Listening to the Experiences of Pastoral Staff working with Children and Young People Exposed to Domestic Violence and Abuse.

An Interpretative Phenomenological Analysis

Sarah Beatrice Manuel

Registration number: 100360603

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University of East Anglia School of Education and Lifelong Learning

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Summary

The following doctoral thesis is comprised of three chapters, a literature review, empirical chapter, and reflective chapter.

Literature Review

The literature review introduces Domestic Violence and Abuse (DVA) and provides context to the researcher's area of research. The researcher explores the impact of exposure to DVA on children and young people (CYP) and considers the role of school professionals in supporting this vulnerable group. While literature has evidenced teachers' roles in this area, limited research exists on the role of staff with specific pastoral responsibilities in supporting these CYP. This gap in the literature informs the focus for the subsequent empirical chapter.

Empirical Chapter

The empirical chapter presents an account of the researcher's study. Semi-structured interviews were used to explore the experiences of pastoral staff in supporting CYP exposed to DVA. The methodological approach of interpretative phenomenological analysis (IPA) was chosen to provide a rich understanding of participants' experiences. The findings of this research emphasise the experiences of pastoral staff, focusing on four key themes: multi-faceted pastoral responsibilities, the importance of awareness of safeguarding, understanding the impact of experiencing trauma e.g., DVA, and interpersonal qualities. These findings are presented and discussed, and consideration is given to both the limitations and implications of the study.

Reflective Chapter

This chapter includes the researcher's reflections of the research process, offering insights from the pre-empirical to the empirical stages. Additionally, the researcher's contribution to research in the field is critically examined, alongside the implications for professional practice within educational psychology.

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Finally, to my readers, I hope you find my research illuminating and enjoy reading it as much as I have enjoyed producing it.

Chapter 1: Literature Review

Introduction

This literature review aims to provide a comprehensive overview of the literature related to Domestic Violence and Abuse (DVA) and its impact on children and young people (CYP). The review is structured into five main sections. The first section will explore the contextual and legislative factors that motivated the researcher to explore this topic. This section will also examine Adverse Childhood Experiences (ACEs), identifying exposure to DVA as an ACE. Additionally, it will reference the prevalence of CYP exposure to DVA, illustrating the extent of the problem. The second section will delve into relevant psychological theories that have been used to help understand how DVA impacts CYP. The third section will outline how exposure to DVA manifests within the educational context, focusing on the four areas of need identified in the Special Educational Needs and Disability Code of Practice (SEND CoP, 2015). This section will also recognise the current context in which schools are operating. The fourth section will review research related to support for CYP exposed to DVA, with a focus on the roles of teachers. Challenges faced by teachers in identifying and supporting these CYP will be addressed, and the need for other avenues of support will be highlighted. Recognising this, the final section of the review will explore pastoral care in schools, discussing the evidence base related to the unique contributions pastoral staff can make in supporting CYP exposed to DVA. This will acknowledge a 'gap' in the literature. This section will also consider the relevance of this topic to Educational Psychology practice.

Literature Search

The literature search process involved a comprehensive exploration of various databases and resources to gather relevant research articles and studies pertaining to the area of research. This helps to establish what is already known (Bryman, 2012). Studies were sourced via search strategies including an initial library search, followed by exploration of articles from databases and search engines e.g., Google Scholar, The Elton B. Stephens Company (EBSCO) database, accessed through the University of East Anglia (UEA) library, PsycArticles, PsycINFO and ScienceDirect. Additionally, journals relevant to the practice of Educational Psychologists (EPs) (e.g., Child & Educational Psychology and Educational Psychology in Practice) were sourced. The search included a variety of search terms, including 'statistics of domestic violence/ abuse', 'perceptions of domestic violence/ abuse', 'impact of child exposure to domestic violence/ abuse', 'teacher support for children exposed to domestic

violence/ abuse', 'pastoral support in schools', 'pastoral support and wellbeing', 'pastoral support for children exposed to domestic violence/ abuse'. Additional search terms included 'adverse childhood experiences', 'supporting', 'schools', 'children and young people', 'development', 'child-wellbeing'.

The initial literature search focused on studies published from 2019 onwards, aiming to capture the most recent research findings. Upon reflection, it was recognised that limiting the review to this time frame might restrict the breadth of the literature available. Therefore, the search strategy was expanded to include relevant studies from any year, allowing for a more inclusive exploration of the topic and a deeper understanding of the research landscape surrounding DVA and its impact on CYP. Although this review primarily seeks to address literature relevant to a United Kingdom (UK) based educational context, the researcher utilises international studies, where applicable, to draw out key factors related to the research area.

Definition: The UK government defines DVA as:

'Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse: psychological, physical, sexual, financial and emotional' (Home Office, 2013).

The UK government subsequently expanded the definition to include controlling and coercive behaviour:

'Controlling behaviour is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour. Coercive behaviour is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim' (Home Office, 2013, 2016).

Terminology: Research presents a range of terms to discuss DVA including 'domestic abuse' (DA), 'domestic violence' (DV), 'relationship abuse' or 'intimate partner violence'. Historically, 'domestic violence' was the main term used, and commonly accepted in the UK, to describe the collective actions of perpetrators of this crime (Abrahams, 2004; Holt et al., 2008; Wagstaff, 2010). However, in recent years, the term 'domestic violence' has been

critiqued for being deeply connected with the act of physical harm due to the word 'violence' and therefore may limit understanding of the complexities that this type of crime may encompass (Johnson, 2006). Therefore, the term, 'domestic abuse' became increasingly prevalent in describing the variety of acts that occur as part of this (Ellis, 2018), with Women's Aid and UK Government guidance "Domestic abuse: how to get help" (Gov.uk, 2018) using the term 'domestic abuse' instead of 'domestic violence'. Based on these explanations, this thesis adopts the combined term 'Domestic Violence and Abuse' (DVA) to encompass both physical and psychological aspects identified. Whilst reviewing the literature, the researcher reflected that combining the two terms acknowledges the scope of abuse, whilst recognising that for some the term DV is more familiar, whereas others are more familiar with the term DA, making the current research accessible to a wider audience. However, when referencing existing research, the author adopts the terminology used in the original research.

Domestic relationships describe intimate relationships for both heterosexual and homosexual partners, and include dating and separated partners, sibling, and child to parent relationships. Further, findings from the Home Office (2007) identified that whilst the majority of DVA is perpetuated by men against women, research exists indicating that men can also be victims of DVA (Mooney, 2000).

Context

Personal: After finishing her undergraduate degree, the researcher worked as an Education Facilitator for a charity, supporting women and children exposed to DVA. The researcher's role included facilitating sessions about healthy and unhealthy relationships for 16–25-year-olds, which deepened her interest in domestic relationships. Following this, the researcher worked as a School Wellbeing Facilitator at a secondary school within a pastoral team, facilitating interventions to support wellbeing. In this role, she identified notable differences between pastoral-staff teams and learning-staff teams. The researcher then obtained a role as an Assistant Educational Psychologist (AEP). In this capacity, she assisted CYP at individual, group, and systemic levels to access the support they needed. The researcher also conducted consultations for teachers to discuss the needs of children in their classes and was surprised by the number of teachers who casually mentioned having children in their class affected by DVA. It struck the researcher that teachers and other school professionals might not always be aware of what it means for a child to witness DVA, or the impact it can have on a child's experience at school. Where teachers were aware of the implications, they may have lacked the knowledge, skills, or time to prioritise support for these children, due to work

pressures and capacity. During her doctoral training course the researcher advanced her understanding of DVA through attending lectures on DVA and through researching DVA for a 'Child in Context' assignment. In this assignment the researcher explored the impact of historical and contemporary policy and legislation on CYP who have experienced DVA. Ultimately, the researcher's chosen thesis topic reflects her longstanding interest and evolving experience within the field, as well as a desire to positively contribute to the burgeoning literature on the subject.

Historical and National Context

Historical: DVA has impacted human societies from time immemorial, with documents revealing the phenomenon dating back to the Roman Empire (Davidson, 1977). DVA appears steeped in history, including the fact that in intensely patriarchal societies, DV was not criminalised but was relegated to the private sphere (Dobash & Dobash, 1980; Edleson, 1999; Calder et al., 2004). However, in 1993, the United Nations Declaration on the Elimination of Domestic Violence Against Women (United Nations, 1993) introduced legislation to criminalise DVA (Radford, 2004), a historical turning point.

Current: Introduction of legislation to criminalise DVA helped highlight the significance of DVA as a social problem. Additionally, the call to 'End Violence Against Women and Girls' (HM Government, 2013) emphasised the need for UK policy to combat the issue of DVA on a wider, systemic scale, stating the need for 'all parts of the system, including, criminal justice, education, health, housing, and benefits to work together in identifying, protecting, and supporting victims of DVA and bring perpetrators to justice'. More recently, the introduction of the Domestic Abuse Act (2021) underscored the evolution of the public's understanding of DVA and its devastating impact on victims and their families. The Domestic Abuse Bill aimed to enhance the ability of the justice system to protect victims of DVA and bring perpetrators to justice. Victoria Atkins, Minister for Safeguarding between 2017 and 2021, stated:

"Domestic abuse is an abhorrent crime perpetrated on victims and their families by those who should love and care for them. This landmark Bill will help transform the response to domestic abuse, helping to prevent offending, protect victims and ensure they have the support they need".

While DVA has existed across societies throughout history, cultural perceptions of this phenomenon have undergone significant shifts in the contemporary era. Despite these shifts, the number of individuals impacted by DVA has remained high, Table 1 includes evidence for research, indicating the prevalence of DVA in the UK during the 21st century.

Table 1Table to show statistics associated with DVA

Studies or Organisations	Statistics
Crime Survey for England and Wales (March 2020)	An estimated 5.5% of adults aged 16 to 74 years (2.3 million people) experienced domestic abuse in the year ending March 2020.
Office of National Statistics (ONS, 2015)	28.3% of women and 14.7% of men have experienced domestic abuse at some time from the age of 16.
Home Office (2004, 2005)	Domestic violence accounts for around 16% of all violent crime in the United Kingdom at a cost of more than 23 billion a year (about 34 billion).
The British Crime Survey of 2001 (Walby & Allen, 2004)	45% of women and 26% of men report to have experienced domestic violence (abuse, threats, or force), sexual victimisation or stalking at one or more times in their lives.

More recently, the Crime Survey for England and Wales estimated that 5% of adults (2.4 million) aged 16 and over experienced DVA in the year ending March 2022 (ONS, 2022). However, this data refers exclusively to cases reported to the police, and therefore the overall number of people affected by DVA is estimated to be much higher, rendering DVA a "hidden crime" in many cases (ONS, 2017).

Contemporary Considerations

Recent literature has explored broader social, political, and economic events, particularly the impact of COVID-19 (starting in 2020) and the period of austerity (economic policies enacted by the UK government (starting in 2010), in relation to DVA.

COVID-19: Amid the COVID-19 pandemic, particularly during national lockdowns, there was a significant surge in reported DVA incidents and related emergency calls, as evidenced by police data (Ivandic et al., 2020; ONS, 2020). Concurrently, approximately 85%

of DVA support services in the UK were forced to curtail or terminate their operations due to the pandemic (Women's Aid, 2020). The reported reduction in these services was compounded by the effects of austerity measures implemented over the previous decade, exacerbating the strain on social care resources. Consequently, many individuals impacted by DVA found themselves in need of critical support services during a period of heightened vulnerability. However, this support may have not been available to them.

Financial Strain: Financial strain is a well-known risk factor for DVA (Richards, 2009; Usher, 2020) and has been described as a precursor to DVA (Umukoro & OKurame, 2022). Exploring the historical impact of DVA during the Great Depression (1929-1939) research found that the uncertainty and anxiety that accompanies sudden macroeconomic downturns can negatively impact relationships beyond the effects of job loss and material hardship (Schneider et al., 2016). Economic recessions and subsequent austerity policies lead to feelings of fear and insecurity which can affect individual behaviour, increasing the risk of DVA. For example, studies during the 2008 financial crisis indicated a rise in incidents of DV as financial stressors intensified (Johnson & Hotton 2003; Kaukinen, 2014). Conversely, DVA exposure imposes a substantial economic burden on society at large, in the form of increased health care costs, crime costs, the cost to provide training for education staff, and reduced productivity of members of the workforce.

Overall, these examples point to the multifaceted impact of DVA, encompassing social, health, and economic dimensions.

Domestic Violence and Abuse and Children and Young People

Adverse Childhood Experiences

In this section, the researcher will explore Adverse Childhood Experiences (ACEs) and the prevalence of CYP exposed to DVA and the subsequent impact this can have. Adverse Childhood Experiences (ACEs) refer to threatening or traumatic events experienced in the home, including physical, sexual, or emotional abuse or witnessing violence (Felitti et al., 1998; Attwood et al., 2022). Globally, millions of CYP are exposed to ACEs. Repeated exposure to ACEs can create a state of toxic stress in individuals which can in turn damage the developing brain, impacting learning, behaviour, and wellbeing (Shonkoff et al., 2012). CYP with a history of ACEs and toxic stress may display behavioural symptoms in educational settings, such as struggling to pay attention in the classroom, variations in social interaction,

aggression and difficulties following rules (Jimenez et al., 2016). Record-Lemon and Buchanan (2017) evidenced how the biopsychosocial impact of ACEs may vary between children but are likely to affect educational experiences and child development. Considering DVA as an ACE, CYP exposed to DVA may present with physical, behavioural, and emotional symptoms.

Discussion and Statistics related to Children and Young People's exposure to Domestic Violence and Abuse

To date, no standardised definition of childhood exposure to violence has emerged (Mohr et al., 2000). While CYP were previously referred to as 'passive bystanders', this changed in 2021 with the Domestic Abuse Act officially recognising CYP as 'victims in their own right' (Devaney, 2008, p.89). The Domestic Abuse Act (2021) expanded the definition of DVA victims to include a child who 'sees, hears, or experiences the effects of the abuse'. This affirms the perspective of Overlien & Hydén (2009, p.3), who highlighted that children experience DVA 'with all their senses'. They claim that children 'hear it, see it, and experience the aftermath' (Edleson, 1999; McGee, 1997, Overlien & Hydén, 2007 as cited in Overlien & Hydén 2009, p.3) such as seeing bruises, cuts and broken furniture (Cunningham & Baker, 2004; Mullender et al., 2002; Holt et al., 2008). Other researchers agree that children 'witness' DVA in ways that go beyond direct observation and involvement (including attempts to intervene). For example, they might overhear arguments or observe the aftermath of physical or sexual assaults that occur between their caregivers (Evans et al., 2008).

