained the meeting to Gill. I wondered whether Gill even wanted the meeting with me and what she had actually been told. However, I didn't ask Gill those questions. In my more usual role of therapist, I might have asked those questions, but I was feeling at this point slightly unclear about the boundaries between being a therapist and being a consultant.

I explained that Jane had asked me in my role as a consultant if I could see Gill in her role as a parent/teacher, as it might be useful to have an objective eye on it. I asked Gill if that made sense to her. She replied that it did. I took the opportunity to stress the confidentiality of our work together, and said that I would share aspects of it with Jane only with Gill's permission. Seemingly reassured, Gill began her story:

Gill told me that she had said to the HT at the beginning of the year that she didn't want to take a Year Four class, as her daughter would be in Year Four. She knew it would create problems. Her daughter was in the class next door, and they had had a difficult year. When things went wrong, she kept the boundary and told her daughter she would hear it at the end of the day, but the boundaries all got blurred. She had met with the CT, who didn't seem to take it on board and seemed to be blurring his boundaries. I said so there seemed to be her daughter, the CT and her all trying to keep boundaries and really struggling to do so. She said yes. She told me that her daughter wasn't the most straightforward child; she had always been noticeable, and Gill often felt that it was her fault what her daughter was like. Her family, her mother, seemed to think that. I said so she felt guilty too. She said yes, she did. I noticed that Gill smiled a lot as we spoke. (Session 6)

In this excerpt, we can see the parallel between my lack of clarity about boundaries and the CT's lack of clarity about boundaries. Perhaps by trying to 'step back' from the work, the SENCo had been attempting to keep her boundaries clear. I addressed the CT's feelings of guilt, but wasn't sure how far defences could be challenged in a consultative role.

Gill seemed to be very keen to use me now:

She asked me what I could do. She said she didn't know if they needed family work or what. I asked her what she thought might be useful. She replied that it was good to talk. I said we could talk some more, and perhaps invite Jane along to a meeting at some point in the future, when we had focused on some of the issues Gill had brought. Gill nodded. I said I wondered what she was thinking by family work. Gill said she and her daughter, Sadie, needed to talk like this together. (Session 6)

Gill's engagement in the work and valuing of it seemed to give me confidence to manage my dual roles more easily. Gill was modelling for me what I was attempting to model for the SENCo and what it seemed the HT was failing to model for both members of staff i.e. a valuing of reflection and being held in mind. Perhaps also I was modelling for Gill how to struggle with dual roles and uncertainty.

Gill opened up to me, telling me about her history:

Gill then told me the story of what had happened in the past year. She said that Sadie's father had suddenly made contact out of the blue and wanted to see her. That was last summer. Since then, Sadie had been having contact every six weeks with him. I asked when Sadie last saw her father before all this. Gill said that her father left when she was a baby. I said so she has had to get to know her father. She said yes. She said her behaviour is all over the place before contact. Gill didn't know if that was normal or if it was her. I said it was very normal. She looked relieved and said she hadn't known that. Smiling broadly, she said it had been a crap year really. I said it would bring up a lot for Sadie about her identity and her relationships. Gill said it was odd having this new person in their lives. It had been simple when it had just been Sadie and her. I said it sounded like a big change. Gill nodded. She said that her mother blamed her for it all. I said it sounded like there was a lot of anxiety about what was right for Sadie. Gill nodded. (Session 6)

At the point where I contained Gill's anxieties by assuring her that her daughter's reaction to her father coming into her life was normal, Gill was able to admit to having

had a really difficult year. I thought that I was much more comfortable in the role of therapist. However, in supervision I considered whether this therapeutic intervention was actually an aspect of my consultative role. I considered that in psychoanalytic consultative work, personal feelings and life histories are often explored as a result of the consultant exploring the dynamics within an organisation. As a result of these considerations, I recognised Gill's admission of a difficult year as a turning point for her, and also for me in that I began to feel confident about what consulting work could encompass.

Gill glanced at the clock, and told me that her class would be back soon. She asked me what we should do next. I suggested that we meet again to think about how hers and Sadie's lives at home might impact on the school and vice versa. Gill said she thought that would be really helpful. We made an appointment for the end of the week, just as the class came out of assembly.

THEMES EMERGING FROM SESSION SIX

- Initial Coding

1. Consultant holding feelings of uncertainty and SENCo and CT holding feelings of certainty
2. CT telling consultant that HT doesn't value reflective meetings
3. CT and consultant valuing reflective thought and being held in mind
4. Parallel between CT's and consultant's lack of clarity about boundaries between CT/mother and consultant/therapist

- Focused Coding

1. Consultant bearing feelings of uncertainty and negativity
2. Valuing reflective thinking versus avoiding it
3. What are the parameters of the consultant role, of the CT role and of the SENCo role?

Brief Account of Completion of the Work

There were two more sessions before the Easter break and six after it, totalling fourteen sessions in all.

SESSION SEVEN

I met with Gill again. Our focus this time was on the envy her daughter Sadie produced in other children because she was a teacher's child, and on Gill's mother, who was supportive but always made Gill feel like she was being judged.

SESSION EIGHT

This session began with a situation where there was nowhere to meet. Gill again pointed to the HT not valuing reflective meetings and also making too much of Sadie's behaviour in school. Gill talked about her feelings of guilt at not being overly affectionate with Sadie, because her parents had not been affectionate with her.

SESSION NINE

In this session, after the Easter break, Gill was feeling stronger and more able to manage the advent of Sadie's father in her life. She addressed her dual role of mother/CT, with particular regard to her dislike of Sadie's CT. We agreed to invite Jane along to the latter part of our next meeting.

SESSION TEN

In this session, Gill began by feeling more persecuted by Sadie's father, who was making unreasonable contact demands. She also complained about the HT being overly strict on Sadie, who had been caught in the playground cutting another child's hair. Gill and I discussed this further with Jane when she joined the meeting. We discussed it openly, with Jane giving her perception of the HT's reactions and Gill giving her perception. The two slightly differed; there seemed to be a sense of resolution in Gill as I wondered about why their perceptions had been different. As Jane and I walked away

from the meeting, Jane commented on how impressed she was with the work I was doing, and she expressed interest in the approach.

SESSION ELEVEN

This was the last individual session with Gill and myself. We had agreed that the session after this one would be with Jane again. Gill was feeling that she was able to be more assertive with Sadie's father and with the HT. She was also managing her dual roles of mother and CT in the school more easily. She expressed gratefulness to me for our work together.

SESSION TWELVE

This was a meeting with Gill and Jane and myself. It began with Gill giving her perception of a meeting with the HT about Sadie, and Jane giving her perception. As with the hair-cutting incident, both perceptions were different. When I considered why they were different, Gill said she knew that sometimes she felt so sensitive and attacked that she over-reacted. This comment gave me the opportunity to comment on feelings of vulnerability amongst colleagues. Gill followed this comment, initially blaming Sadie's CT, John, for not wanting to admit failure, then Jane said that he had impressed her when he had admitted in a staff meeting to taking on too much work:

Gill said that John wasn't able to admit failure in front of the staff, especially when the HT was present. I asked why she thought that was. She said it was about insecurities. I added it might be hard to show vulnerabilities, especially when you're a relatively new teacher. Gill replied that she had only qualified a few years before him, and she could show her vulnerabilities. I said that all of us had insecurities and vulnerabilities and it could be very hard to show them in front of our colleagues. Jane said John had gone up in her estimation when he admitted in a staff meeting that he had taken on too much work one time. She said that they all had plenty of vulnerabilities. Gill agreed. (Session 12)

As the conversation progressed, Gill could be seen to change her mind about John, moving from saying that he couldn't admit failure to agreeing with Jane that he admitted to a failure of judgement about his work load in front of all the staff.

SESSION THIRTEEN

I met with Jane alone for the first time since my work with the CT had begun. Jane was busy but wanted to talk to me about my work with Gill. She reported that Gill was much calmer and more confident at school, and was managing boundaries much better.

SESSION FOURTEEN

In this session, Jane was preoccupied with end of term tidying up and seemed to have forgotten her appointment time with me. She asked me at the end whether I had qualified yet. When I replied that I had, Jane jokingly said that she would be frightened of me now. I thought again about feelings of professional envy and feelings of inadequacy.

Summary of Themes Emerging through Sessions Four, Five and Six

SESSION FOUR

– *Focused Coding*

1. Countertransference feelings of abandonment, anger and rejection
2. Attentiveness versus avoiding thinking
3. Unacknowledged rivalrous feelings, which threaten feelings of vulnerability and dissatisfaction if acknowledged

SESSION FIVE

– *Focused Coding*

1. Lack of time
2. Feelings of inadequacy
3. Attentiveness and reflective work versus acting and avoiding thinking
4. SENCo's struggles in her work role symbolised in the case she discusses

SESSION SIX

- *Focused Coding*

1. Consultant bearing feelings of uncertainty and negativity
2. Valuing reflective thinking versus avoiding it
3. What are the parameters of the consultant role, of the CT role and of the SENCo role?

5.4.4.7 *Links between Sessions Four, Five and Six*

Attentiveness and being held in mind emerge as themes through all three sessions. There is a tension between attentiveness and avoiding thinking. The reason for avoiding thinking is to do with the unbearable nature of negative feelings, and the wish not to think about them. In Session Four, the negative feelings manifest in abandonment, anger and rejection. Towards the end of this session, unacknowledged rivalrous feelings suggest negative feelings of dissatisfaction and fear of vulnerability. In Session Five, the manifest negative feelings are those of inadequacy. In Session Six, uncertainty becomes apparent too. In all, the feelings that emerge in the three sessions are abandonment, anger, rejection, dissatisfaction, inadequacy. These are powerful feelings, which are felt not just by the SENCo but also by the CT to a certain extent. In order to manage their jobs and to function effectively, the SENCo and the CT would need to avoid thinking about these feelings. That could explain why there appears to be some resistance in the SENCo to working with me in a reflective way, and why she seems to rarely have time to attend to meeting in a focused way with me. It could also explain why in her Initial Needs and Expectations form, Jane focused on management issues sooner than more reflective ones.

What is striking in this school is that the turning points are less clear. The SENCo has a brief beginning of a turning point in Session Four, then withdraws over the Christmas break and struggles to re-engage. It is through the consultant working with the CT, who has a turning point in her first session (Session Six), that Jane eventually appears to shift her thinking to considering the vulnerabilities of staff in the school (Session Twelve).

As the consultant, I struggled to maintain my working relationship with the SENCo, and I questioned the parameters of my role. The CT was helped by my work, and perhaps the SENCo was in too vulnerable a position with the HT to enter that sort of reflective work herself.

5.4.5 Comparison of the three SENCOs' resistance to engage during the Christmas break

Although I chose to present in detail the last three sessions of the consulting work for Helen, compared to the sessions over the Christmas break for Linda and Jane, the Christmas break was still of significance for Helen, so I will present a brief comparison at this point of the experience of all three SENCOs during this break.

All three SENCOs experienced some form of reflective engagement prior to the Christmas break. Linda, Helen and Jane all participated in discussing 'the baby in the child' with me, and began to engage emotionally. Examples of this can be seen in Section 6.3 of this study.

When all three SENCOs didn't re-engage after the Christmas break, with supervision help I linked this to a flight from difficult feelings. This was especially apparent with Linda, as the session I had with Linda and her staff two sessions before the break was fraught with feelings of anger and abandonment, leading to the following session, just before the break, being almost cancelled by Linda, who prioritised a meeting with the Educational Psychologist. A flight from difficult feelings can also be seen with Helen and Jane. Jane began to enter a flight from thinking about difficult feelings during the session before Christmas, after we both thought reflectively about George needing a mother-infant sort of interaction, and about how painful it might be for George and his brother not to have their father with them.⁵ Helen had entered a process before the break of beginning to engage then withdrawing into being too busy to speak with me, and interestingly engaged on a 1-1 level with me for the first time during the first session after the break. Helen had perhaps made a decision to enter the consulting process where Linda and Jane were still wary of it after the break.

In summary, there is a pattern that can be seen with all three SENCOs around the break of tentatively engaging in a reflective process, then withdrawing into a mode of acting

⁵ It is of significance that George had an absent father, and might himself have been wanting to enter a flight from difficult feelings at Christmas time, which is depicted as an idealised family time, involving a loving parental couple, and a benign 'Father' Christmas. For many vulnerable children, fathers are painfully absent or distant at this time of year.

sooner than thinking as emerging feelings became too difficult and painful, then stepping back into reflecting. A significant turning point is reached with Linda after the break, where she talks about her feeling sometimes like her head is being ripped apart (Session Six, Barnswood School), and with Gill, CT in Jane's school, where she opens up to a reflective process and to her more vulnerable feelings (Session Six, Ashurst School). I have cited the turning points for Helen as occurring near to the end of her work with me, but she interestingly engaged for the first time on a 1-1 basis straight after the Christmas break, and this can be seen as her first turning point, in that she decides, albeit unconsciously, to engage in a potentially vulnerable process during a momentous year in her career.

5.4.6 Summary of Coding Outcomes

Themes emerging from the coding outcomes of all three schools are summarised below:

Barnswood School	<p>Category 1</p> <ul style="list-style-type: none"> • Feelings of anger, abandonment and anxiety experienced by child, mother, SENCo, staff group and consultant • Flight from anger • Considerations of consultancy approach to enable more thinking capacity in SENCo and staff • Attunement and connecting aided by containment of anxieties
	<p>Category 2</p> <ul style="list-style-type: none"> • Anxiety and uncertainty about complex SENCo roles • Lack of time, space and resources
Valley School	<p>Category 1</p> <ul style="list-style-type: none"> • Difficult feelings emerging about ending a post - sadness and guilt difficult to bear for SENCo and consultant • Role of consultant to bring together different parts of thinking • Consideration of consultancy approach as a reaction to the thinking of the SENCo • Ambivalence about retiring
	<p>Category 2</p> <ul style="list-style-type: none"> • SENCo's awareness of the complexity of her role and her resulting anxiety about her successor's capabilities • SENCo's ambivalence and resulting oscillation between thinking about her own retirement and between thinking about the children in her care • Confusion about responsibilities and leadership • Lack of time and space
Ashurst School	<p>Category 1</p> <ul style="list-style-type: none"> • Countertransference feelings of abandonment, anger and rejection • Attentiveness and reflective work versus acting and avoiding thinking • Consultant bearing feelings of uncertainty and negativity • Unacknowledged rivalrous feelings, which threaten feelings of vulnerability and dissatisfaction if acknowledged • Feelings of inadequacy
	<p>Category 2</p> <ul style="list-style-type: none"> • SENCo's struggles in her work role symbolised in the case she discusses • What are the parameters of consultant role, of the CT role and of the SENCo role? • Lack of time

Table 1: Summary of Coding Outcomes

Further analysis of the above themes led to the emergence of two distinct categories.

These are:

1. *The containment of anxiety through the consultant being attentive, bearing difficult feelings, thinking about them and feeding them back to the SENCo*
2. *The conflicts and complexities of the SENCo role.*

I reached these categories by comparing and contrasting the coding outcomes from the three schools in Table 1. The first four points in Barnswood and Valley Schools, and the first five points in Ashurst School, can all be summarised under the category of *difficult emotions and attempts by the consultant to contain them*. They are listed in Table 1 under Category 1. The remaining points in each school can be summarised under the category of the *conflicts and complexities of the SENCo role*. They are listed in Table 1 under Category 2.