Acknowledging the Home Offices' expanded definition to include coercive control, research from Evans et al. (2008), highlights the prevalence of exposure to coercive control among children, this exposure may include, witnessing verbal abuse, observing physical violence, experiencing emotional manipulation, being used as pawns, facing neglect, and being subjected to surveillance. These experiences can have significant and lasting effects on the well-being and development of CYP, underscoring the need for intervention and support for families affected by coercive control. Table 2 presents statistics related to the frequency of CYP exposure to DVA.

 Table 2

 Table to show statistics associated with CYP exposure to DVA.

Studies or Organisations	Statistics
National Society for the Prevention of Cruelty to Children (NSPCC, 2019)	20% or 1 in 5 children have lived with an adult perpetrating domestic violence and abuse.

Safe Lives (2015)	Estimated that 130,000 children in the UK are living with high risk domestic violence, where there is risk of serious harm. Many more will be living at low and medium risk households.
Radford et al. (2011)	1 in 7 (14.2%) of CYP under the age of 18 will have been exposed to domestic violence and abuse at some
UNICEF (2006)	point during their childhood. 1,000,000 British children will have had a domestic violence and abuse experience.

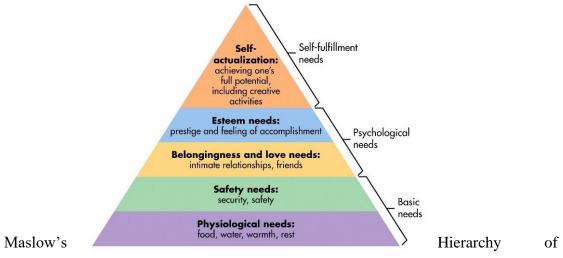
Examples of common Psychological Theories

Before exploring research related to the impact of exposure to DVA on CYP's education and wellbeing, it is important to recognise how this impact is situated within key psychological theories as frameworks for understanding. This section will identify theories from Maslow (1943), Bronfenbrenner (1974), Attachment theory (Bowlby, 1969) and Trauma informed Approach (Substance Abuse and Mental Health Services Administration [SAMHSA], 2014), each of which helps frame the impact of CYP exposure to DVA.

Maslow's Hierarchy of Needs

Figure 1

Maslow's hierarchy of needs (1943)



Needs (1943), presented in figure 1, can be instrumental in understanding the impact of CYP exposure to DVA. Maslow's five-tier hierarchy explains that lower tiers, including physiological and safety needs, should be satisfied before higher tiers can be fulfilled (Maslow, 1943, 1954). Every year, in the UK, tens of thousands of women and children relocate to escape

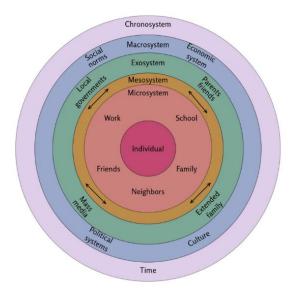
DV (Bowstead, 2018). This suggests that for many women and children their basic needs are at risk, necessitating their move to seek refuge for safety. This is supported by research from Buckley et al. (2007), who found that children living in violent environments often experience a lack of safety and stability. Corroborating research from Huang et al., (2015) indicates that children in such environments can feel insecure and unsupported, particularly if a parent struggles to provide necessary support, disrupting the child's sense of belonging. Further, consideration of psychological needs within Maslow's hierarchy indicates that relationships between CYP and the perpetrator of DVA can be complex and fraught, generating conflicting emotions in CYP. They may feel love for their parent but simultaneously fear their behaviour towards others in the home, especially their mother. This duality can create internal conflict, disrupting psychological needs associated with a sense of belonging and emotional stability.

Holt et al. (2008) found that CYP exposed to DVA often struggle with low self-esteem and self-worth due to constant fear and instability in their lives. This emotional turmoil impedes CYP's ability to focus on personal growth and achievement, which are essential components of self-actualisation. Therefore, in line with Maslow's hierarchy of needs, limitations to basic and psychological needs, through a lack of stable, secure environment and a disturbed sense of belonging, can prevent CYP exposed to DVA from achieving self-fulfilment needs, including self-esteem and self-actualisation.

Bronfenbrenner Ecological Systems Theory

Figure 2

Bronfenbrenner's Ecological Systems Theory (1979)



Bronfenbrenner's ecological systems theory (Bronfenbrenner, 1979), presented in figure 2, informs the psychological underpinnings related to difficulties facing CYP exposed to DVA. The ecological systems theory stipulates that children are situated at the centre of a series of wider systems. Interaction with and between these systems shape a child's experiences and development. The system closest to the child, which steers the child's development, is the microsystem. The microsystem typically includes relationships with key people in a child's life, including, parents, caregivers, and other family members. However, research highlights that parents, who are usually the main support for children and provide nurturance and protection, may not be able to provide these necessities when they are exposed to DVA themselves (Osofsky, 2003). If this is the case relationships between a child and their parent may become strained or fractured. As a result CYP's interactions with others in their microsystem as well as those within their wider systems may be affected. This is an important consideration for the purposes of the current literature search, as the stability and quality of primary relationships are crucial in understanding the developmental outcomes of CYP exposed to DVA.

Further, in line with the ecological systems model, Osofky (2003) explains that utilising resources and support from the wider systems around a child, including schools, community groups and the police is likely to have a positive long-term impact on children exposed to violence (Osofsky, 2003).

Attachment Theory

Bowlby's Attachment Theory (Bowlby, 1998) provides a valuable framework for understanding the impact of CYP exposure to DVA. According to Bowlby (1969), attachment styles are shaped through early experiences with caregivers, and exposure to DVA can significantly influence these attachments. Research from Hou (2020) offers an overview of the impact of exposure to DVA on CYP's attachments, identifying that those who witness DVA in infancy are likely to exhibit symptoms such as aggressiveness, and sleeping and feeding disorders (Edleson, 1999). These symptoms may be responses to threatening and chaotic environments, as well as inconsistent emotional responses from caregivers who may struggle to sensitively respond to CYPs needs (Liebermann, 1991). This early exposure to DVA can disrupt the development of secure attachment bonds and lead to the development of insecure attachments, including anxious-avoidant and disorganised attachments. Furthermore, Hou (2020) identifies how differing parenting styles between DVA victims and perpetrators can affect attachment styles. Perpetrators may manipulate children to distance themselves from the victims, further complicating the attachment process. The impact on attachment can have significant implications for a child's development, continuing into adulthood, and affecting one's social relationships, self-esteem, and intimate relationships (Bowlby, 1969; Carlson et al., 1989). Understanding these dynamics is crucial for professionals working with CYP exposed to DVA, highlighting the need for sensitive and informed interventions that address the attachment disruptions caused by such exposure.

Trauma-Informed Approach

Another psychological framework informing the impact of CYP exposure to DVA is the Trauma-Informed Approach. This approach not only recognises the profound influence that trauma, such as exposure to DVA, can have on CYP but also provides strategies for effective support. Evidence suggests that CYP exposed to trauma may develop a heightened sense of vigilance and hypervigilance as a survival mechanism (Van der Kolk, 2014), often presenting with withdrawal and anxious behaviours to protect themselves. Trauma-informed approaches acknowledge the signs and symptoms of trauma in individuals and seek to prevent retraumatisation (US Department of Health and Human Services, 2014). Literature underscores the significant, long-lasting effects of trauma. For example, Felitti et al. (1998) conducted a study which found a strong correlation between exposure to DV during childhood and various negative health outcomes later in life, such as mental health issues, substance abuse, and

chronic diseases. Consequently, these findings underline the significance of trauma-informed approaches that address immediate safety concerns and consider the long-term impact of trauma on CYP (Hodas, 2006). Hodas's research indicated the importance of creating supportive and responsive environments in educational settings, helping CYP to feel safe and understood, whilst facilitating healing and promoting growth. This requires training staff to recognise and respond to trauma-related behaviours. Further research from Overstreet and Chafouleas (2016) supports the effectiveness of trauma-informed practices in schools, highlighting how such approaches can improve academic outcomes, reduce behavioural issues, and enhance the overall well-being of students exposed to trauma. This literature search indicates that through integrating trauma-informed care, schools can better understand and support the complex needs of CYP who have experienced traumas including exposure to DVA, helping them to rebuild trust, develop healthy relationships, and achieve their full potential.

This section has outlined common psychological theories that can be used to frame understanding about the impact of CYP exposure to DVA, supported by relevant research. It is important to recognise that this understanding may be influenced by the theoretical perspective chosen to frame the issues. Further, these are potential perspectives through which to view the complexities of DVA's effects, rather than definitive explanations, and are considered throughout this thesis.

Domestic Violence and Abuse and its impact on Children and Young People's Education

Research from (Sterne et al., 2009) found that many CYP who experience DVA at home display challenging behaviour at school. Exposure to DVA causes disruption to a child's schooling and can harm the quality of their educational experiences and outcomes- impacting engagement and success. The impact of DVA on attendance, academic performance and behaviour has been well documented which this literature review will go on to explore. The SEND CoP, (2015) identifies CYP's needs across four areas of development: communication and interaction, cognition and learning, social, emotional, and mental health (SEMH) and physical and sensory. The following section will explore literature related to the impact of DVA in relation to these areas of need.

Communication and Interaction

Limited research exists on how exposure to DVA impacts a child's communication and interaction. However, some literature has found that CYP exposed to DVA may adopt behaviours observed in their environment, potentially including acts of violence. As posited by Social Learning Theory (Singer et al., 1998) witnessing DVA may lead children to model and replicate similar aggressive behaviours, as a form of communication, in their own interactions and relationships. Additionally, research from Huth-Bocks et al. (2001) found lower verbal abilities in children exposed to DVA, influenced by maternal depression and the quality of CYP's home environment. While Lazarus and Folkman (1984) identified coping strategies used by children in response to psychological distress, including avoidance, leading to communication difficulties. Overall, it is evident that exposure to DVA in childhood can affect a CYP's communication and interaction abilities.

Cognition and Learning

Research has highlighted the harmful impact of exposure to extreme stress, such as DVA, on a child's neurocognitive development (De Bellis, 2001); it has also highlighted the impact of witnessing DVA and the possible effect on a child's education and learning. For example, research from Kiesel et al. (2016) found that CYP exposed to DVA had poorer outcomes in school attendance, maths and reading when compared to CYP who had not been exposed to DVA. Supporting research from (Harold et al., 2007), found that 11-year-olds exposed to DVA had lower academic achievement at Key Stage 3 across english, maths, and science. Further, a large-scale comparison study of twins also found that DV was significantly correlated with IQ: children exposed to high levels of DV scored on average 8 points lower on IQ assessments than those whose mothers reported no DV (Koenen et al., 2003). Evans et al. (2022) found that out of nine studies that specifically examined the relationship between DV and children's cognitive development, eight found a negative correlation on a range of outcomes such as school performance, basic skills, and verbal abilities. Corroborating evidence from Huth-Bocks et al. (2001), referred to in the 'Communication and Interaction' section, found that children who had witnessed domestic abuse had significantly lower verbal abilities than those who had not witnessed it, after controlling for socio-economic status and child abuse. As verbal ability is relatively general, the researcher deepened her exploration and found

that children experiencing DV are predicted to have lower reading levels (Thompson and Whimper, 2010).

Physical and Sensory

Several studies have provided evidence of the detrimental impact of DVA on children's physical health. Graham-Bermann and Seng (2005) found that children exposed to DV presented with more health conditions than their peers with no exposure. Similarly, adolescents exposed to DVA reported poorer overall health, including issues related to sleep disturbances and complaints of pain (Lipiso et al., 2010). Furthermore, research indicates an increased risk of physical injury for CYP exposed to DVA. Graham-Bermann et al. (2011) discovered heightened physiological reactivity in CYP exposed to DV, evidenced by increased heart rate and cortisol levels, which may indicate alterations in sensory processing and arousal regulation. Additional research corroborates these findings, indicating significant negative effects of exposure to intimate partner violence on children's endocrine, nervous, cardiovascular, and immune systems, suggesting a broader vulnerability to physiological dysregulation affecting various aspects of children's wellbeing (Berg et al., 2022).

The sensory impact of DVA exposure has been further researched, with Howell et al. (2016) exploring the association between DV exposure and sensory processing difficulties in children. Howell et al.'s (2016) research found that children exposed to DV were more likely to exhibit sensory processing challenges compared to children not exposed to violence. A study by Luebbe and Bell (2014) explored the relationship between exposure to family violence and sensory over responsivity in children and found that children who witnessed family violence were more likely to display heightened sensory sensitivity, particularly in response to auditory stimuli. These studies provide some insights into the potential impact of exposure to DVA on children's sensory abilities. However, further research is needed to fully understand the underlying mechanisms and long-term consequences of these difficulties.

Social, Emotional and Mental Health (SEMH)

There is a great deal of evidence related to SEMH needs presented by CYP exposed to DVA. Research shows that witnessing DVA can impact the Social and Emotional Functioning of CYP, including, social and emotional difficulties, such as anxiety, depression, aggression, and low self-esteem (Gorman-Smith et al., 2000; Margolin, et al., 2000; Wolfe et al., 2003). Buckley et al. (2007) specifically noted fear, anxiety, low self-esteem, and disrupted relationships as common effects of exposure to DVA, stating:

'The impact of domestic violence on their lives manifested itself with regard to their sense of fear and anxiety in relation to themselves, their siblings, and their mothers; their self-esteem and sense of being 'different', their relationships (including ambivalent relationships with their fathers); their experiences of education and their sense of a lost childhood'. (Buckley et al., 2007, p. 298).

The author has chosen to divide the following segment into two distinct areas, 'social' and 'emotional and mental health' to provide a clearer understanding of related research.