In thinking about these categories, I wondered further about my role in containing difficult feelings. I thought about the containing function I provided, and about the anxiety and associated difficult feelings I accessed by using my awareness of my countertransference responses. I used my own reflectiveness and supervision to become more conscious of these countertransference responses.

5.4.7 Summary of Countertransference Responses

I thought that in order to understand the process of my containing function more fully, I would trace my countertransference responses throughout my work in the three schools. In doing this, an interesting picture emerged, as outlined below in Table 2.

NEGATIVE COUNTERTRANFERENCE RESPONSES		
Barnswood School	Ashurst School	Valley School
Common responses		
<ul style="list-style-type: none"> • Anxiety (3) • Uncertainty (1) • Anger (1) • Abandonment (4) • Inadequacy (2) 	<ul style="list-style-type: none"> • Anxiety (1) • Uncertainty (2) • Anger (2) • Abandonment (2) • Inadequacy (1) 	<ul style="list-style-type: none"> • Anxiety (1) • Uncertainty (1)
Individual responses		
<ul style="list-style-type: none"> • Feeling split in role (1) • Lack of confidence (1) • Feeling of being dismissed (1) • Held in contempt (1) • Frustrated (2) 	<ul style="list-style-type: none"> • Irritated (1) • Feeling disrespected (1) • Rejection (1) 	<ul style="list-style-type: none"> • Sadness (1) • Guilt (1) • Feeling overwhelmed (1)
POSITIVE COUNTERTRANFERENCE RESPONSES		
Barnswood School	Ashurst School	Valley School
Common responses		
<ul style="list-style-type: none"> • Increased confidence (4) • Less anxious (1) • Affirmation of consultant role (2) 	<ul style="list-style-type: none"> • Increased confidence (1) • Less anxious (1) • Affirmation of consultant role (1) 	<ul style="list-style-type: none"> • Increased confidence (1) • Affirmation of consultant role (2)
Individual responses		
<ul style="list-style-type: none"> • Feeling listened to (1) 	<ul style="list-style-type: none"> • Valuing the consultant (1) 	<ul style="list-style-type: none"> • Feeling less anxious about her successor (1)

Table 2: Negative and Positive Countertransference Responses

In the above table, the countertransference responses show the commonality between the schools and the individuality of each school. The numbers in brackets indicate how many times the countertransference response was experienced. In the

countertransference responses common to all three schools, which is the majority of the responses, I experienced eleven negative and seven positive countertransference responses with Linda; eight negative and three positive countertransference responses with Jane; two negative and four positive countertransference responses with Helen.

5.4.8 Projections from children and families

In the Introduction, I referred to thoughts I had had as a SENCo about SENCos being isolated, as they do not belong to management, the CT group or the TA group. My countertransference responses in this study were so powerful that I thought more about the children and families with whom SENCos work. Children on the SN register have, by the very nature of being on the register, a more complex role to negotiate as pupils in their school than pupils who are not on the SN register. They are children who need ‘special help’ because they do not fit into the normal category of children who ‘manage.’ One of the findings from examining the focused coding outcomes was that the SENCo role is conflicted and complex; there is a direct parallel between the complex role negotiated by children on the SN register and the complex role negotiated by the SENCos who look after them.

Youell (2006) points to the child with special needs as becoming a ‘magnet for projections from teachers, support workers and peers.’ This can be seen in the example of Tim, in Barnswood School, who evokes strong feelings in the staff group, not just towards him but also towards his mother. This is illustrated in the following excerpt, where I talked about Tim as feeling anxious, but the TA refuted this and became angry, leaving me wondering what she thought Tim felt, but unable to pursue this as the TA began to talk heatedly about Tim’s mother:

I explained to her that we had just been thinking about Tim’s mother feeling overwhelmed and about Tim’s anxiety. The TA replied, ‘Excuse me, are we talking about the same boy? It is Tim we’re talking about, isn’t it? I don’t see him as anxious at all.’ This comment was made angrily and was experienced by me as anger against myself. The TA then seemed to state what really angered her – Tim’s mother. She said she thought a lot of it was to do with home. He just came in to school some mornings in a mood. She said his mother didn’t bother. (Session 4)

It is undoubtedly the case that Tim might not present as an anxious child, who in the TA's mind might be imagined to be typically quiet and withdrawn; he in fact presents as quite the opposite, as seen from the observation in Session Four. It is also the case that his mother neglects to attend to all his needs. However, the strength of the feelings in the TA, and her later comment in Session Four about being a single mother herself, suggest that Tim has become a magnet for the TA's own projections of insecurity and anger.

It is my hypothesis that the SENCOs and their staff in this study, being the recipients of projections, and being 'on the edge' of school life, were projectively identified with these children, who in turn experienced some of the feelings that formed my countertransference responses to the SENCOs. In order to test this hypothesis, I looked in more detail at the children presented by each SENCO, and compared their likely projections to those of the SENCOs. There were many parallels between the emotions experienced by the SENCOs and by the children and their families, as outlined below.

LINDA: BARNSWOOD SCHOOL

The two children presented by Linda were:

- Tim, aged eleven, who had an absent father and whose mother needed more support than Linda was able to offer.
- Matthew, aged nine, who was on the Autistic Spectrum and functioned at Reception Level. His parents were anxious and Linda spent a lot of time reassuring them.

In looking at Table 2, what is particularly striking is the intensity of negative countertransference responses I had in my work with Linda in comparison to the other two schools. She (and her staff) felt the most anxious, abandoned, inadequate, split in role, lacking in confidence, dismissed, held in contempt and frustrated.

In her work with Matthew's parents, Linda invested a lot of time listening to them and reassuring them. This would have been painful for Linda, as she would have felt the

sense of anxiety and frustration that parents of children with any form of disability experience. Youell (2006: 102) points to the fact that '*sometimes...acquiring a Statement of Special Educational Need is complex and time-consuming and can be, in part, a distraction – an unconscious defence against the pain of engaging with the emotional experience*'. Linda prioritised the Educational Psychologist, who helped her to obtain a Statement of Educational Need for Matthew, above my session, the focus of which was her emotional experience. It was necessary to acquire the Statement, but it seems clear that it was partly used as an unconscious attempt to avoid any more painful experiences, especially as the session took place after one where there were difficult emotional experiences of anger, contempt and frustration. My feelings of inadequacy and uncertainty about what I could offer Linda compared to the Educational Psychologist informed me of how Linda might have felt after the previous session when she had revealed her feelings of inadequacy to me, the 'expert' consultant. Matthew, who Linda had wanted the Educational Psychologist to see, had anxious parents who needed reassuring. They projected their feelings of anxiety and inadequacy into Linda, who in turn projected them into me. There was a flight from thinking about difficult feelings, and the flight was one with which I was familiar myself.

In her work with Tim's mother, Linda experienced her attempts to reach her being met with rejection and frustration. In relation to her work with Tim's mother, Linda also felt anxious and inadequate, making comments like 'I'm only a teacher' (Session Six) and expressing feelings like 'her head was being ripped apart' (Session Six). It is likely that Tim's mother spent so much time avoiding professionals partly because of her chaos but also because of her feelings of inadequacy and anxiety about what the professionals would do, the ultimate fear being that they would remove her child from her. These feelings would have been powerful, and Linda would have been the recipient of some of them in her role as SENCo.

There were other children Linda presented when we first met who were concerning, but she was most concerned about Tim and Matthew. It could be that Linda was more drawn to helping these children and their families because their problems mirrored her own feelings of anxiety, rejection and frustration. In working with them, her own feelings would have been exacerbated, as they projected their feelings into her. As she projected the feelings into me, and I contained them, partly by processing which

feelings were mine and which were evoked by Linda, she was able to work out which feelings were hers and which feelings were those of the parents. In addition, she began to see how Tim also was feeling anxious, rejected and frustrated, like his mother.