Social

Exposure to DVA can significantly impact the social competence and understanding of CYP, affecting their ability to engage effectively in social interactions with both peers and adults. Research identifies some ways in which exposure to DVA can influence social development: for example, experiencing DVA has been found to impact a child's psychosocial development and present increased conflict with friends (Narayan and Englund, 2013). Further, literature outlines potential longer- term social impacts of exposure to DVA, Evans et al. (2008) discussed that CYP exposed to DVA may find it difficult to form and maintain relationships, due to reduced social understanding and social self-confidence. Upon exploring some of the theories related to the social effects of exposure to DVA, research found that these children may have more limited social interactions due to not wanting their friends to find out about the DVA happening in their homes (Buckley et al., 2007). Further, some children exposed to DVA may exhibit social withdrawal or avoidance behaviours as a coping mechanism to deal with the stress and trauma they have experienced. This withdrawal can hinder one's ability to engage in social interactions and form connections with others.

Emotional and Mental Health

Exposure to DVA significantly impacts a child's emotional wellbeing (Radford et al., 2011; SafeLives, 2015), often leading to heightened risk of mental health issues (Thompson & Trice-Black, 2012). Harold and Howarth (2004) found 40% of CYP exposed to DVA exhibited clinically significant emotional and behavioural difficulties, compared with 10% of those who did not live in a violent home. Common difficulties include, symptoms of anxiety, depression, aggressive behaviour, post-traumatic stress -identified amongst several researchers (Olaya et al., 2010, Bancroft & Silverman, 2002; Hornor, 2005; Hughes, 1998; Kitzmann et al., 2003; Lang & Stover, 2008; Stiles, 2002; Wolfe et al., 2003). Research underscores how different

types of abuse affect children differently; for instance, exposure to both physical and psychological abuse tends to correlate with increased aggression, while psychological abuse alone is more closely linked to anxiety and depression (Litrownik et al., 2003). However, it should be emphasised that not all children will experience negative consequences in the same range or in the same intensity (Pingley, 2017).

Moreover, exposure to DVA can manifest differently based on the CYP and can impact emotional expression and behaviour in varying ways. Some CYP may internalise their feelings, blaming themselves for the DVA (Stanley et al., 2012; Arai et al., 2021) leading to feelings of guilt or shame. Others may keep the DVA secret, either due to feelings of shame or because they have been instructed to do so by their parents. This can lead to feelings of isolation and stigma from their communities and peers (Stanley et al., 2012; Sullivan et al., 2004). Conversely, some CYP may externalise their feelings related to the DVA, displaying hyperactivity, reduced impulse control, aggression, and bullying behaviour towards others (Connolly., 2000). These CYP may act out their distress through disruptive or aggressive behaviours, potentially impacting their relationships with peers and adults. Ultimately, Sternberg et al. (2006) found that witnesses of abuse and direct victims of abuse were at similar risk of displaying challenging behaviour, emphasising that CYP exposed to DV are "victims in their own right" (Devaney, 2008, p.89).

Concluding comments: This section does not provide a definitive account of how CYP present in response to exposure to DVA, as individual and contextual differences play a significant role and will always take precedence over 'expected' outcomes of exposure. The presentation of impact will vary depending on each CYP and their individual situation. While it is understood that many CYP exposed to DVA are impacted by such exposure, not all CYP who will suffer from adverse effects (Lloyd, 2018). Although some children experiencing DV will exhibit difficulties in their schoolwork, the education of others will not be adversely affected: 'some children living with domestic abuse achieve highly in school; throwing themselves into school life and work can provide an escape' (Sterne et al., 2009). Therefore, consideration should be given to the wider support networks, particularly familial connections and school staff who can support these CYP both at present and in the future, to recognise and leverage their resilience (Humphreys & Mullender, 2002). CYP should be empowered to reach their potential despite their experiences.

Current Contexts of Schools and The Impact of this

In this section, the researcher recognises the importance of understanding the current context in which schools are operating. As a result, various socio-political, economic, and educational factors are examined. Recent shifts, including the effects of the COVID-19 pandemic, ongoing austerity measures, increased academic pressures, and changes in governance structures, like academisation, in the UK, have significantly impacted schools and affected school practice.

Impact of the COVID-19 Pandemic: The COVID-19 pandemic has had both immediate and long-term effects on teaching practices. Research by Jandrić et al. (2020) highlights how the pandemic transformed educational approaches, with schools being compelled to rapidly adopt online learning practices- consequently exposing and amplifying existing disparities in access to technology. The pandemic meant that teachers were expected to have subject expertise and digital literacy to deliver lessons effectively online. Post the pandemic these expectations appear to remain. Moreover, the psychosocial impact of the pandemic has affected individuals and whole school communities, creating new challenges in supporting student well-being and academic progress. Research from Son et al. (2020), indicates how the pandemic impacted students' mental health, increasing levels of stress, anxiety, and depression. These mental health issues have affected attendance, as well as negatively impacting academic performance, compounding the difficulties for both students and staff in adapting to new learning environments.

Effects of Austerity Measures: Austerity measures have also shaped the current educational context. Gibson (2018) highlights how austerity policies in England have strained school resources. For example, reduced funding has resulted in larger class sizes, fewer support staff, and diminished extracurricular offerings. Leaton Gray (2018) notes that these financial constraints negatively affect both the quality of education and staff morale, caused by increased workloads and decreased job satisfaction. This situation particularly affects students from disadvantaged backgrounds, exacerbating existing inequalities.

Academic Pressures, Performance Metrics and Academisation: Academic pressures have intensified with policies like Progress 8, which measures students' progress across subjects. Ball (2018) critiques this metric, arguing that it reinforces educational inequalities by prioritising academic outcomes over holistic education. Beckett (2019)

discusses how attention to such metrics encourages schools to narrow their focus, often at the expense of broader educational goals such as fostering creativity, critical thinking, and emotional well-being. The shift towards academisation and the increasing marketisation of education in the UK have further complicated the landscape. Ball (2018) describes how these trends challenge equitable educational practices, as schools operate more like businesses, competing for students and resources. This shift similarly leads to a narrowing of the curriculum and a focus on metrics that do not fully address the diverse needs of students. Additionally, West and Wolfe (2019) highlight that academies, especially those within larger chains, can face disparities in resource allocation, impacting the quality of education. The combination of performance metrics and academisation complicates decision-making regarding school management and curriculum design.

Overall, the current educational context is shaped by a complex interplay of factors that collectively impact schools' abilities to support all students. This especially impacts CYP who are most vulnerable, such as those exposed to DVA.

Mitigating the Impact

After exploring the contexts in which schools are currently operating, the researcher considered strategies to mitigate some of these pressures. Research suggests that implementing interventions that account for broader environmental influences on children and young people's development can be beneficial. One such approach is Trauma-Informed Practice (TIP), which has been shown to help schools better support children who have experienced adversity by creating environments that foster emotional and psychological safety

TIP is an approach that has gained traction in response to the understanding that adverse experiences can affect student learning and wellbeing. Research from Van Der Kolk (2014) provides an overview of how trauma impacts the brain and body, underscoring the importance of trauma-informed approaches in various settings, including educational. Environments that support healing and resilience are crucial for individuals affected by trauma. Therefore, it is essential for school professionals to understand trauma's effects on students and to create supportive environments to mitigate these impacts (Levenson, 2017). Dube and Rinkler (2017) reviewed TIP in schools and whether they are effective in supporting individuals who have experienced trauma, offering evidence-based recommendations for integrating TIP into school practices.

In this section the researcher will emphasise how TIP and similar interventions are essential for addressing the needs of CYP affected by traumas, such as exposure to DVA. This section will identify potential barriers to effective implementation of TIP, with consideration of strategic approaches that acknowledge these challenges. Given that TIP often requires substantial investment, training, and ongoing support, schools facing financial constraints can still make progress by leveraging existing resources. Integrating trauma-informed principles into current practice allows schools to build on what they already have, making the most of limited funds. This approach helps in embedding TIP within existing frameworks without the need for extensive additional expenditures (Chafouleas et al., 2016). Successful implementation of TIP necessitates specialist training for staff, which can be challenging due to existing workloads and pressures. To overcome this, schools can prioritise training sessions and provide flexible options, such as online modules or short workshops, to accommodate staff schedules. Additionally, partnering with external organisations for continuous training and support can provide ongoing professional development and help staff integrate traumainformed approaches effectively. To address potential resistance from staff, it is important to emphasise the positive impact of TIP on student outcomes. Highlighting success stories and data demonstrating improvements in student well-being and academic performance can motivate staff to embrace and apply TIP. Regularly sharing these positive outcomes and providing recognition for staff efforts can further enhance engagement and commitment. Whilst systemic and policy barriers can pose challenges to implementing TIP, as existing regulations and policies may not always support its integration, schools can navigate this by working within existing frameworks to adapt and incorporate TIP principles. Research indicates that collaborating with policymakers and advocating for supportive changes in regulations can also facilitate smoother implementation. (Cole et al., 2013) Further, coordination with different agencies and services involving in student support will ensure a more integrated approach to trauma-informed practices. By focusing on these strategies, schools can effectively implement TIP while addressing potential barriers, ultimately creating supportive environments that better meet the needs of trauma-affected students. This literature review will continue to explore how CYP exposed to trauma, specifically DVA can be supported.

Understanding how Adults Support Children and Young People exposed to Domestic Abuse and Violence

Parenting

Research underscores the critical role of family, particularly parents, as primary sources of support for children. However, literature indicates that parenting abilities can be significantly compromised in households affected by DVA. When mothers are victims of DVA, their mental health often suffers, leading to conditions such as posttraumatic stress disorder (PTSD) and depression (Levendosky et al., 2004; Lilly & Graham-Bermann, 2009). This emotional turmoil can diminish a mother's emotional availability and responsiveness to her children (Humphreys, 2007), directly impacting the well-being of CYP, causing CYP to demonstrate both internalising and externalising behaviours. These effects can be long-lasting and cumulative (Huang et al., 2015). Further, Kelleher et al. (2008) found that in the general population, DVAexposed mothers were reported to demonstrate more aggressive and neglectful parenting behaviours. These mothers were more likely to be irritable, exhibit less emotional warmth, and were less likely to be involved in their children's education and care. Additionally, reduced parental support for schoolwork and situations where CYP are forced to change schools, as a safety measure, can further exacerbate the negative impact on educational outcomes and emotional wellbeing. Based on these challenges, it is helpful to review literature looking at other adults that can support CYP exposed to DVA.

Schools

While research underscores the critical role of parents, it also highlights the complementary role that schools play in providing additional layers of support and intervention to address CYP's multifaceted needs. Research from Lloyd (2018) suggests that the educational system in the UK remains 'attainment-driven', prioritising league tables and exam results. Despite this, evidence points to the expectation for schools to adopt a 'whole child' approach that encompasses mental health and well-being, in addition to academic achievement (Department of Health [DoH] and Department for Education [DfE], 2017). Thus, Lloyd's (2018) assertion that education is solely 'attainment-driven' contrasts with the ongoing emphasis on promoting CYP's mental health and well-being within the education system. This is supported by Baginsky et al. (2015), who summarise:

'There may be an inherent conflict between...pressure on institutions to demonstrate high levels of academic attainment and discipline by pupils in a competitive educational 'market' and...the role of schools in recognising and meeting the pastoral needs of children...'(Baginsky et al., 2015, p.358).

Baginsky highlights the dual pressures facing schools to be both 'attainment-driven' and meet the pastoral needs of students, which includes supporting CYP exposed to trauma such as DVA. These pressures are further compounded by cuts to the availability of essential services. Not all families exposed to DVA will receive support from specialist services (Sterne et al., 2009), and for some school staff are potentially the only source of support. This is evidenced by the DfE (2017), which found that the second highest percentage of DVA referrals came from schools at 17.7%, increasing the pressure on schools to understand and support CYP exposed to DVA (Lloyd, 2018). As a result, the researcher was driven to consider the experiences of teachers, who are the primary adults in schools, in supporting CYP exposed to DVA. Understanding their perspectives and challenges is crucial for developing effective support strategies and ensuring that schools can adequately address the needs of these vulnerable children.

Teachers

There is a substantial body of literature concerning the role of teachers in supporting CYP exposed to DVA. Besides parents and caregivers, teachers often have the most contact with CYP. Research highlights the unique position of teachers, who, in their interactions with students, possess varying degrees of awareness of a child's personal circumstances and home lives (Gadd et al., 2013). This awareness equips teachers well to identify and support CYP who may be exposed to challenging circumstances at home, such as DVA. To effectively do this, teachers need to understand the impact of DVA exposure on CYP, particularly in terms of their learning and behaviour, which may manifest as academic difficulties, challenging behaviour, and disengagement from school. Additionally, it is necessary for teachers to understand the specific types of support that CYP exposed to DVA require, to ensure that the support provided is child centred.

Broader literature from Radford et al. (2011) highlighted interview findings from CYP who have lived with DV. These CYP expressed a desire for 'help to move on, make new friends, get settled in school and to have a 'normal' childhood free from fear' (Radford et al., 2011, p.19). Considering the influential role teachers can play in CYP's lives, the researcher explored whether teachers provide the support mentioned. Findings emphasise that while school staff may not be able to stop the violence occurring at home, they can make a significant

difference in children's lives (Stern & Poole, 2010). Regular interaction between teachers and students fosters relationships built on security and trust, enabling teachers to play a pivotal role in identifying and responding to CYP exposed to DVA, thereby supporting their aspirations as expressed in Radford's research.

Contrasting research from Buckley et al. (2007) identifies some of the limitations related to teacher support for CYP exposed to DVA. Buckley et al. (2007) gathered data from seventy participants, including thirty-seven service providers or volunteers, eleven mothers and twenty-two children and young people who had experience living in violent environments. Their findings underscored privacy as a 'fairly universal trait' (Buckley et al., 2007). Privacy in this context refers to being free from interference related to family problems, and Buckley's research identified privacy as a significant concern among children, particularly younger ones. Privacy around family problems may stem from fear of teasing, bullying, and lack of trust, all of which can affect CYP's willingness to discuss their family situations with teachers. Such privacy may impede teachers' efforts to support CYP in this area. Furthermore, research focusing on teachers' perspectives reveals that while schools make frequent referrals to DVA services, they are also the most likely to not report DVA (Gilbert et al., 2009; Kenny, 2001; Zundel, 1997). Factors affecting reporting rates, may include teachers' knowledge related to abuse and the procedures for reporting it (Byrne & Taylor, 2007). Kenny's (2001) research denotes emotional-based factors felt by teachers, such as fear of what will happen if a report is made. This lack of confidence is not only related to reporting DVA but also related to teacher's uncertainty of how to effectively support CYP exposed to DVA (Goldman & Padayachi, 2005). Davis and Berger (2019) emphasised that teachers often feel insufficiently equipped, lacking the necessary knowledge and skills to respond effectively to students exposed to DVA. Similarly, Markstrom and Munger (2018) found that despite influential roles in a child's life, some teachers lack the right 'feeling' for supporting CYP exposed to DVA. These reflections on teacher's self-awareness are significant, because if teachers attempt to provide support beyond their 'professional scope' and 'without being suitably qualified' they risk putting students in a more dangerous situation, both emotionally and circumstantially, than before disclosure (Lloyd, 2018; Howarth et al., 2016; Swanston et al. 2014).

Consequently, researchers have advocated for more training in this area (Kenny, 2004). While formal training has historically been limited, a study conducted by the University of Warwick highlighted the benefits of providing teacher training for identifying and supporting children exposed to DVA. Furthermore, Holt et al. (2019) found that when teachers did receive training, they were more likely to recognise signs of abuse and provide appropriate support.

Policy, Legislation and Safeguarding

Before exploring the role of other school professionals who can support CYP exposed to DVA, it is essential to present relevant policy and legislation that outlines adult responsibilities for safeguarding and supporting CYP. Since the early 2000s there has been an increasing focus on safeguarding policies in the UK. The Children Act (2004) and 'Every Child Matters' documentation (DfE and Skills, 2004) aimed to improve outcomes for CYP, expecting professionals working with them to ensure the following five outcomes are met: being healthy, staying safe, enjoying, and achieving, making a positive contribution, and achieving economic well-being. These documents also stress the importance of communication between professionals and promote integrated working (DfES, 2004). More recently the child protection documentation 'Working Together to Safeguard Children' (HM Government, 2013), detailed the need for action regarding the safeguarding responsibilities of professionals and highlights the importance of keeping the child at the centre of these efforts. This suggests that the needs and views of children should be heard and upheld (Holt, 2014). The title of this document includes the word 'together' emphasising the need for a multi-agency approach to facilitate effective child protection and safeguarding. Additionally, the guidance from the DfE 'Keeping Children Safe in Education' (DfE, 2016) stresses the safeguarding responsibility of various school professionals, including, headteachers, teachers, staff, governing bodies, proprietors, and management committees. These professionals are responsible for reporting any concerns about a CYP to social care services. This reduces the expectation of a singular Designated Safeguarding Lead (DSL) being responsible for safeguarding referrals at schools. This shift encourages a more collective and comprehensive approach to safeguarding, ensuring that all adults in a child's life are vigilant and proactive in their duty to protect and support CYP.

Recognising these policies and guidance, literature indicates an increase in the number of children subject to Child Protection Planning in England and the number of children classified as 'Children in Need' (Barnes, 2015). This rise in CYP experiencing emotional distress impacts CYP's attendance and academic achievement and consequently requires school staff to act and provide necessary support (Hendry & Baginsky, 2008; McGinnis, 2008). Both policy and guidance, along with increased need, necessitate school staff having the skills, knowledge and focus to safeguard vulnerable CYP (McKee & Mason, 2015), beyond the provision of education. Ultimately, there has been an increase in accountability related to safeguarding in schools.

DVA is undoubtedly part of the landscape of child protection (Lloyd, 2018) and the issues of DVA and child safeguarding are closely related. The damaging effects of CYP exposed to DVA overlap with child maltreatment, DVA itself, and negative effects of parenting (Hestret et al., 2007; Turner et al., 2015). Acknowledging this association, the researcher sought to explore services that exist to safeguard CYP who may be exposed to DVA. Findings from a commissioned report from the National Society for the Prevention of Cruelty to Children (NSPCC, 2014) revealed pressures facing social services. This, together with funding cuts to community-based services, for example, youth counselling, have increased the pressure on schools to fill gaps in support for vulnerable CYP. This aligns with research from Women's Aid (2020), which indicates that reduction in funding for DVA services further necessitate schools to address these service shortfalls. The policy-based implications and the strain on external services to support vulnerable CYP exacerbate the fundamental needs of these children to access effective support, particularly in response to DVA exposure. Given these considerations, alongside the previous section regarding teachers experiences in this domain, the author aimed to explore the growing evidence base related to other school professionals who could potentially support these CYP.

Pastoral Care and Pastoral Staff

While there does not appear to be a widely accepted definition of pastoral care, the Education and Training Inspectorate (ETI) of Northern Ireland's guidance on the evaluation of pastoral care notes:

'Through its pastoral care arrangements and provision, a school demonstrates its continuing concern for the personal and social development of all its pupils, regardless of their age or ability, as individuals and as secure, successful and fully participating members of the school and its wider community' (ETI, 2008, p.5).

And Calvert (2009) defined pastoral care as a term used in education in the UK as

'the structures, practices, and approaches to support the welfare, wellbeing and development of children and young people' (Calvert, 2009, p. 267).

Ultimately literature agrees that pastoral care relates to 'looking after the welfare of the pupil' (Marland, 1974, as cited in Purdy, 2013, p.8). Previously, teachers undertook pastoral care responsibilities. For example, in UK secondary schools, much of the routine, day to day pastoral support for individual students was provided by form tutors and other teaching staff

(DfE, 2012). However, in recent years, the literature reflects a proliferation of support roles related to wellbeing in schools (Edmond & Price, 2009), which may be due to recent inclusion of pastoral care in the criteria for quality of UK schools (Office for Standards in Education, Children's Services and Skills, 2012).

Research has indicated the advantages of specific professionals in providing pastoral care for CYP, namely pastoral staff, highlighting that 'pastoral staff are more aware of their background, their family life, their health, their situations' (Littlecott et al., 2009). This suggests that compared to teachers, whose knowledge of CYP's home lives may vary, pastoral staff often possess deeper awareness and therefore are better positioned to support CYP exposed to ACEs, including exposure to DVA. Further exploration of the literature highlights the nature of school staffing structures, indicating that it is rarely one member of staff who takes full responsibility for the pastoral care in schools. Various professionals, including, 'Safeguarding Officers', 'Behaviour Mentors', 'Education Welfare Officers', 'School Counsellors', and 'Wellbeing or Mental Health Officers' (Richardson, 2021), tend to provide pastoral care and as such fall under school pastoral teams. The fundamental role of pastoral staff in schools is to remove barriers for the most vulnerable children, enabling them to access their education. Literature provides an indication of the variety of support provided by pastoral staff; including their role in the inclusion and engagement of CYP with special educational needs and disabilities (SEND) (Blatchford et al., 2011). Research additionally affirms the role of pastoral staff in supporting CYP's wellbeing and development, with an emphasis on pupil emotional wellbeing and care (Haris, 2006; Flint, 2007). Further, parents and teachers have indicated how they too benefit from the care and support of pastoral staff, as highlighted by research from Jessiman et al (2022). Their study concluded that pastoral staff are skilled and responsive to both student and parental needs. Moreover, corroborating Littlecott et al.'s (2009) findings, Jessiman et al. (2022) reported that school pastoral teams are often more familiar with CYP's personal details and are adept at identifying and addressing challenges to support CYP at home.

Pastoral support for Children and Young People exposed to Domestic Violence and Abuse

Having explored the vital role of pastoral staff, the researcher explored literature relating to the role of pastoral staff in helping CYP exposed to DVA. Research from Murphy and Holste (2016) found that increased pastoral care correlates with a decrease in challenging behaviour among affected CYP, leading to notable enhancements in CYP's academic performance and achievement levels. This assertion is further supported by the National Domestic Violence Hotline, which discovered that children who received support from pastoral

staff exhibited reduced emotional distress and improved academic outcomes (National Domestic Violence Hotline, 2019). Similarly, Ellis (2017) found that children who received pastoral support reported feeling safer and more supported within their school environment.

It is likely that having greater knowledge of a CYP's background and home life enables pastoral staff to provide effective support for CYP exposed to DVA. This support may include, providing early intervention, developing nurturing, and trusting relationships and liaising with external systems. Save for a few notable exceptions, it is surprising that there is an identifiable gap in the literature regarding pastoral staff who work with and support CYP who are or have been exposed to DVA. The first exception is Barnes's (2015) doctoral study. This research explored school professionals', with pastoral responsibilities, understanding of children's experiences of DVA and CYP agency within those experiences. However, Barnes (2015) focused primarily on the professionals' understanding of children's experiences rather than their direct experiences of providing support for these CYP. A second exception in this field is Berger and Meltzer's (2021) study conducted in Australia, which used thematic analysis to explore the qualitative experiences of mental health staff working with students exposed to DV. It is worth noting that Australian school mental health and wellbeing staff have similar titles to those included in UK pastoral teams, for example, 'Primary Welfare Officer', 'Student Wellbeing Officer', as well as other wellbeing staff. Berger and Meltzer's research identified key themes, including, the emotional response of working with CYP exposed to DV, the uncertainty surrounding the role of pastoral staff in addressing this issue, and the perceived need for comprehensive education within the whole school community, including training in DV support. Berger and Meltzer chose to define DV as 'experiences where students may have heard, seen, become directly involved in, such as attempting to intervene, or experienced the aftermath of physical or sexual violence between their parents or caregivers'. This choice of definition is narrow especially considering the recency of their study and the fact that understanding of DVA has evolved to include distinct types of abuse and coercive control. Upon theorising why this definition was chosen, it may have been that they wished to narrow their focus to one aspect of DV -violence occurring between parents or caregivers. However, as aforementioned the current UK definition is broader and involves various forms of domestic abuse (Home Office, 2013; 2014).

The absence of similar, UK-based, research involving frontline school professionals, underscores the need for further exploration into the individual experiences of pastoral staff in supporting CYP exposed to DVA. It would be valuable to determine if similar themes to those identified by Berger and Meltzer's are identified within the UK context. Gathering rich data

from the perspectives of pastoral staff is crucial, with the potential to inform the development of effective interventions and tailored approaches to support CYP exposed to DVA.

The Role of Educational Psychologist in this area

Given that many families affected by DVA may not always receive support from specialist services, this underscores the crucial role of schools, and consequently EPs, in providing essential support to these individuals (Sterne et al., 2010). Similarly, to pastoral staff, there is a notable dearth of research related to EP support in this area, with only a few UK studies referencing EP involvement in addressing domestic abuse (Dodd, 2009; Gallagher, 2014; Cort & Cline, 2017). Gallagher's (2014) research aimed to understand how EPs conceptualise DV. Gallagher conducted semi-structured interviews, with five participants, to explore how or if EPs considered the phenomenon of DV as pertinent to their work with CYP and families. Findings identified facilitators and barriers EPs face in managing this aspect of their work. Facilitators included, receiving training on DV, feeling equipped to offer support through therapeutic interventions, and feeling supported by supervision practices to address any issues arising from their involvement in this work. Barriers included, believing that the work was more relevant to other professionals, such as those in social care, perceiving involvement in DV cases as time-consuming and long-term and the issue of secrecy involved in working with DV cases. Moreover, Gallagher discussed the broader role EPs can play in raising staff awareness of DV and the difficulties facing CYP exposed to DV. This can be achieved through offering and delivering training on how to respond emotionally to vulnerable CYP, addressing issues at a systemic level by helping schools promote healthy relationships and raising awareness of DV. EPs can also provide wider support for staff through consultation and supervision. The implications for EP involvement identified by Gallagher are reinforced by the findings of two studies conducted by Ellis (2012; 2018). Before understanding how EPs can support pastoral staff, it is essential to address the identified 'gap' and gain insights into the experiences of pastoral staff themselves. In turn this can lead to development of effective support strategies for pastoral staff, for example necessary training and resources to support vulnerable CYP.

Conclusion

This literature review began by identifying the existence of DVA within historical, national, and contemporary socio-political contexts. The review then highlighted the substantial number of CYP exposed to DVA, as indicated by the Office of National Statistics

(2017). To understand the impact of exposure to DVA on CYP key psychological theories were explored as frameworks for understanding, including theories from Maslow (1943), Bronfenbrenner (1979), Attachment Theory (Bowlby, 1969) and Trauma-informed approach. Reviewing Sterne et al.'s (2009) research, it is evident that a considerable number of CYP who experience DVA at home display challenging behaviour at school. Relevant studies have explained how this behaviour may manifest with difficulties across all four areas of need identified in the SEND CoP (2015). The researcher also recognised the importance of the current context in which schools are operating and the importance of TIP in mitigating some of the impacts of this. In reviewing empirical research considering support for CYP exposed to DVA, contrasting perspectives were revealed regarding teachers' experiences supporting this group. Interestingly, despite their key role in a CYP's life, teaching staff may lack the confidence to support CYP exposed to DVA. The significant impact of exposure to DVA underscores the need for effective support for CYP grounded in a comprehensive understanding of legislation and policy, aimed at safeguarding CYP. The literature review identified increasing evidence relating to the role of pastoral staff in supporting CYP, specifically presenting a rise in support roles related to wellbeing in schools (Edmond & Price, 2009). Further, this review identified that the varied responsibilities undertaken by pastoral staff include support for CYP exposed to DVA (Murphy & Holste, 2016).

This literature review has identified a lack of research on the experiences of pastoral staff working with CYP exposed to DVA in the UK. The following chapter will discuss the methodological approach in the research undertaken to address this absence, focusing on the importance of hearing the experiences of pastoral staff who have worked with, or are currently working with, CYP they believe to be exposed to DVA.

Chapter 2: Empirical Chapter

Abstract

There is lack of research in the United Kingdom (UK) addressing the experiences of pastoral staff working with and supporting Children and Young People (CYP) who are or have been in homes where Domestic Violence and Abuse (DVA) is taking place. The present study sought to explore the experiences of pastoral staff, with a focus on the skills and training pastoral staff may need, in supporting CYP exposed to DVA. Semi-structured interviews were conducted with eight members of staff from different schools in an Eastern region Local Authority (LA). These interviews were analysed using Interpretative Phenomenological Analysis (IPA), which is underpinned by phenomenology, hermeneutics and idiography. Each interviewee shared their experiences, and as a result four superordinate themes were generated. These themes included, multi-faceted pastoral responsibilities, the importance of awareness of safeguarding, understanding the impact of experiencing trauma (e.g., DVA) and interpersonal qualities. These superordinate themes, alongside their subordinate themes, were discussed in relation to relevant theoretical literature and empirical research. Through the analysis of the data, implications for professionals providing effective support for CYP exposed to DVA are discussed.