HELEN: VALLEY SCHOOL

The two children presented by Helen were:

- Bradley, aged seven, who had suffered immense loss and neglect in his early years and was fostered in the care of the Local Authority.
- Ben, aged nine, whose parents were separated, and whose mother had suffered depression post natally. She had a lack of connection with Ben when he was an infant. It emerged at a meeting that there was a lack of clarity for Ben about the roles and responsibilities of his many parenting figures.

My negative countertransference responses in my work with Helen show anxiety, uncertainty, sadness, guilt and feelings of being overwhelmed. The two children about whom Helen was concerned both had issues of immense loss, which at some level connected with Helen's feelings of immense loss at retiring.

The lack of clarity for Ben about roles and responsibilities of parenting figures is interesting in relation to Helen's school, where there were impending staff changes in the HT and DHT, who were the 'parenting figures' of the school. This huge change was only revealed in the penultimate session, and enabled me to make sense of Helen's anxiety about her successor, and of her feelings of loss about her retirement. The countertransference feeling of being overwhelmed I had experienced in Ben's family meeting was as a result of suddenly feeling a lack of structure or clarity, which led to uncertainty. It is very likely that Helen was also beginning to experience a sense of feeling overwhelmed with these feelings not only as a projection from Ben and his family but also as she left behind her an unfilled post and was unsure whether someone who understood the complexity of the SENCo role would be appointed to fill it.

In a meeting with Bradley's foster mother, and the staff concerned with Bradley's care, the pain was palpable as everyone focused on the neglect and possible sexual abuse of Bradley as an infant. Children who have experienced trauma are often unable to manage their unbearable feelings; they are predominantly in the paranoid-schizoid position, where they need to defend against unbearable feelings by splitting them off and projecting them out onto others constantly (Kenrick 2006). The staff and Helen all held feelings of high anxiety about Bradley, and were often quite overwhelmed. Bradley's powerful projections into the staff would undoubtedly have played a part in Helen's anxiety about her role.

JANE: ASHURST SCHOOL

Jane presented one child who caused her undue concern:

- George, aged ten, was one of four children who had two different, absent fathers and lived at home with their mother. George's mother struggled to look after the children. He was unable to focus and seemed to have his own agenda, lacking social awareness.

My negative countertransference responses in my work with Jane show anxiety, uncertainty, anger, abandonment and inadequacy. I felt angry and abandoned by Jane, as George would have felt by a father who abandoned him. George was also observed by me to experience anxiety and uncertainty in the classroom.

George was a boy who was difficult to put into a category. Jane was very relieved when he became diagnosed with ADHD. This echoes with Jane's wish to manage procedures and resources, reporting and recording behaviours. This is a defensive way of managing challenging children and avoiding thinking about their pain. George had an absent father and seemed to have his own agenda. Jane also had her own agenda, having built up a SN department in an independent way, where the HT didn't seem to value her and was planning his absence. Jane gave me to understand that she felt unrecognised by the HT and 'dumped on' by him, in that he gave her the jobs he didn't want to do. I felt rejected by Jane on more than one occasion and wondered if Jane was

giving me an experience of not being recognised or respected, as George also might have felt unrecognised or respected by his father.

6. Discussion

What happened in the study was a shift in all three SENCOs and in some of their staff members towards being able to reflect more on their roles. Linda (Barnswood School) became more effective in her school, evidenced in her promotion and recognition; Helen (Valley School) became more able to leave her legacy of thoughtfulness, evidenced in the way she managed to use the consulting time both to process her feelings about retiring and also to help the staff to become more aware of thoughtful practice; Jane (Ashurst School) appeared to be more resistant to taking time to reflect, but a gradual engagement in the process was evidenced as the work progressed, and Gill (CT in Ashurst School) functioned more calmly and effectively at work as a result of my interventions.

These shifts happened because I contained the powerful feelings that were being projected into the SENCOs, and in turn into me. I was aware of these projections, and of feeling projectively identified with the SENCOs, as they were with the children. These cycles of projective identification formed the basis of my understanding of my countertransference responses. The Summary of Coding Outcomes (Table 1) has evidence of the strength of the emotional experiences, but it was only when I looked in more detail at my negative and positive countertransference responses (Table 2) that I was struck by how powerfully I had experienced them. As a defence, I had at times cut off from my feelings, withdrawn and I had not been able to reflect on the emotional experience. When I was able to register the experience, I could manage to think about my feelings again. This process informed me of how the SENCOs might have managed the children, as they are often in 'survival mode', thinking on their feet and chasing the next challenging bit of behaviour, as Jane was doing when she abandoned me for our appointed session. They have little time during a school day to process their feelings, and have no access to psychoanalytically informed supervision.

In thinking about these powerful emotions, I was reminded again of the sense of isolation experienced by myself as a SENCO and by many of my SENCO colleagues. The issue of belonging seems to be central to the complexities around the SENCO role.

SENCOs feel like they only belong to a school staff group by being on the edge of it. They sometimes do not have their own space, or if they do, it is perhaps shared with other colleagues. They do not have the security of the CT role, however secure their roles might feel within their schools. They work with children who often feel ‘on the edge’ of school life themselves.

Because I worked in an applied way, and also in an isolated way, like the SENCOs, it was tempting for me to abandon the tools of psychoanalysis, and to think of myself just as a supportive worker, underestimating the insight that I could offer the SENCOs by gaining insight into my feelings, and therefore their feelings and those of the children and families with whom they worked. I needed supervision to help me to remember the importance of attending to transference and countertransference as a source of insight and information. Freud’s (1910) insight into the power of countertransference responses as a psychoanalytic tool is hard to remember when faced with such powerful projections that can be so painful as to block one’s thinking capacity.

6.1 Maintaining a thinking capacity

Such powerful projections borne by professionals who have an isolated role have a strong potential to attack a thinking capacity. Youell (2006: 102) describes children with EBD as having feeling states that ‘change at an alarming speed and the capacity to think and control their behaviour lags far behind’. There were five children with EBD in Barnswood School, and six children with EBD in the other two schools; all those children were under the care of the SENCO, either directly or indirectly, through the CT and TA. All the children who were presented in the study, apart from Matthew in Barnswood School, were in the EBD category on the register. SENCOs working every day with such children cannot manage to avoid having their thinking capacity affected by them. Salzberger-Wittenberg (1983: 62), in speaking about the effect of an emotional experience, says that we should not feel surprised ‘if we sometimes feel overtaken by them and have to do hard mental work in order not to be overwhelmed’. She points to the fact that we should not just be recipients of difficult emotions without being interested in and wanting to think about the feelings evoked in us. It is this capacity to think that stops the recipient of projections from becoming exploited and

rendered as powerless as the adult or child who has projected the emotion. The capacity to think is vital in the presence of powerful emotions. There were instances in my work when I felt overwhelmed. Like the SENCos, my thinking capacity was repeatedly attacked in my work as a consultant.

My struggle to think about my feelings can be seen in my work with Jane, when she abandoned me in her room while she dealt with children who had been challenging during the morning break. I was aware of withdrawing from my feelings, and afterwards in supervision it was my supervisor who expressed anger on my behalf at how I was treated, thereby awakening my sense of injustice and allowing me to consider Jane's situation. Jane was dealing with children who had erupted in anger during the morning break, and she herself felt unsupported by her HT. She felt alone in her work and had asked me to work individually with children and parents, which I had refused to do. She had undoubtedly been the recipient of angry projections by children, and felt unsupported, not just by her HT but also by me. She projected feelings of anger and abandonment into me, and in subsequently containing them, I helped her to begin thinking with me again.