Introduction

The terminology adopted in this chapter follows the terminology used in the Literature Review. Although the term Domestic Violence and Abuse (DVA) is the predominant term used, when referencing existing studies, the author adopts the terminology used in those studies, in particular domestic violence (DV) and domestic abuse (DA).

How Children and Young People are exposed to Domestic Violence and Abuse

Domestic Violence is defined as 'any incident or pattern of controlling, coercive, threatening behaviour, violence, or abuse between those aged sixteen or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass but is not limited to psychological; physical; sexual; financial; emotional abuse' (HM Government, 2013). Globally, millions of Children and Young People (CYP) are exposed to traumatic experiences in their homes, including exposure to various types of DV (Devaney, 2008). Radford et al. (2011) identified that one in seven (14.2%) of CYP under the age of eighteen are exposed to DV at some point during their childhood. Whilst earlier research and policy considered CYP as 'passive observers' (Fantuzzo & Mohr, 1999), this changed in 2022 when The Domestic Abuse Act (2021) officially recognised CYP as 'victims in their own right' (Devaney, 2008).

To date no standardised definition of childhood exposure to violence has emerged (Mohr et al., 2000). However, most researchers agree that exposure to DVA involves a child seeing, hearing, or being directly involved in (i.e., attempting to intervene) or experiencing the aftermath of physical or sexual assaults that occur between their caregivers (Evans, Davies & DeLillo, 2008). Research highlights that exposure to DVA can impact CYP across all four areas of need, identified in The Special Educational Needs Disability Code of Practice (SEND CoP, 2015). These four areas are communication and interaction, cognition and learning, physical and sensory and social, emotional, and mental health (SEMH).

Essential services exist to support CYP affected by DVA, however during the COVID-19 pandemic approximately 85% of these services were cut (Women's Aid, 2020), compounding funding reductions to DV services over the preceding ten years (Nicholoson, 2010). According to Refuge, the UK's largest specialist domestic abuse organisation, this has resulted in many families experiencing DVA no longer receiving vital support (Panovska-Griffiths et al., 2022). These challenges are exacerbated by ongoing strains on social care services (Katy, 2023). The cuts to these services have likely increased pressure on schools to

understand and support CYP exposed to DVA (Lloyd, 2018). While different services and charities specialise in DVA support, after parents and carers, school staff have the most direct contact with CYP and are therefore likely to have greater knowledge of children's personal circumstances and home lives (Fox et al., 2013).

School support for Children and Young People exposed to Domestic Violence and Abuse

To support CYP exposed to DVA, Buckley et al. (2007) emphasised the need for school staff to understand the impact of this exposure and how it effects children's learning and behaviour, with consideration of academic difficulties, friction with teachers and disengagement from school. Calder et al. (2004) emphasised the impact of exposure to DV on CYP's SEMH, finding that approximately 40% of CYP exposed to DV presented with significant emotional and behavioural difficulties. Research assumes that with an understanding of the impact of DV exposure on CYP, school staff, particularly teachers should be equipped to provide tailored support to meet individual needs of students. As stated by Sterne and Poole (2010) "although staff in schools may not be able to stop the violence at home, they are able to make a considerable difference to children's lives" (p.17). However, whilst being an important influence in the lives of children and supporting CYP, some teachers may lack the right 'feeling' to support CYP in this area (Markstrom & Munger, 2018).

The literature review explored limitations related to teacher support for CYP exposed to DVA, noting that children may maintain privacy about family issues due to fear of teasing, bullying, and a lack of trust, which can hinder teachers' ability to provide effective support (Buckley et al., 2007). Additionally, the professional nature of the teacher-student relationship, where teachers are perceived as authority figures, may inhibit CYP from disclosing sensitive issues (Hargreaves, 2000). Moreover, teachers' knowledge of abuse and reporting procedures, as well as emotional concerns about the potential consequences of reporting (Gilbert et al., 2009; Kenny, 2001; Byrne & Taylor, 2007; Zosky & Johnson, 2004), can impact teacher willingness and confidence in reporting DVA exposure. Research also indicates that teachers may find it challenging to provide individualised support for children exposed to DVA, exacerbated by work pressures and capacity constraints (Berger et al., 2022).

Pastoral Care and Pastoral Staff

Having recognised a fundamental need for effective support for CYP exposed to DVA this section will consider definitions of pastoral care and explore the associated roles of pastoral staff in providing such support. In alignment with the literature review, the term 'pastoral staff'

will be used to refer to this group throughout this chapter, as well as in the reflective chapter. However, it is important to note that 'pastoral staff' does not denote exclusive or sole pastoral responsibilities; these staff members may share pastoral responsibilities and undertake other responsibilities within their school as well.

Pastoral Care

Pastoral care is a criterion against which the quality of UK schools is measured (Office for Standards in Education, Children's Services and Skills, 2012, 2016). Attempts to define pastoral care are highlighted in Purdy's book 'Pastoral Care 11-16. A Critical Introduction' (2013). Earlier definitions explain pastoral care as 'looking after the welfare of the pupil' (Marland, 1974, as cited in Purdy, 2013, p.8). Purdy later postulated that pastoral care involves reactive responses to issues arising for pupils, and preventative educational strategies aimed at preparing pupils for their lives at home and school (Purdy, 2013). Although there does not appear to be a widely accepted UK definition of pastoral care, this study will use a definition provided by the Education and Training Inspectorate (ETI) of Northern Ireland. Their guidance on the evaluation of pastoral care notes:

'Through its pastoral care arrangements and provision, a school demonstrates its continuing concern for the personal and social development of all its pupils, regardless of their age or ability, as individuals and as secure, successful and fully participating members of the school and its wider community' (ETI, 2008).

This definition was chosen because it avoids listing multiple aspects of pastoral provision but emphasises pupils as individuals, within the wider school and community context. Further, this focus on the individual needs of CYP is consistent with the ethical approach that Educational Psychologists (EPs) apply in their practice, prioritising CYP at the centre of planning and decisions that affect them, enabling CYP to feel listened to, respected, valued, and cared for. Ultimately this approach nurtures a sense of belonging among CYP (Every Child Matters, 2003; SEND CoP, 2014).

Pastoral Staff

Traditionally, teachers managed pastoral responsibilities, with form tutors and other teaching staff providing day-to-day support in UK secondary schools (DfE, 2012). However, since the introduction of the 'Every Child Matters' UK government policy in 2003, there has

been a proliferation of specific, wellbeing roles and a promotion of professionals involved in pastoral care (Andrews, 2006; Edmond & Price, 2009). These professionals are often part of school pastoral teams and may include, 'Safeguarding Officers', 'Behaviour Mentors', 'Education Welfare Officers', 'School Counsellors', and 'Wellbeing or Mental Health Officers' (Richardson, 2001). Evidence highlights the fundamental role of staff with pastoral responsibilities, who are often 'more aware of their [CYP's] background, their family life, their health' (Littlecott et al., 2019, p.11). This awareness makes it easier to remove barriers for the most vulnerable CYP, enabling them to better access education while also supporting their wellbeing and development (Harris, 2006; Flint, 2007). Staff with pastoral roles have been praised by parents and teachers for their skills and responsiveness to student and parental needs alike (Jessiman et al., 2022).

Pastoral Staff supporting Children and Young People exposed to Domestic Violence and Abuse

As identified in the literature review, millions of CYP globally are exposed to threatening or traumatic events at home, including physical, sexual, or emotional abuse, or witnessing such violence (Felitti et al., 1998; Attwood et al., 2022). The importance of support for such CYP has been identified across literature, with studies indicating that the 'right support' can lead to a decline in CYP's challenging behaviour and an improvement in their achievement and attainment levels (Murphy & Holste, 2016). As noted in the section 'School Support for CYP Exposed to DVA', teachers face difficulties in supporting CYP exposed to DVA. Hypothesising why teachers often lack confidence and experience in this area, the researcher speculated that limited time and resources might hinder teachers from developing the necessary knowledge, skills, and 'feelings' to provide effective support in this area. If this is the case, teachers would benefit from protected time to enhance their understanding for example, through training (Berger, et al., 2022). Acknowledging the limitations teachers experience in supporting CYP exposed to DVA, the researcher explored which other professionals might have protected time and capacity to provide the 'right support' for this group. The researcher read Berger et al.'s (2022) study, which found that school leaders play a critical role in providing support to students exposed to DV. Interestingly, their study indicated that school leaders rely heavily on staff with pastoral responsibilities, namely 'Wellbeing Officers,' to offer debriefing, education, and support related to student disclosures of DV. In many cases these 'Wellbeing Officers' were cited as having a better understanding of mandatory reporting legislation for child abuse and neglect, as well as more practical knowledge on how to help students exposed to DV, than other school professionals. While the experiences of teachers and school leaders have been evidenced, there is limited research into the individual experiences of pastoral staff - frontline professionals with relevant knowledge-in supporting CYP exposed to DVA. An exception is Berger and Meltzer's (2021) exploration of the experiences of mental health and wellbeing staff in Australia regarding students exposed to DV. The study revealed diverse experiences among participants, highlighting key themes such as the challenges faced by staff, the impact of DV on CYP, education around the impact of DV exposure, and responses to student disclosures. This study prompted discussions about the necessity of changes in training policy, school structure, and the application of trauma-informed approaches. However, there remains a gap in UK research discussing the personal and professional experiences of frontline pastoral staff who work with and support CYP who are or have previously witnessed DVA. This absence underscores the need for exploration into the unique challenges and insights of these professionals.

Research Aims and Rationale

As outlined above, statistics indicate that many CYP are exposed to DVA and consequently present with higher needs across all four areas of need identified in the SEND CoP (2015). Researchers have explored the experiences of teachers and school leaders support for affected CYP. However, there is a gap in UK-based literature regarding the lived experiences of pastoral staff working with CYP exposed to DVA. This research aims to address this gap and broaden the research area, by exploring the unique experiences of pastoral staff working with CYP exposed to DVA. The researcher hopes that obtaining these perspectives will provide a nuanced understanding of support that CYP exposed to DVA may receive and benefit from. Consequently, informing pastoral staff, EPs, and other school professional who work closely with affected CYP, to enable impact at multiple levels.

The primary question that the researcher plans to address is:

What are the experiences of pastoral staff working with CYP who are, or have previously been, exposed to DVA?

Methodology

Ontology, Epistemology and Methodology

Ontology and epistemology refer to the underlying philosophical beliefs held by a researcher. Ontology involves the assumptions made about the nature of the world, while epistemology refers to understanding of knowledge, including what can be known and how that knowledge can be acquired (Snape & Spencer, 2003). A researcher's ontological and epistemological beliefs significantly impact the methodological decisions they make, as these beliefs guide their approach to research design, data collection and interpretation.

The current study is designed, and data is interpreted using a constructivist perspective. Constructivism views knowledge as individual constructions rather than objective facts (Coolican, 2009), recognising that people construct their reality based on their individual experiences, interpretations, and social contexts. Unlike other epistemological paradigms that aim to attain objective knowledge, examine underlying mechanisms, or provide purely descriptive accounts (Willig, 2013), this constructivist-based research does not claim to produce measurable 'truths' about the experiences of pastoral staff working with CYP exposed to DVA. Such an approach would align with a positivist epistemology (Robson, 2011). Instead, this research seeks to provide a subjective perspective of participants' experiences (Willig, 2013). This approach compliments the researcher's subsequent decision to take an exploratory approach, designed to develop understanding and create meaning about a specific subject.

Qualitative Methodology

Constructivism aligns with qualitative approaches which seek to explore meaning attached to experiences (Pop & van Nieuwerburgh, 2019). The researcher established that a qualitative methodology would align with her chosen research position and therefore would be appropriate in addressing the research question and analysing the data collected. Various qualitative approaches were explored (Table 15, Reflective Chapter) before a decision to use Interpretative Phenomenological Analysis (IPA) was made.

Interpretative Phenomenological Analysis

IPA was developed in 1996 by Smith and aims to capture the 'essence' of the phenomenon from a participant's perspective rather than through pre-defined categories (Smith & Osborn, 2008). IPA's primary concern involves the 'detailed examination of human lived experience' (Smith et al., 2012, p.32) and is underpinned by phenomenology, hermeneutics and idiography. The research will outline each of the these below.

Phenomenology: IPA is rooted in phenomenology and highlights the unique and subjective nature of lived experiences. IPA is concerned with people's personal meaning and sense making in a particular environment (Smith et al., 2009). Phenomenological approaches aim to understand a participant's experience, considering that an event can be experienced in any number of ways and depends on the individual viewpoint (Willig, 2013) situated within specific contexts (Larkin et al., 2019). The current study explores the experiences of pastoral staff supporting CYP exposed to DVA, within the context of participant's experiences within their school settings.

Hermeneutics: The second area underpinning IPA is hermeneutics, Smith et al. (2009) state that hermeneutics is 'the theory of interpretation' and includes the 'restoration of meaning' (Ricoeur, 1970). Smith et al. (2012) identified that IPA involves a 'double hermeneutic', a two-stage process of interpretation (Smith, 2004, 2011; Smith et.al., 2012; Smith & Osbourn 2007). This is where the researcher attempts to make sense of, or interpret, the participants making sense of their own experiences (Dalton & Gibson, 2017; Smith et. al., 2012). Within the context of this study, the researcher attempts to make sense of participants' reflections of their own experiences working with CYP exposed to DVA. These experiences will be subjective, as will the researcher's position when making sense of the participants' reflections. It is acknowledged that the positions, feelings, and beliefs of individuals are based in context, and this must be taken into consideration, emphasised by Heidegger in his work titled 'Being and Time' (1927) who wrote "an interpretation is never a presuppositionless apprehending of something presented to us" (p.169).

Idiography: Idiography also underpins IPA. Idiography focuses on specificity rather than universality (Smith et al., 2012). IPA focuses on how specific individuals make sense of their experiences, making a case-by-case analysis, before moving on to conduct a cross-case analysis to look for similar themes and identify a shared meaning across groups (Smith et al., 1995). Idiographic approaches allow researchers to focus on individual's voices, sharing their 'lived' experiences before generating more general claims (Smith & Osborn, 2007).

Overall, IPA is particularly effective for researching areas that are dynamic, contextual, subjective, under-studied, and involve issues of sense-making (Smith, 2004), all of which apply to this study. Over the past decade, IPA has been increasingly used in psychological disciplines, including Educational Psychology (Emery & Anderman, 2020). IPA provides EPs the opportunity to explore individual experiences in greater detail and allows for the study of

under-researched areas, such as the current topic. When EPs assume the dual role of EP and researcher, it is crucial that they demonstrate both personal and epistemological reflexivity (Willig, 2017). In this study, the researcher, who is also a Trainee EP (TEP), will exhibit this through critical reflection and by using appendices to document her research journey, offering transparency.

Ethical Considerations

This study obtained full ethical approval from the University of East Anglia (UEA) School of Education and Lifelong Learning Research Ethics Committee (Appendix A) and was conducted in accordance with the principles detailed in the Code of Human Research Ethics (British Psychological Society [BPS], 2021). This section details some of the ethical considerations involved in this research. Participants were asked to read the participant information sheet and provide informed consent (Appendix E), which included permission to record and transcribe the participant interviews. Following this, signed consent forms were stored in a password protected folder on a password-protected computer, in compliance with the General Data Protection Regulation and the Data Protection Act (Information Commissioner's Office, 1998). At the start of each interview, the researcher ensured the participants knew of their right to withdraw from the research.

The researcher acknowledged the potential impact of asking participants to discuss this emotive and potentially sensitive topic. To manage this risk, participants were signposted to agencies and wider networks which provide support for those impacted by DVA. The researcher read out a debrief letter (Appendix G) at the end of each interview and a follow-up email was sent with the debrief letter attached. Participant details were not shared, and pseudonyms were used to ensure participants remained unidentifiable in the write up of the data. In line with research from Newman et al., (2021) the researcher considered where and how long recordings would be stored, this was laid out in the ethics application and reflected in the participant information sheet. The researcher did not have any ethical concerns, however, if any had arisen, they would have discussed them her research supervisor.

Participants

Access to participants - Gatekeepers

Participants were recruited from across the researcher's placement Local Authority (LA). Given the sensitivity of the information discussed, and following the approach typical in IPA studies, gatekeepers were used to facilitate initial contact with participants. The researcher

first sought permission for headteachers to act as gatekeepers and to allow their school's participation in the research. Upon agreement, a gatekeeper invitation was sent to headteachers (Appendix B) to ask if they would be happy to enable contact between the researcher and pastoral staff at their respective schools. If headteachers agreed, they were asked to sign a consent form (Appendix C) indicating their approval and then pass on the research advert (Appendix D) to staff with pastoral roles.

Recruitment and Sample of participants

Recruitment: The researcher used convenience sampling to recruit participants. Convenience sampling is a type of random sampling where members of a target population who meet certain criteria are recruited, participants are often easily accessible to the researcher. With support, the researcher recruited participants within her placement LA and did not need to extend the recruitment search to other LAs in the Eastern Region of England. The demographic data of the LA, where participants were recruited, reveals a mix of urban and rural communities with a diverse population. There are significant variations in socio-economic status and ethnic background, reflecting a broad spectrum of experiences and needs among CYP. The LA also has a substantial number of CYP, reflecting the general age distribution of the population.

In response to these needs the LA has implemented several interventions and approaches that pastoral staff may have used to support CYP exposed to DVA include:

Trauma Informed Practice: The LA has introduced Trauma Informed Practice (TIP) in some schools to better support students who have experienced trauma, including DVA. In the empirical and reflective chapters, the term TIP will be used, in both the researcher's narrative and participant quotes, to refer to the specific trauma informed model developed by the LA. This is done to maintain the LA's anonymity. TIP involves training staff to understand the impacts of trauma and create supportive environments, with a focus on integrating TIP into all aspects of school life, from classroom management to support service. The aim is to ensure that the whole school community understands and addresses trauma effectively.

Pastoral support Programs: The LA has invested in programs that provide emotional wellbeing and mental health support for CYP. These include partnerships with organisations that specialise in supporting CYP affected by trauma. Some LA schools have also developed specialist pastoral roles or teams dedicated to supporting students impacted by trauma.

Collaboration with external agencies: The LA promotes partnerships with charities and non-governmental organisations that provide specialised support for CYP exposed to ACEs, which may include DVA. These partnerships help schools access additional resources and expertise. The LA also places importance on multi-agency approaches to ensure that CYP receive holistic support, this involves collaboration between schools, social services, and health agencies.

Educational Programs and resources: The LA provides ongoing professional development opportunities to equip school staff with the knowledge and skills to support students affected by trauma such as DVA. Continuous development opportunities help staff stay informed and effective in their roles.

Overall, the LA and its schools seek to actively engage with implementing whole-school interventions to support CYP exposed to traumas such as DVA. These interventions include trauma-informed practices, specialist pastoral support, collaboration with external agencies, and educational resources aimed at creating a supportive environment for affected students. The approach reflects a commitment to addressing the complex needs of students within a diverse and evolving demographic context.

Sample: For the purposes of this research participants recruited were required to identify as a pastoral professional and hold a key responsibility within the pastoral side of their school, for example, 'Pastoral Lead', 'Behaviour Lead', 'Wellbeing Officer/ Coordinator', 'Family Liaison Officer', 'Safeguarding Lead'. Literature related to pastoral professionals mainly focuses on those working in secondary schools. However, their roles are no less present in primary schooling and so the researcher recruited participants from both mainstream primary and secondary schools.

Research from Noon (2018) highlighted that when using IPA "fewer participants examined at a greater depth is always preferable to a broader, shallow and simply descriptive analysis of many individuals" (Hefferon & Gil-Rodriguez, 2011, p. 756). Further, Clarke (2010) stipulated that a sample size of four to ten is advised when conducting research for professional doctorates. Reflecting on both Noon and Clarke's research and after discussion with her supervisor, the researcher aimed to recruit between six to ten participants and managed to recruit eight. Out of the eight participants, three participants worked at secondary schools

and five worked at primary schools. Information regarding all participants is presented in Table 3. Participants have been fully anonymised and given pseudonyms.

Table 3Participant Details

Pseudonym	Professional Title	Type of educational setting	Gender	Description of Pastoral Responsibilities	Examples of trainings attended
Jay	SENCo	Mainstream Primary	Female	Responsible for coordinating the SEND provision in the school, one planning, annual reviews and organising teaching assistants. Mental Health Lead and a member of Senior Leadership Team (SLT).	Therapeutic play training, mental health training
Ciara	Associate Deputy Headteacher	Mainstream Secondary	Female	Deal with behaviour and expectations, manage pastoral and behaviour team. Manage inclusions and decide what SEMH interventions are needed.	TIP training, safeguarding training
Rita	Learning Mentor	Mainstream Primary	Female	Pastoral SEMH role. Implement trauma informed practice with staff. Teach Learning Support Assistants (LSAs) how to use trauma informed practice and develop relationships.	TIP training, domestic abuse training
Ivy	SENCo	Mainstream Primary	Female	Oversee pastoral work and work within the learning mentor team. Provide mentoring.	Mental health and wellbeing training, safeguarding training, trauma based training
Edie	SENCo	Mainstream Primary	Female	Consult with teachers to support the diverse needs of CYP within their classes. Support funding applications.	TIP training, attachment training
Jon	Deputy Headteacher/ Deputy Safeguarding Lead	Mainstream Secondary	Male	Ensure that the school has effective pastoral care and systems in place to make sure that standards are maintained with a behavioural focus. Ensure that CYP are achieving what they should be achieving. Support CYP with character development, and personal development, and personal development. Safeguarding responsibilities around ensuring CYP are safe at home and school.	Domestic abuse training, safeguarding training
Mel	Learning Mentor	Mainstream Primary	Female	Higher Level Teaching Assistant (HLTA), LSA on a	Mentoring based training

				one-to-one basis. Mentor to support CYP and staff wellbeing. Provide intervention-based work for CYP.	
Zara	Senior Safeguarding and Wellbeing Manager	Mainstream Secondary	Female	Manage moderate to high-risk safeguarding concerns. Support teams around the family.	~ ~

Please Note:

- Ciara and Zara work at the same secondary school and Mel and Ivy work at the same primary school
- Participants referred to additional trainings, either based on their previous roles or in referencing trainings that their colleagues have attended. These trainings include; Mental health and trauma training, nurture group training course, harmful sexual behaviour training, bereavement training young careers training, eating disorder training, training from NSPCC, training from LA, mentoring specific training, attending domestic abuse conference.

Interviews took place on Microsoft Teams which was convenient for both the researcher and the participants, allowing for flexibility with interview schedules (Hanna & Mwale, 2017). Hanna and Mwale's (2017) research signals advantages in using virtual methods for data collection, for example video conferencing enables facilitation of both visual and virtual interactions, capturing data through audio and video recording. Additionally, research suggests that power imbalances related to navigation of public or private spaces, for example if a participant meets the researcher in the researcher's place of work, are mitigated when virtual methods are used (Hanna & Mwale, 2017). Having acknowledged the benefits of virtual data collection, the researcher reflected on potential concerns related to communicating over Teams, for example loss of connection. Any concerns were addressed at the start of each interview.

Data Collection

Semi- structured interviews were facilitated to explore experiences of pastoral staff working with CYP exposed to DVA. Semi-structured interviews allow discussion to flow naturally, whilst gathering detailed accounts of an individual's experience (Adeoye-Olatunde & Olenik, 2021; Ahlin, 2019). In line with the idiographic nature of IPA, the researcher took a flexible approach in the interviews, to enable participants to talk about what mattered to them.

Having explored research pertaining to the construction of interview schedules within IPA research, (Smith et al., 2009) the researcher drafted an interview schedule. This schedule included open-ended questions and prompts. The researcher brought this schedule to supervision with her research supervisor and necessary edits were made. A copy of the semi-structured interview schedule can be found in Appendix F. Following the interviews, the researcher re-listened to each interview, editing transcripts to add in anything that was missed and to correct any mistakes. In the consent form, participants were asked if they would like to review their transcript following completion of the researcher's thesis.

Introduction to Data Analysis

In line with IPA analysis, Table 4 identifies how the researcher systematically analysed the data, referring to the seven steps to IPA analysis (Smith & Obsorn, 2002; Smith et al., 2009; Charlick et al., 2015).

Table 4Data analysis process

Description of Stage	Process of Analysis
Step 1: Reading and rereading	 This stage involved the researcher reading and rereading each transcript. This was an important stage of familiarisation and helped the researcher understand the essence of what each participant brought to their interview. Reading and rereading the transcripts helped the researcher become fully immersed in the participant's narrative and develop a clear picture of the interview, identifying both general and specific details addressed.
Step 2: Initial noting	 Starting at the beginning of each transcript, and working through to the end, the researcher highlighted, line-by-line, her initial thoughts on the interviews. The researcher then used the comment tool on Microsoft word to indicate descriptive comments (in green) linguistic comments (in red) and conceptual comments (in blue) in the right-hand margin of the transcript (Appendix H). Descriptive comments identified key words or phrases and distinguished meaning from the words or phrases used by the participants. This helped create initial ideas. Linguistic comments identified how language was used, including repetitions, metaphor, and similes, and, in this case, language related specifically to elements of pastoral roles within schools. Conceptual comments allowed for the researcher to engage with the interview at a more interpretative level. The researcher applied an analytic process of engaging with what the participant was saying, questioning her own understanding of the meaning and the participant's indication of the meaning – which links to the double hermeneutic
Step 3: Developing emergent themes	 underpinning IPA. The researcher completed step 1 and step 2 for each transcript, analysing each individually, from beginning to end. Following line-by-line notation carried out in step 2, emergent themes were generated from these comments for each interview. Emergent themes, for each participant, were noted in a new
Step 4: Searching for connections across emergent themes, clustering these	 table (Table 6). In line with step 3, emergent themes were noted in a new table. The researcher went through emergent themes and highlighted repeated or similar themes in the same colour. This allowed for final checks and movement of emergent themes into alusters.

themes into clusters.

Step 5: Analysis of other cases

Step 6 Looking for patterns across cases.

- The researcher repeated steps 1-4 for each participant.
- Following this, themes were typed into a table for each participant (Table 9).
- A process was used to identify group superordinate and subordinate themes. This process used colour coding to cluster together individual superordinate themes for each participant (Appendix J). Abstraction, subsumption, and numeration were employed to identify group superordinate and subordinate themes. Polarisation (identifying opposites) was also employed at this stage to enable divergence to be noted within themes.
- To check the themes, the researcher identified and typed a list
 of extracts which demonstrated each theme for each
 participant (example of this Appendix K). This helped the
 researcher to reflect further and make sense of the identified
 themes.
- These extracts were then selected for the final write-up, based on telling the story of each superordinate and subordinate theme, including similarities and divergence.

Yardley (2000) presented four principles for quality in qualitative research which Smith et al. (2009) can be applied to studies using IPA. Table 5 illustrates how the researcher addressed these principles within the current IPA study.

Table 5 *Yardley's Principles and how they were applied to the current research*

Sensitivity to Context
Emphasises the
importance of
understanding the
research participants,
their experiences, and
the broader social
cultural contexts in
which the research
takes place.

Yardley's Principles

- How the current study met the criterion
- A thorough literature review was conducted, which highlighted a gap in research around the experiences of pastoral staff supporting CYP exposed to DVA.
- DVA is an emotive topic and talking about it may be challenging for some individuals. The researcher was cognisant of the sensitive nature of the topic and took measures to ensure the well-being of the participants. If a participant found the discussion too challenging, the researcher was prepared to stop the interview and provide information about appropriate support services/ agencies. Participants were reminded of their right to withdraw, should they find it too difficult discussing this topic. The researcher gave time for questions at the end and signposted participants to organisations that exist to support around issues of DVA.

Commitment and Rigour

This underscores the dedication and commitment needed to conduct high quality research.

Transparency and Coherence

This principle emphasises the importance of clear and transparent reporting that allows readers to understand the research process, rationale, and findings.

Impact and Importance Emphasis is placed on the researchers to consider the potential impact and significance of their research findings.