Both Linda and I experienced an inability to process our emotions and instead acted them out around the long Christmas break. Linda kept me waiting to book another session, perhaps unconsciously acting out how it feels to be uncertain and anxious. I became uncertain and anxious, and projectively identified with Linda's uncertainty and anxiety. In turn, I acted out my anger by being ten minutes late for our first appointment after the Christmas break. Linda was waiting for me, in contrast to her keeping me waiting at the beginning of the session before the Christmas break. Both of us had good reasons for our lateness, but in the context of Linda's resistance to engaging in a process with me where her more vulnerable feelings were beginning to be exposed, the unconscious communication between us in our struggle to grapple with the uncomfortable feelings is clear. By beginning to think about and contain these communications, I was able to work with Linda, and we shifted into a more depressive position, where thoughtfulness was allowed.

In my work with Helen, I can be seen to adopt the expert consultant role often as a result of Helen drawing me into it. I began to understand this as one of the strategies

Helen was using to avoid facing the pain of her retirement and the uncertainty around it. By turning me into the 'expert' she could avoid the subject. In turn, by adopting this role, I avoided thinking and instead enjoyed the safe role of giving advice and being supportive sooner than facilitating a change in Helen's defences against the pain of her retirement. As I became aware of being drawn into an expert consultancy role, and began to encourage Helen to think herself, I noticed an increasing ability in her to be less dependent on my containing function, and to face the reality of her painful situation. This shift happened around the time of the family meeting about Ben, where I initially felt overwhelmed with my feelings and struggled to think, then managed to take some control, thereby helping the family's joint capacity to think in an understanding way about Ben's lack of early connection with his mother, and to think about their current communications with him. Previously, Helen had struggled with maintaining thinking in the face of complex families like Ben's, undoubtedly because she was struggling to think about her own painful situation.

6.2 Communicating Symbolically – a move into the Depressive Position

Segal (1957) in her seminal paper on symbol formation described the use of the symbol arising when depressive feelings predominate over paranoid-schizoid ones. The infant experiences reparative drives as he enters the depressive position, and wants to repair the damage he believes he did to his mother by projecting into her his unwanted feelings of terror and anxiety. He feels guilt and wishes to restore his damaged objects. He begins to repress and sublimate destructive impulses. Segal later summarised this stage as being the early beginnings of symbol formation:

At this point the genesis of symbol formation can be seen. In order to spare the object, the infant partly inhibits his instincts and partly displaces them on to substitutes – the beginning of symbol formation (1973: 36).

The symbol is used not to deny ambivalence, guilt and loss, as it is in the paranoid-schizoid position, but to overcome it. This is important to think about in the context of how all three SENCos used the children or staff with whom they were working to communicate symbolically what were their own anxieties. They were communicating

symbolically to help them to overcome their feelings; this reflects that they were operating in the depressive position.

Segal describes how when projective identification is used as a defence against depressive anxieties, symbols may revert to symbolic equations, where the symbol substitute is felt to *be* the original object. So, projective identification is used when the paranoid-schizoid position predominates. All of the SENCOs projected their anxieties into me throughout our work together, and I have pointed to their need to function in a survival mode, in the paranoid-schizoid position, much of the time. However, it is a hopeful sign that all of the SENCOs began to convey their concerns to me symbolically when we were at least half-way through our work together, showing that they were able to communicate with me symbolically as the work progressed. It was of vital importance that I could understand their communications in terms of their symbolic value.

A child Helen presented as a symbolic communication was the boy with Crohn's disease. In the following excerpt, Helen named her concern and anger about the rights of a boy who had Crohn's disease for whom she had been advocating. I used Helen's indignation about the boy to attend to and name the frustration of the SENCO role. This led Helen to name her own worry, which was her successor:

Helen had told her to put a big red note on the boy's file. Helen said it was terrible; it was this boy's right. I said it seemed to be a very frustrating part of being a SENCO. It was part of her role to liaise with other professionals, and that could be very frustrating, trying to pull people together. Helen agreed, and said that was what she was worried about, what she was talking to the staff about today. She didn't know who her successor would be. (Session Ten Valley School)

As a result of Helen being able to name and think about her concerns, her confidence increased in being able to leave a thoughtful legacy in the school, even if she was unsure about who her successor would be. In turn, I felt more confident about having left a thoughtful legacy in the school too.

Jane presented her CT colleague as needing work with me, sooner than herself; this can be seen as a symbolic communication of Jane's own struggles. The CT colleague

struggled with the HT, as did Jane, and both of them also struggled with feeling isolated and unrecognised. Jane had told me about feeling ‘dumped on’ and unrecognised. After I had had three sessions with Gill (CT), Jane, having joined us for the end of the next session, was able to comment on ‘how impressed she was with the work I was doing, and she expressed interest in the approach’ (Session Ten, Ashurst School). The work to which Jane referred was me thinking about the different perceptions of Jane and Gill regarding the HT’s reaction to Gill’s daughter cutting a child’s hair in the playground. Jane had engaged in the thinking process through my work with the CT; she had begun to shift her position regarding the HT. This process could have been used directly with Jane, had she wanted me to think with her about her perceptions of the HT ‘dumping’ the unpleasant jobs on her. She was able to eventually apply the process to herself, as evidenced in the comment she later made in a joint meeting with Gill and myself. The comment was that ‘they all had plenty of vulnerabilities’. Jane made this comment after I introduced the subject of vulnerable feelings, which allowed Gill to admit to hers, and finally allowed Jane to admit to hers, even though she framed her comment within a context of everyone having vulnerable feelings:

Gill said that John wasn’t able to admit failure in front of the staff, especially when the HT was present. I asked why she thought that was. She said it was about insecurities. I added it might be hard to show vulnerabilities, especially when you’re a relatively new teacher. Gill replied that she had only qualified a few years before him, and she could show her vulnerabilities. I said that all of us had insecurities and vulnerabilities and it could be very hard to show them in front of our colleagues. Jane said John had gone up in her estimation when he admitted in a staff meeting that he had taken on too much work one time. Jane said that they all had plenty of vulnerabilities. Gill agreed. (Session 12, Ashurst School)

Jane seemed to need to stay in her role of the SENCo being helpful to CT. We can hypothesise that it was important for her to access her competent feelings in order to talk about feelings of vulnerability. Jane was able to access my containing function by maintaining her feelings of competency to counteract her feelings of inadequacy, and presented Gill as the CT with vulnerable feelings. By doing this, Jane maintained a positive transference relationship with me in this phase of our work together, which was different to the first phase of our work, before I started working with Gill; the first phase featured a negative transference, which could have been too difficult and unhelpful for

Jane, who was already in a negative transference relationship with her Head Teacher, and was seeking support from her work with me.

Linda was unable to show her anger towards Tim's mother throughout our work together, and instead reached out to her in an attempt to 'bring her on board.' She was partly compromised because her own child played with Tim, but also it is likely that Linda's attempts to remain thoughtful about Tim's mother would have been very compromised if she had accessed her anger and had been unable to process it. The anger was expressed by Tim's CT and TA, both of whom Linda was keen for me to meet. Linda was able to maintain her role as the thinking SENCo, allowing other staff members to express their own anger and hers. She was thus able to convey to me symbolically through her staff how much anger she had. She subsequently, in the next session, acted out her anger with me by shortening our session and prioritising the Educational Psychologist. There followed a flight from these feelings, but I had experienced them and modelled a consultant who, despite the angry feelings, remained with the work after the long Christmas break; Linda in turn maintained her thoughtfulness about Tim's mother, called a CAF meeting and secured help for her and Tim.