- The researcher was able to recruit eight participants who met the necessary criteria. Eight participants are an appropriate number for a doctorate level IPA study (Smith et al., 2009).
- An IPA approach requires the researcher to attend carefully to the participant throughout the data collection process.
- The nature of the data analysis demonstrates rigour (Smith et al., 2009). Reading, re-reading and initial noting, enables the researcher to get to know their data well and reflects the thorough approach to data analysis.
- The steps taken in analysing the data follow Smith et al.'s (2009) guidance on how to conduct IPA in a dialogical, systematic, and rigorous way and where the results can be checked by the reader (Smith et al., 2009).
- The researcher kept a reflective diary, allowing for critical reflection regarding any challenges she encountered throughout the analysis process. Some of these reflections are included in the reflective chapter.
- Each stage of the research is described within the write-up. The steps taken to analyse the data are identified in Table 4.
- Transparency related to ethical considerations has been demonstrated. Notably the researcher obtained ethical approval from the UEA School of Education and Lifelong Learning Research Ethics Committee.
- The researcher aimed to maintain the research intentions throughout.
- Attention was given to each participant's narrative individually then collectively.
- Extracts were identified for each participant for each theme and then judiciously selected to highlight concurrence and divergence within themes, in line with recommendations from Smith et al. (2009).
- A coherent argument followed from the identification of the research area, to developing an interview schedule and questions, to analysing the data and discussing the findings.
- The study has implications for pastoral professionals, as well as other educational professionals working both within schools and as external agencies that support schools, including EPs.
- The study addresses a gap in the current literature, and it is one of the few qualitative studies in this area.
- The reflective chapter highlights a commitment to dissemination of this work.

A tenet of IPA is that it is participant-led (Noon, 2018). As such, the researcher took care to adopt words and terms used by the participants, to express their voice in the findings, and to ensure the interpretative process was led by the participant and not the researcher.

Therefore, depending on whether the participant used the term 'domestic violence' or 'domestic abuse' this is reflected in the data analysis to maintain the participant's own voice.

Data Analysis

Table 6 presents a summary of the superordinate themes, with associated subordinate themes, generated by the author for each interviewee Each participant's interview generated between five to eight superordinate themes.

Table 6Overview of themes for each pseudonymised participant

-	Overview of themes for each pseudonymised participant
Name	
Jay	Interpersonal Qualities
	Resilience, communicate with a variety of people, responsibility
	Multi-faceted role
	Support parents with SEMH needs
	External agencies involvement
	Communication with external support, working with local authority, drawing on knowledge
	Reflective Practitioner
	Allowing time to consider how to support
	Interventions Applied
	Specific and general
Ciara	Trauma based approach
	Trauma Informed Practice
	Interpersonal Qualities
	Consistent, emotionally available, able to set boundaries
	Awareness of Safeguarding
	Training knowledge
	Communication with parents
	Communication during meetings, difficult conversations
	Limitations due to external agency roles and Collaboration with external
	agencies
	Refer to other agencies, social care referrals
Rita	Trauma based approach
Kita	trauma informed context
	Interpersonal Qualities
	Caring, personal experiences
	Parent engagement
	Parent groups, relationships with parents' knowledge
	Resources and interventions
	Worry box
	, , , , , , , , , , , , , , , , , , ,

Awareness of Safeguarding

Privacy, safeguarding rules, contact orders

Ivy Understanding of impact of experiencing Trauma

Awareness of trauma response

Interpersonal Qualities

Patience, understanding, compassion, communication skills

Awareness of role boundaries

Different roles of schools' professionals

Awareness of Safeguarding

Difficult conversations, information privacy, respect

Variation in role

Providing mentoring, making, referrals to and work with other agencies, communication and collaborating with parents,

Environmental factors School as a safe place

Edie Understanding the impact of experiencing trauma (e.g., D.V)

Applying the Trauma Informed Practice ethos of the school

Interpersonal qualities

Good organisation, empathetic, knowledgeable

Multi-faceted pastoral

Responsibilities and variety within role Coordinated support for CYP, different adults support CYP with different things, support colleagues

liaison with different agencies

Parent engagement

Awareness of things going on outside school, whether parents support you to support their child

Role boundaries

Feelings of powerlessness

Support for complex SEMH needs

Dysregulations, disruptive and dangerous behaviours

Environmental factors

School as a safe place, opposite to home which may feel unsafe

Mel Awareness of Safeguarding

Policies, guidelines within the school

Interpersonal qualities

Confidence, empathy

Variety of role

Communication with parents, communication with different organisations

Confidentiality and safeguarding

Information privacy

Recognition of external support

Knowing what is out there

Reflection on role

Flexibility and having the skills to adapt, consideration for cultural differences

Zara Understanding the impact of experiencing trauma (e.g., D.V)

CYP can 'trauma dump', understanding complex trauma, Trauma Informed Practice

Understanding of mental health

Understanding the interaction between safeguarding needs and SEMH needs, understanding mental health

Environmental support

Safe space, neutral space

Awareness of Safeguarding

Safeguarding role

Interpersonal Qualities

Reflective, therapeutic skills, expertise

Challenges faced within the variation of work

Responsibilities change, uncertainty of what the day may bring limited time

Following steps for successful integration (Palmer et al., 2010), the researcher applied the iterative and hermeneutic processes involved in IPA to compare and recognise similarities across themes. Superordinate themes were carried forward if they were present in five or more of the eight interviews, developing a taxonomy of superordinate themes (Love et al., 2020). The researcher reduced the data into four final superordinate themes, presented in Table 7. When evaluating the superordinate and subordinate themes laid out in Table 6, the researcher identified that only three superordinate themes were not included in Table 7. The excluded themes related to the complexity of work, reflective practice, and role boundaries. The researcher felt these three themes were acknowledged within the final themes and thus were not considered necessary to be individual themes. The complexity of work is integrated into the multifaceted nature of pastoral responsibilities, role boundaries are encompassed within the broader context of ethical considerations and professional conduct, linked to safeguarding awareness, and reflective practice is embedded in the theme addressing interpersonal qualities.

Table 7 includes subordinate themes associated with the final superordinate themes, these are used to structure the exploration and examination of superordinate themes in the data analysis. An inductive approach was used to qualitatively analyse data.

Table 7Overview of superordinate and subordinate themes identified within this study.

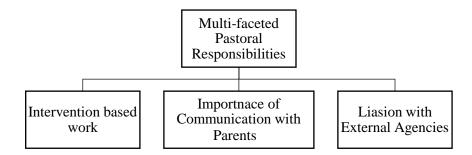
Superordinate themes	Subordinate themes
Multi-faceted Pastoral Responsibilities	Intervention based work The importance of Communication with Parents
	Liaison with External Agencies
Importance of Awareness of Safeguarding	Interconnected Pastoral and Safeguarding Roles Information Privacy
	Safeguarding Training
Understanding the impact on experiencing	Promoting a Sense of Safety for CYP
Trauma (e.g., D.V)	Trauma Based Approach and Ethos
Interpersonal Qualities	The Role of Practical skills
	The Role of Relational skills

Superordinate Theme: Multi-faceted Pastoral responsibilities

The first superordinate theme focused on participants' understanding related to the variety of responsibilities that fall under their pastoral role. Within this superordinate theme, three subordinate themes were identified. The first subordinate theme reflected the nature of direct intervention-based work with CYP. The second subordinate theme identified the importance participants placed on communication with parents. The final subordinate theme highlighted the necessity of consulting with external agencies that help support CYP exposed to DVA. Figure 3 provides an overview of the first superordinate theme and the associated subordinate themes.

Figure 3

Overview of Multi-faceted Pastoral Responsibilities



Multi-faceted Pastoral Responsibilities: Participants were asked to provide a brief description of their role (Table 1). Although participants did not explicitly state that they undertake multiple responsibilities, it was clear from their explanations and the broader discussions that their roles encompass a range of duties, including, intervention-based work, communicating with parents, liaising with external agencies. Table 8 signifies the number of participants who recognised the subordinate themes as part of their roles.

Table 8

Table showing number of references to subordinate themes related to multi-faceted Responsibilities

Subordinate theme	Jay	Rita	Ciara	Jon	Ivy	Mel	Edie	Zara
Intervention based work	X	X	X	X	X			
Importance of Communication with parents	X	X	X	X	X	X	X	X
Liaison with external agencies	X		X	X	X	X	X	X

Intervention based work: Five participants indicated that their pastoral duties involve either organising interventions for CYP to access or facilitating interventions to support CYP. Jon talked about his role in finding 'some kind of intervention that's going to work' and what he feels is needed to do so. Similarly, Mel reported how 'you try and put interventions in place that are going to work for them in their circumstance' both Mel and Jon stated, 'going to work' emphasising the importance they place on the intervention being successful and 'working'. Jon developed this, explaining that the 'right' intervention needs to be found for each CYP, Jon clarified that to find the 'right' intervention, it is important to have a 'clear mind' and an

'understanding of what the underlying issue is'. Mel discussed that interventions 'won't always be the same' for each child, while some children 'don't want to talk' about what they are experiencing and just want to 'get on with their schoolwork', other children want and may benefit from tailored interventions to support their needs. Both Jon and Mel recognised the value of child -led interventions when organising and delivering intervention-based work. Other participants referenced specific, effective interventions that they have put in place to support CYP who may be exposed to DVA, including, 'Worry Box', 'Drawing and Talking' 'Zones of Regulation' and 'Lego Therapy'. From the researcher's perspective, interventions appeared to be creative and therapeutic based.

Importance of Communication with Parents: All eight participants highlighted the importance of communicating with parents as part of their role. Bronfenbrenner identifies parents as integral to a child's microsystem—the innermost level of a child's environment (Bronfenbrenner, 1979). School staff are also included in this microsystem. Relationships and interactions within the microsystem are bidirectional and significantly influence a child's development. Consequently, communication between pastoral staff and parents is vital. Jay emphasised his thoughts about this communication stating, 'I think it's increasingly important the parent role'. Both Rita and Jon specified their role in supporting parents, Jon emphasised that 'I'm having to support more parents than ever [had] before', he indicated this support is facilitated through 'meetings' whereby 'we can offer advice'. Rita, referred to supporting parents through developing a relationship with them, she stated, 'I build up a relationship'. Rita went on to share that investing in these relationships enables a collaborative approach to be taken, stating she feels better able 'to help them [parents] because you're working altogether as a team'. Rita also indicated connecting with parents and then providing support for parents at a group level, through 'a parent group...like a parent coffee morning, where actually you can get to know the parents that you're working with the children. So, it all becomes a conjoined thing'. Mel highlighted that collaborating with parents can have a positive impact on their child, as 'then the children see that they have been valued', Mel emphasised this further, expressing that these relationships have 'been very positive'. Mel separately reflected on using her personal experience of DVA to provide support for a parent 'I was helping her through which was very very rewarding' Mel's repetition of 'very' communicates the value she places on her work. In her interview, Ciara also referred to her personal experience of DVA and how it has contributed to her deeper understanding when supporting CYP exposed to DVA.

Having acknowledged participants' recognition of investing in parent relationships, the researcher proceeded to note challenges identified by other participants regarding these relationships. Jon discussed the 'difficulty in getting parents to understand' what their child may be communicating, whilst Ciara emphasised some of the barriers in her work, include forming relationships with parents, she stated 'barriers are parent relationships. It's hard to build a relationship with the parent if they aren't accepting of what is going on'. Interviewees identified that without understanding or acceptance that DVA is taking place, it can be challenging to communicate with parents. Edie established that barriers to effective work may relate to 'how much the family themselves [umm] are supporting you to support their child', which can of course be challenging if the family have not accepted the issues. Based on the barriers identified, Ciara reflected on needing certain skills to manage parent relationships, because 'there are some meetings that we sit and play off against each other and it's quite difficult'. Ivy contemplated some of the more practical challenges around communication with parents, relating to the sensitive nature of DVA and the boundaries around professional roles, referring to the need to be 'discreet' and not 'delve deep'.

Ultimately, participants value communication with parents and their role in supporting them. Participants also reflected on the potential challenges and sensitivities involved in discussing DVA with parents, acknowledging the significant impact these factors have on effective communication.

Liaison with external agencies: Having explored the importance of communication with parents, participants demonstrated a clear understanding of the support external agencies can provide CYP exposed to DVA. Jay referenced the involvement of 'an external agency' for two children exposed to DVA, similarly Mel referred to 'external agencies involved' and Zara made specific reference to social care agencies and professionals such as a 'Child Protection Officer' and a 'Team Around the Family Manager'. Participants also expressed recognition of the support provided by external agencies, consequently enabling them to provide better support for CYP. Jon referred to types of external support, for example, attending 'external training' and the 'Domestic Abuse conference' which he described as 'really interesting and eye-opening'. He also talked about the supervision he receives from a 'trained Counsellor' where he can 'offload about how x,y,z have affected me and also discuss the complexity of certain cases'. Jon shared how 'helpful and useful' these supervisions are and how they empower him to better support CYP. The role of external agencies was further emphasised by Edie who acknowledged the fact that schools cannot support CYP who have witnessed DVA

on their own. She pointed out that that these children, who present with a range of needs, will benefit from support beyond what their school can offer.

Edie stated: 'a school can't make a difference on its own even with you know all the training that people have had because sometimes the needs of the children that have witnessed those things, their SEMH needs are so high often resulting in, you know, a lot, a lot of dysregulations, a lot of very disruptive and dangerous behaviour, a lot of violence towards staff and other pupils'.

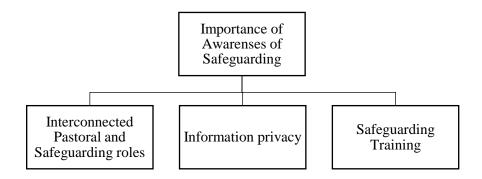
It is interesting to note Edie's repetition of the phrase 'you know', which the researcher interpreted to indicate Edie's assumption that the researcher understood the intricacies of Edie's descriptions. The researcher speculated that this assumption could be attributed to the researcher's dual role as a researcher and Trainee EP (TEP), with the latter role suggesting a broader understanding of the issues discussed. Similarly, to Edie, Ivy commented that sometimes children require 'more intensive specialist support' and if necessary Ivy shared that she 'would refer to another agency'. Ivy acknowledged that while pastoral staff may not delve deeply into a child's experience, they can serve as a valuable 'sounding board'. In contrast, Edie expressed frustration, noting that despite feeling confident in some respects, she also felt quite powerless because the school's capabilities are limited, stating: 'confidence, at the same time, in some respects [I feel] quite powerless because as a school there's only so much, we can do'. This emphasises the importance of external agencies in providing support.