6.3 The Baby in the Child

A particular perspective brought to this work by a Child Psychotherapist includes the understanding of the place of 'the baby in the child.' This was voiced by Helen in her last session with me, when she referred to a meeting I had held with teaching staff, teaching assistants and the foster carer of Bradley, and during which I had asked the foster carer if she could share some of Bradley's early life history with us. The feelings in the room as the foster carer shared Bradley's abuse and neglect were palpable, and it struck me after the meeting that the staff group had struggled for months with Bradley but had never appeared to have made the connection between his early life and his current behaviour, despite them all knowing that he was in foster care. I considered how I might have briefly thought about it as a SENCo myself, but how I might not have wanted to ask about it, being unsure about confidentiality. My thoughts led me to consider that there might have been something much more than social or professional

politeness that would have stopped me asking the question: the answer might have been too uncomfortable or unbearable to hear.

In realising how my training as a Child Psychotherapist had empowered me to be able to ask the 'unaskable' questions and to help a group to endure the answers and to think about them, I began to think of other instances during my consulting work in this study when I had thought about the vulnerabilities of the baby in the child. They included:

- I spoke with Linda about Tim as a young baby with a depressed mother unable to hold him in mind, which led to Linda expressing strong feelings of sadness (Session Five, Barnswood School)
- in the meeting I held with Ben's family and teaching staff, the grandmother addressed a lack of bonding between Ben and his mother, which I took up in terms of what that might mean for Ben (Session Nine, Valley School)
- I likened an attentive CT of George's to an attentive mother, and shared with Jane my thoughts about George needing an attentive mother-infant type of interaction, where a mother holds the infant's gaze and directs her voice to him (Session Four, Ashurst School)

By bearing the baby in the child in mind as the consultant, there was an unspoken message I gave to the SENCOs with whom I worked that vulnerability could also be voiced and heard. The baby represents the most vulnerable part of ourselves as human beings, and evokes some of our strongest feelings.

7. Conclusions and Application

This study set out to present an investigation into the interactions that took place when I worked for one academic year with three primary school Special Educational Needs Co-ordinators (SENCOs).

It has confirmed what is commonly expressed by professionals in the field, that a SENCO role can be very isolating and difficult. What has emerged with surprising clarity is the strength of the feelings that are projected into SENCOs, and the importance for SENCOs of accessing a consultant who can understand, process and make sense of the feelings that the SENCO might project into them, and can help them to understand the projections.

What I have learnt from this research is that in order for SENCOs to work effectively, they need consultancy from a professional who can tolerate extreme projections, together with a capacity to endure them whilst trying to make sense of them and understand their meaning.⁶ The consultant also needs to be able to understand children and to interpret the behaviour of the children who are presented not only concretely but also in terms of how they might be thought about by the SENCO as a symbolic representation of the SENCO's feelings. In addition the consultant needs to be able to work in an applied way. In a school setting, the consultant is an outside visitor. Although guests are subject to certain etiquettes of politeness, what this study shows is that I was often subject to what appeared to be rudeness and inconsiderateness. To make sense of this behaviour can be very difficult when operating in an isolated way, without the immediate support of one's clinic colleagues.

The psychoanalytic skills needed for effective consultation to SENCOs are very specific and require a high level of personal resilience, understanding of group processes, projective identification, symbolic communication and of interpersonal relationships. I

⁶ Christine Bradley (personal communication) referred to workers with vulnerable children and families having to 'bear the unbearable feelings'; the consultant's task of containing extreme projections from SENCOs is well summarised in this phrase.

have realised through working on this study that I would not have been able to effect such change without the analytic training I have received. Child and Adolescent Psychoanalytic Psychotherapists seem to be ideally suited to consulting work in this area, and they themselves have access to supervision from workers within their discipline. They work with complexity individually, in groups, in clinics and in applied settings. They are able to contain powerful projections as a result of their rigorous training. There are many other professionals in the field of mental health who currently consult to schools. Educational Therapists consult widely to staff in educational settings, and their training also allows them to offer skilled consulting work to SENCOs. Primary Mental Health Workers work in schools, directly with SENCOs, and their discipline mix is varied. Anyone who works in a consulting role in school settings, whatever their training, needs support and supervision. One of the most important aims for workers who consult to schools, as it is for the workers to whom they consult, seems to be that they can be helped to maintain their capacity to think in the face of overwhelming projections.

We can hypothesise that when a consultant is able to adequately contain the anxieties and difficult feelings of SENCOs, more positive, developmental feelings can be accessed, and confidence increases. This increases effectiveness of SENCOs and has a positive impact on the children in their care. The tendency of the SENCOs in this study was to want to use me to see children directly, and this was a common question when I first met with the group of SENCOs at the opt-in meeting. I resisted this, instead enabling the SENCOs to do the work directly themselves as a result of my intervention. It is therefore cost-effective to consult to SENCOs sooner than seeing children directly, enabling SENCOs to do the work instead.

If I were to repeat this study, I would not necessarily set it up in the same way. It would be even more cost-effective to run a consultation service either for SENCOs as a work discussion group or within schools for all the staff. The advantage of work discussion groups just for SENCOs is the opportunity for them to have immediate access to other SENCOs, to learn from each other and to share good practice. Jackson (2008) points to the provision of work discussion groups in secondary schools for all the staff provided by the Brent Centre for Young People and Tavistock Centre outreach projects helping staff to:

Develop professional skills, confidence and job satisfaction; deepen understanding of pupils and the impact pupils have on teachers;.....promote the development of reflective practice, through increased peer consultation, within the wider culture of the organisation (2011: 79)

Geddes (2006) describes a thoughtful work discussion group that incorporates all staff as the 'secure thinking base' within a school (2006: 136). This secure thinking base strengthens the containing qualities of the school and promotes greater understanding of the child's emotional and cognitive experience.

These themes highlighted by Jackson and Geddes link to themes that emerged as a result of this study, and I have given consideration to whether it would have been more advantageous not just from a financial perspective but also from a clinical one to run the project as a work discussion group. However, the disadvantage of the work discussion group specifically to support and develop the SENCo role is that the consultant would not have as much time and space to examine and explore the individual needs of SENCos and the individuality of their school environments as I did in this study. The individual needs of each SENCo, just with a sample of three, were quite different. SENCos are all at different stages of their careers, as were the SENCos in this study, and their school settings are different, with the provision of special needs more or less established and supported. A SENCo like Helen would not necessarily have had her specific needs around her retirement met in any work other than individual consultation. The individual work that was done where Helen and her staff were helped to assume less of a dependent role on 'experts' thinking for them, led to the outcome of Helen leaving behind her a strong SEN ethos, as stated in her Initial Needs and Expectations form. The strong SEN ethos was a difficult outcome to achieve in Helen's mind, because she saw the immense complexity of the SENCo role and questioned how the complexity of the role could be passed on. Yet she left the school with the knowledge that her staff had 'taken on' a way of thinking about children and the complexity around them as a result of the consultation given by me.

If individual consultation is to work effectively in the current challenging economic climate, perhaps a good compromise would be for a consultant to be available to a cluster of SENCos, and indeed this is the current model for many Primary Mental

Health Workers employed by CAMHS teams in order that they can provide effective outreach work to frontline workers in education, social services and health. SENCOs would in this way all have more use of the service at times and less at others, according to their need, and it would not be time limited, as my offer of consultation was in this study. If there was a service available, SENCOs could seek it out as problems arose. However, the note of caution I would offer, having been in the SENCO position, and having experienced in this study the tendency to enter a 'flight from difficult feelings,' is that SENCOs could put the service to the back of their minds, especially if they were adopting a coping strategy and erecting defences to protect them from extreme projections from the children in their care. This leads me to consider that a consultant could have a regular, perhaps six weekly review meeting with SENCOs, a little like Educational Psychologists used to before their work patterns changed. I feel that I have come full circle, as I remember being a SENCO and valuing the half-termly meeting with the Educational Psychologist, which offered me a reflective space, and often gave me the reassurance and confidence I needed with particular children and families. If such regular meetings were statutory, extra meetings could be arranged as and when need arose from either the SENCO's perspective or from the consultant's perspective. These two perspectives would provide some insurance against SENCOs not seeking a service as a result of them erecting defences due to the nature of their work. Because of the complexity of the SENCO role, and because it is such a valuable provision in schools, the need for the provision of reflective consultation for SENCOs is essential.

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9. Appendices

9.1 Appendix One: Introduction to the Research Project

I am currently in my last year of training as a Child and Adolescent Psychoanalytic Psychotherapist. This is a six year doctoral training. I work in H Clinic in a Child and Adolescent Mental Health Service. Prior to my training I worked for ten years as a Class Teacher, a specialist English and Music teacher, and a further ten years of my teaching career as a SENCo in primary schools.

My doctoral research project is a study to explore what use a SENCo would make of the offer of regular consultations by a Child and Adolescent Psychotherapist (CPT). The duration of the study is intended to be for one academic year. I envisage that consultation sessions will take place perhaps fortnightly but this can be arranged between the SENCo and myself. The duration of the consultation sessions would be for one hour.

You are free to decline to take part and to withdraw from the research at any time without having to give a reason.

I am hoping that as a result of the project I might be able to contribute to the thinking about what help might benefit the SENCo in her work. At the end of the study I will send you a summary of the findings.

I enclose consent forms and Needs Assessment Questionnaires to complete for those who wish to participate. There is no obligation to participate. I also enclose stamped addressed envelopes for your return of the completed forms.

Thank you for your time and interest.

Angela Evans (Child and Adolescent Psychoanalytic Psychotherapist in training)

9.2 Appendix Two: Consent Form

I hereby give my consent for Angela Evans, Child and Adolescent Psychotherapist in training, to use material from the consultation work in which I will be participating fromto..... for her doctoral thesis. I understand that full confidentiality and anonymity will be followed at all times. All information will be treated as strictly confidential, and personal details will be kept separately in a locked cabinet. When it comes to writing up the research for report or publication personal details will be disguised and data will be anonymised.

Signature.....

Print name.....

Position.....

Date.....

9.3 Appendix Three: Initial Needs and Expectations for SENCOs

Your Name: _____

Your School: _____

I would be grateful if you could complete this brief questionnaire, which will help me to evaluate your needs in this area, and how best to meet them.

A) I intend to offer individual consultation support to SENCOs. Please use the space below to highlight specific issues you would like to discuss.

B) Would you be prepared to meet with me every two or three weeks at your school to discuss specified themes, and implement any ideas that arise as a result of our work together?

Yes

No

E) What days and times do you work?

F) What are your personal goals for this project?

Thank you.

Angela Evans

Contact details: Mobile No: Email address: Angela.Evans@.....

9.4 Appendix Four: Example of coding scheme application

<p align="center">Process Notes:</p> <p align="center">Session Four, Ashurst School</p>	<p align="center">Initial Coding</p>	<p align="center">Focused Coding</p>
<p>The secretary let me in to the school to find Jane. The secretary seemed very busy and said that Jane would be around somewhere. I thought that the secretary allowing me free access into the school could reflect a school where there was an atmosphere of trust, but could also reflect a school where normal rules and processes were sometimes not adhered to. I thought about Jane's wish to improve processes as I tried her room, then the staff room, then went back to her room. Jane arrived shortly after, but while I waited for her, a TA walked in to Jane's room and told me that she would be holding a group in there, and she hoped it would be OK. I replied that I felt sure it would be, although inwardly I was thinking that the group would intrude on a thinking space for Jane and me. The TA explained that she needed a biggish room, as it was a biggish group.</p> <p>When Jane arrived, she told me that she had to go out on playground duty, and asked if I would mind waiting for a little while. I felt initially a slight lack of respect for my time, and thought to myself that our appointment had been pre-arranged. Then I remembered that I had seen parents coming out of an infant production as I had entered the school, so I assumed that playtime was late. This thought led to me feeling empathy for Jane in a school where it was sometimes hard to adhere to appointments. Jane told me that I could go and get a coffee in the staff room. I hesitated, thinking that I at least should stay in the appointed place. Jane followed this hesitation by giving me her observation sheet of George to read. She said she had managed to do it. Her attitude was not one of apology for the muddle, but slightly nonchalant. It made me think that she perhaps unconsciously wanted me to have an experience of the chaos that can enter schools at the ends of terms, and perhaps she was also feeling angry about being asked to complete an observation sheet.</p> <p>Jane went to do her playground duty and I sat down to read her notes. At first I felt slightly angry, as I thought of all the work I could have been getting on with, but then I accepted the situation and began to use the time to think. I thought that I was experiencing some of what Jane was feeling, and that Jane was successfully projecting into me feelings of being over burdened with work and overwhelmed with not having enough time to do it. On further reflection, it became clear that Jane was coercing me into behaving in a time and resource efficient way, rather like Jane did, as Jane had given me the sheet to look at while she was away. I felt like I was a TA under Jane's supervision. A more reflective thought process with no clear answers felt unwelcome, and perhaps too threatening in an environment where many staff members felt unappreciated by a HT who was considering his retirement from the</p>	<p>Rules and processes</p> <p>Consultant kept waiting</p> <p>Avoidance of thinking and reflecting</p> <p>Consultant kept waiting</p> <p>Consultant engaging in a reflective process</p> <p>SENCo experiencing feeling of anger – chaos</p> <p>Consultant being kept waiting and experiencing a feeling of anger</p> <p>Attentiveness, or being held in mind, being given to SENCo by consultant</p> <p>Consultant engaging in a reflective process</p> <p>Thinking and reflecting being avoided by SENCo. Action and</p>	<p>Attentiveness versus avoiding thinking</p> <p>Attentiveness versus avoiding thinking</p> <p>Countertransference responses of abandonment, anger and rejection</p> <p>Attentiveness versus avoiding thinking</p> <p>Countertransference responses of abandonment, anger and rejection</p>

<p>school.</p> <p>After about five minutes of comparing the two observations of George, I took a clean piece of paper and began to make some notes on my thoughts about them. Most striking was the different times of day the observations were made, and the different behaviour exhibited. I commented on this on the observation sheet, and came up with a few suggestions of how to let George know that he was being held in mind. As I was writing, the TA and her group arrived. The TA conducted the group in an ordered way that didn't particularly disrupt my thoughts.</p> <p>After the infants had gone in, Jane still didn't arrive. I waited five minutes, then decided that I would go and photocopy the sheet I had just written. I met Jane in the corridor talking to a staff member. She signalled that she would be with me soon. I did the photocopying and passed Jane to return to her room. By now I was beginning to really struggle with feelings of abandonment, anger and rejection. It seemed there was an intentional avoidance of me by Jane and I tried to keep thinking about what Jane was projecting into me, although I could feel myself withdrawing from feelings that were quite overwhelming. It seemed very clear now that I was experiencing countertransference responses of abandonment and rejection that were so overwhelming that they led to an avoidance of thinking. It was only after the event in supervision that I thought about the fact that Jane was struggling with all her SEN children, many of whom had their own issues of abandonment and rejection, and Jane's hard work was unrecognised by the HT, which could have been contributing to why she wanted to hold on to procedures and writing records, as these were at least concrete things to take hold of and feel safe with.</p> <p>Jane finally arrived in her room. She apologised to me, explaining that she had had to be out in the playground on duty to make sure a particular child didn't get into a fight. Despite her best efforts, he had got into a fight, so in the corridor after playground duty she had had to follow it up. I, immediately feeling full of empathy again, said it was OK, and explained that I had been using the time to think. This was an unconscious modelling to the SENCo of what she struggled with in the school – thinking. The comment about thinking did seem to help Jane to sit down with me and give some dedicated time to thinking, although it might also have been Jane's guilt about ignoring me for so long that led her to finally engage:</p> <p style="padding-left: 40px;">The group had now finished, and I felt relieved that at least we would now be able to talk privately. I gave Jane a copy of my notes comparing the two observations. I talked her through it, pointing out my line of thought – the different times of the observations, George being particularly focused after a 1-1 with the HT and subsequent thoughts about staff letting him know that he was being kept in mind. Jane looked with interest and said she would pass it on to the CT. I said that George's CT was wonderfully attentive, and added that George did need that extra attention, as he seemed to be quite anxious and uncertain of what to do in the classroom. I added that you could think of a mother- infant sort of attention, where mother holds the infant's gaze and directs her voice to him. My comment reminded Jane of an incident when George had gone to her room to have some time out with her. She hadn't been there, and he had been very upset. Three members of</p>	<p>processes instead. SENCo experiencing feelings of abandonment and rejection by the HT</p> <p>Consultant engaging in a reflective process</p> <p>Consultant being kept waiting</p> <p>Consultant being kept waiting and experiencing feelings of anger, abandonment and rejection</p> <p>SENCo experiencing feelings of abandonment, anger and rejection by the HT</p> <p>Consultant engaging in a reflective process</p> <p>Attentiveness, or being held in mind, being given to SENCo by consultant</p> <p>Consultant and SENCo engaging in a reflective process.</p> <p>Attentiveness recommended for CT to give to pupil, and attentiveness, or being held in mind, being given to SENCo by consultant</p>	<p>Attentiveness versus avoiding thinking</p> <p>Countertransference responses of abandonment, anger and rejection</p> <p>Attentiveness versus avoiding thinking</p> <p>Attentiveness versus avoiding thinking</p>
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<p>staff had found her and had said that George needed her. We agreed that George needs that 1-1 sort of attention. At this point, I felt that Jane was beginning to engage with the work and was thinking about George in a different way. This was possibly because I was giving Jane 1-1 attention, having accepted her projections of abandonment and rejection; I was modelling an attentive mother myself. (Session 4)</p> <p>A shift can be observed to have taken place in Jane's thinking by the end of the above excerpt, which seems to have been brought about mainly by me offering a working relationship where the SENCo was held in mind and thought about. Jane's usual experience in her working life was not to be held in mind and thought about by her HT. This turning point for Jane was brief and she soon reverted to a mode where 'doing' was more comfortable than 'thinking'. A further turning point didn't appear for Jane until nearly the end of all the sessions. Instead, the next significant turning point was demonstrated through a CT, Gill, in Session Six.</p> <p>Jane continued to think with me about George. She said that CAMHS were being a bit more involved as both parents had each said separately that they couldn't cope. Jane was worried about the older brother in Year Six too, as he used to be like George, but he was now much more withdrawn, as if he was depressed. I asked if he had the same father. Jane replied in the affirmative and said it was made worse because his father had set up home with a new family, and that must be hard for the boys to see. I agreed that it sounded painful for them.</p> <p>After this thoughtful interchange, Jane can be seen to shift back to a mode where action takes precedence:</p> <p style="padding-left: 40px;">Jane suddenly asked if I could meet with mother. I replied that my role was to consult to Jane and to help thinking around this family. Jane suddenly seemed to take control and said that she would do it, as she had been on a ten-week parenting course, and needed to put into practice some of what she had learnt. (Session 4)</p> <p>The point at which Jane took control came directly after I rejected her request for me to see the mother. The previous shift that Jane had made could be seen to retreat as Jane adopted her more usual self-sufficient attitude, where action was needed. However, there was still perhaps a wish in Jane to engage in a thoughtful process, and she might have been telling me that she too could reflect, as she referred to her ten week parenting course. The pressure on her to take control and to put into action what she had learnt was strong, and suggests a rivalry with me too.</p> <p>It is interesting that I so strongly held to my own role when asked by Jane to meet with the parents. I had after all agreed to meet with families in Valley School, but that had been within the context of one meeting with the SENCo present. On reflection, it seemed that I had experienced such strong countertransference responses of abandonment and rejection from Jane that I was responding by being clear that I wasn't going to take on any work that might take over my direct work with Jane. I was now fully aware of Jane's strong wish to 'opt out' of the direct consulting work</p>	<p>Consultant and SENCo engaging in a reflective process</p> <p>Attentiveness, or being held in mind, being given to SENCo by consultant</p> <p>SENCo experiencing feelings of abandonment by the HT</p> <p>Oscillation between thinking and reflecting being avoided and between engaging in a reflective process</p> <p>Attentiveness, or being held in mind, being given to SENCo by consultant</p> <p>Oscillation between thinking and reflecting being avoided and between engaging in a reflective process.</p> <p>Avoidance and fear of vulnerability in SENCo. Action takes precedence.</p> <p>Oscillation between thinking and reflecting being avoided and between engaging in a reflective process.</p> <p>Rivalry of consultant's role</p> <p>Consultant struggling to hold on to role</p>	<p>Countertransference responses of abandonment, anger and rejection</p> <p>Attentiveness versus avoiding thinking</p> <p>Attentiveness versus avoiding thinking</p> <p>Unacknowledged rivalrous feelings, which threaten feelings of vulnerability and dissatisfaction if acknowledged</p> <p>Unacknowledged rivalrous feelings, which threaten feelings of vulnerability and dissatisfaction if acknowledged</p>
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<p>with me.</p> <p>I responded to Jane’s declaration that she would meet with George’s mother herself by expressing interest in the course. Jane talked about her experience of the course:</p> <p style="padding-left: 40px;">Jane said it had been very deskilling during it, because you had to go straight into role, and practice exploring more and not immediately challenging. Then when you came to the challenging bit, you were busy trying to explore more. She said it was hard, but a good course. I thought that perhaps Jane thought her sessions with me were hard but potentially good too. I said that perhaps it might be useful if Jane and I discussed her meeting with George’s mother after it had happened. Jane said that would be really useful. (Session 4)</p> <p>I had been unconsciously attempting to push Jane to draw on her competencies by being interested in her parenting course. However, the element of rivalry was still present, as Jane referred to feeling deskilled, perhaps in contrast to me as a previous SENCo who was now nearly at the point of completion of a Child Psychotherapy training and was acting as a consultant. Evidence for Jane thinking about my role as a SENCo emerged in the next interchange, when Jane directly referred to my previous role as a SENCo:</p> <p style="padding-left: 40px;">We agreed that we would meet again next term after Jane had met with George’s mother. We agreed a date that I would call her. On the way out, Jane thanked me for all my help this term. I thanked her for her co-operation. She replied that it was much easier knowing that I knew how it really was. I agreed that I did know how it was in schools. I thought about my old SENCo role, and how important it was for Jane to know about it, but also how that might present a challenge for her in that I left the role and she was still in it. (Session 4)</p> <p>The reference made by Jane to me previously being a SENCo was a positive one, but it was easier to refer to me having been a SENCo in a positive way than to admit to oneself a professional rivalry, which in turn stirs feelings of dissatisfaction and vulnerability.</p>	<p>SENCo admitting feeling deskilled – fear of vulnerability in SENCo</p> <p>SENCo engaging in a reflective process</p> <p>Rivalry of consultant’s role</p> <p>Rivalry of consultant’s role</p> <p>Fear of vulnerability and feelings of dissatisfaction</p>	<p>Unacknowledged rivalrous feelings, which threaten feelings of vulnerability and dissatisfaction if acknowledged</p> <p>Attentiveness versus avoiding thinking</p> <p>Unacknowledged rivalrous feelings, which threaten feelings of vulnerability and dissatisfaction if acknowledged</p>
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Table 3: Example of coding scheme application

N.B. The initial coding given in the main text concatenates some of the phrases used in this table.