Superordinate Theme: Importance of Awareness of Safeguarding

The second superordinate theme focused on how participants understand their responsibility of safeguarding. This superordinate theme was made up of three subordinate themes. The first subordinate theme discussed the interconnection between pastoral responsibilities and safeguarding duties undertaken by the participants. The second subordinate theme focused on the importance of information privacy and related limitations. The final subordinate theme identified the compulsory nature of safeguarding training. An overview of this superordinate theme is shown in Figure 4.

Figure 4

Overview of Awareness of Safeguarding



Importance of Awareness of Safeguarding: This superordinate theme was referred to across all eight interviews. Several of the interviewees were the 'Designated Safeguarding Lead' in their schools and held this role alongside their pastoral responsibilities. All but one of the participants acknowledged some of the limitations around keeping information private, and the potential constraints related to their varying levels of awareness of a child's home life. Most participants mentioned attended safeguarding training, with some having attended Level 3, which addresses DVA. Table 9 signifies the number of participants that referred to these subordinate themes.

Table 9Table showing number of references to subordinate themes related to Importance of Awareness of Safeguarding

Subordinate theme	Jay	Rita	Ciara	Jon	Ivy	Mel	Edie	Zara
Interconnected Pastoral and Safeguarding roles	X	X		X	X	X		X
Information privacy	X	X	X	X	X	X		X
Safeguarding training		X	X	X		X		X

Interconnected Pastoral and Safeguarding Roles: Jon, Ivy and Zara denoted their dual responsibilities, which encompass both their pastoral role and their safeguarding duties.

Regarding their professional titles, Jon specified that his 'professional title is Deputy Head Teacher and I'm also the Designated Safeguarding Lead'. Following this Jon referred to some of his safeguarding responsibilities, including 'attending meetings' and having discussions around the 'more serious safeguarding concerns and some of those might include domestic abuse'. Similarly, Ivy shared that 'SENCo is one of my roles but I am also one of the Designated Safeguarding Leads' and Zara stated, 'I'm like the main Safeguarding Lead, having that overview of both safeguarding and mental health'. Zara went on to highlight that this overview involves her thinking about how safeguarding and mental health 'interact'. The participants all emphasised the importance of following safeguarding rules and policies. Both Mel and Jay reflected on ensuring that the CYP they support know that what they share is 'confidential', whilst recognising and explaining to CYP that any safeguarding concerns must be shared with relevant safeguarding leads. Mel stated, 'I mean we've got policies...we have to follow and which I'm aware of'. Rita and Mel further confirmed this understanding, referring to the Child Protection Online Monitoring System (CPOMS), the safeguarding and wellbeing software used by schools to monitor child protection, safeguarding, pastoral and welfare issues.

Information Privacy: As identified in the first subordinate theme, 'Interconnected Pastoral and Safeguarding Roles', participants demonstrated an understanding of the importance of following rules and procedures. This understanding is closely related to the second subordinate theme of 'information privacy'. However, this subordinate theme mainly focused on participants' reflections on the boundaries associated with sharing information and the impact of this. Rita explained that she does not necessarily know the background of the CYP she works with, 'a lot of staff won't be privy to their background information, myself included'. This quote resonates with findings from Berger and Davies' (2019) research, which explored teachers' experiences in supporting students exposed to DV. Their data analysis generated the theme, 'privacy and confidentiality' whereby a participant stated, 'I wasn't really privy to much information to start with, which I found very difficult'. This finding affirms the challenges participants shared regarding information privacy. Having recognised that she may not know a child's background information, Rita went on to indicate that she therefore will not 'necessarily know all of the trauma a child has experienced'. From Rita's choice of words, the researcher interpreted that while Rita may not be privy to 'all of' a child's experiences, she may have knowledge of some of their experiences.

Ciara also reflected on the implications of information privacy and the boundaries surrounding professionals' knowledge about certain children. She shared that when she was a

teacher, (prior to her current role as Associate Head Teacher), she often would not have been aware of which students in her class were 'exposed to domestic violence'. This aligns with findings from the literature review that teachers may not always have comprehensive knowledge of the trauma experienced by the CYP they teach or work with – an important consideration. However, Jay presented an alternative viewpoint, and reflected on her experience respecting privacy. She indicated that she is less bothered as she does not want to 'encroach[ing] on families and children's privacy'. These alternative perspectives generated from the narratives are indicative of the complexity of the research topic.

Safeguarding Training: UK based research and legislation signals the mandatory nature of safeguarding training for staff in schools. In line with this, all participants reported having attended safeguarding training, Mel specifically mentioned attending 'regular annual safeguarding training'. While every school professional is required to attend safeguarding training, various levels and types of training exist. Most of the participants in the present study had attended general safeguarding training, instead of specific DVA training, with some participants indicating that this general training acknowledges DVA. Rita commented that a although she has attended safeguarding training, she feels that she needs more specific training about how recognise DVA and how to respond to reports of DVA, stating:

Rita: 'So we have our safeguarding training every year and we have our trauma informed training and a lot of the times we will focus and sexual behaviour training and prevent and things like that.... More training on specific the abuse of children like we do it in safeguarding, but I don't think there's necessarily anything on how you, how you react to them or how you talk to them about what you recognise, isn't it? And reporting, I guess'.

In terms of the various levels of training, the tenses used in the narratives indicated that while some participants had already attended Level 3 Safeguarding Training, others were scheduled to attend. For example, Ciara shared that she "will be going on safeguarding Level 3 at some point," whereas Zara referred to having already attended Level 3 Safeguarding Training, saying, "I had to do my Level 3 safeguarding." Further, Jon acknowledged that more serious concerns around safeguarding may relate to DVA and noted that this topic is addressed during Level 3 Safeguarding Training.

Jon: 'Because we need to discuss the kind of more serious safeguarding concerns and some of those concerns might include domestic abuse ...So we we've done sort of

generic training like domestic abuse training by local leads or we have us, I have safeguarding, training and lots of my colleagues have Level 3 safeguarding training and that is delivered by the local authority that encompasses all of those aspects that we have to deal with that are more unpleasant. You know, domestic abuse, trauma... '

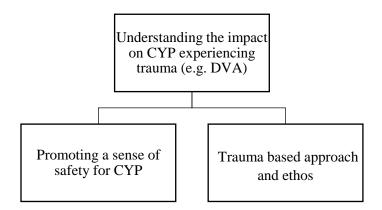
Although not specifically addressed in the interviews, Level 3 Safeguarding Training is usually attended by Designated Safeguarding Leads (DSLs) or those in roles with designated safeguarding responsibilities. It therefore makes sense that Zara and Jon had attended Level 3 Safeguarding Training, as they undertake specific safeguarding roles at their schools. Level 3 Safeguarding Training appears to cover DVA in significant depth and includes, understanding and recognising DVA, responding to concerns and disclosures, supporting CYP affected by DVA, working with families and perpetrators. However, it does not solely focus on DVA, as such both Zara and Jon expressed a desire for training specifically tailored to addressing DVA. This sentiment was echoed by Jay who noted, 'I've never really had any training on domestic abuse' indicating a feeling of inadequacy due to lack of training in this area, stating. Jay further stated, 'so I would be held back by my lack of training in that area'.

Superordinate theme: Understanding the Impact of Children and Young People Experiencing Trauma (e.g., DVA)

The third superordinate theme considered participants' understanding of the impact of CYP experiencing trauma (e.g., DVA) and included two subordinate themes. The first subordinate theme was concerned with promoting a sense of safety for CYP, and the second subordinate theme related to the application of a trauma-based approach and ethos within educational settings. An overview of this superordinate theme is shown in Figure 5.

Figure 5

Overview of Understanding of the impact on experiencing trauma (e.g., DVA)



Understanding the impact on Children and Young People experiencing trauma

(e.g., DVA): This superordinate theme emphasises the crucial role of pastoral staff in comprehending a CYP's experience of trauma, specifically focusing on DVA and the impact this can have on a CYP. Witnessing DVA is inherently traumatic for CYP, as it exposes them to frightening and unpredictable events that threaten their sense of safety and security (Bowlby, 1969). Participants recognised how exposure to trauma can adversely affect CYP. Participants also recognised their role in promoting a sense of safety for CYP and applying a trauma-based approach and ethos to their practice. Table 10 presents the number of participants that referred to these subordinate themes.

Table 10Table showing number of references to subordinate themes related to Understanding the impact of experiencing trauma

Subordinate	Jay	Rita	Ciara	Jon	Ivy	Mel	Edie	Zara
theme								
Promoting a sense of safety for CYP		X	X		X		X	X
Trauma based approach and ethos		X	X	X	X		X	X

Promoting a sense of safety for CYP: Witnessing DVA is a traumatic experience that can negatively affect a child. Participants acknowledged the importance of providing 'emotional

containment', as stated by Jay, by creating a safe and stable environment for CYP to alleviate some of the adversities they experience. Edie recognised that some CYP may see 'school as the safe place rather than home', repeating for emphasis that 'school is the safe place' for CYP. This repetition highlights the value Edie places on creating a sense of safety for CYP, especially those exposed to adversity at home. Similarly, Ivy discerned that for some CYP, 'we are their safe space', suggesting that she feels she is not supporting CYP alone but together with her learning mentor team. Ivy hoped that promoting a sense of safety for CYP would enable them to feel more comfortable discussing the challenges they may face:

Ivy: 'we want them to feel comfortable with us if they feel they want to do discuss something...we just want them to feel relaxed and with us here and feel secure..... it's about them feeling comfortable enough so that they feel they can say those things'

Zara expressed a similar view, presenting an awareness that for CYP to share their experiences they need to feel safe first, Zara said: 'for the space that I hold for them, they feel that it is a safe enough space to just share in grave detail around the kind of things that they have witnessed'.

The researcher felt that Zara's choice of words was particularly telling, for example 'grave detail' emphasises the seriousness of what CYP may have shared with Zara. Rita also discussed promoting a sense of safety, acknowledging the idea of being a 'safe person' for a child and noting 'I feel like I can make them feel safe'. Additionally, Rita stressed that for CYP to feel safe and comfortable enough to share personal or challenging experiences they need to feel supported. She described her approach, 'the most important thing that I try to do first, is to build a relationship and rapport with them'. Rita explained that through building this relationship she can become the child's 'safe person', further stating 'if you're not the safe person, then they're not going to trust you'. Overall, the participants demonstrated an understanding of CYP's experiences of trauma, specifically highlighting that CYP will be more receptive to support if they feel safe. Moreover, in discussing this subordinate theme, participants also referred to the physical 'space' they create for CYP, through using pictures, cushions, blankets, and fidget toys – all which can support children's emotional regulation.

Trauma based approach and ethos: Several schools within the LA, where the participants work, adopt a TIP approach. This approach helps professionals to understand and

support pupils who have experienced trauma. Many of the participants discussed their experiences in applying trauma-based approaches and promoting a trauma-based ethos within their schools, and across their practice. Participants talked about how they implement TIP across their practice and assist colleagues in understanding how to apply TIP in their work, to support CYP who have experienced trauma. In her interview, Mel asked the researcher, 'Do you know trauma-informed?' and then added, 'I'm supposed to implement that with the staff as well'. Mel described how she teaches trauma-based approaches to 'the Learning Support Assistants' and supports them develop their understanding trauma and building relationships. Zara shared how her school is 'trying to be a TIP school', noting that many children in her school have 'complex trauma'. Zara explained that she, along with her colleagues, are 'teaching staff to understand this is why this person acts like this'. Jon mentioned working with CYP who have experienced 'significant trauma... they have suffered domestic abuse that once again is a trauma'. He added that CYP in his school present with a 'range of issues or traumas' and that 'we deal with everything'. To support this, Jon shared that he promotes TIP training for all staff at his school.

Jon: 'to help teachers understand how CYP who have experienced trauma may present, all teachers [should] be TIP trained, so that they understand the way in which children present could be an indication of potential trauma'.

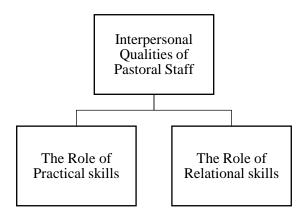
In summary, this superordinate theme indicates participants' awareness of the various, significant, and complex traumas CYP in their care have and continue to experience. Consequently, participants accounts share how they seek to implement, and encourage colleagues to implement, TIP in their practice.

Superordinate theme: Interpersonal Qualities of Pastoral Staff

The final superordinate theme generated was interpersonal qualities of pastoral staff. This superordinate theme is divided into two subordinate themes. The first subordinate theme is related to the role of practical skills and the second subordinate theme related to the role of relational skills. An overview of this subordinate theme is presented in Figure 6.

Figure 6

Overview of Interpersonal Qualities of Pastoral Staff



Interpersonal Qualities of Pastoral Staff: The final superordinate theme captures the diverse skills and attributes that help pastoral staff fulfil their responsibilities effectively, providing appropriate support for CYP exposed to DVA. There was a sense that both practical skills, including flexibility in approach, and relational skills, including interacting with others to build more fulfilling and constructive relationships and demonstrating reflective practice are important. Table 11 signifies the number of participants that referred to these subordinate themes.

Table 11Table showing number of references to subordinate themes related to Interpersonal Qualities of Pastoral Staff

Subordinate theme	Jay	Rita	Ciara	Jon	Ivy	Mel	Edie	Zara
The Role of Practical Skills	Х		X	Х	X		Х	Х
The Role of Relational Skills	X	X	X	X	X	X	X	X

The Role of Practical Skills: When exploring the role of practical skills involved in supporting CYP exposed to DVA, some participants referred to the importance of being able to

adapt, and problem-solve, to fit the specific needs of the child. Jon expressed that 'you just need the skills to adapt to each case' and 'the short answer is there is no one-size -fits-all'. He further explained, 'it is always done on a case-by-case basis, and we would want to ensure that the support that's given is right for that particular child'. Mel similarly described how 'there isn't a right and a wrong and there isn't a set pattern' and that 'it's having the flexibility to adapt because there isn't step one, step two step three'. Similarly, Edie talked about being flexible in her approach 'you need to have a very open mind and think outside the box a lot in a lot of situations'. Jay agreed that her approach may change depending on the situation at hand, especially because as school SENCo she deals with 'different level of staffing, knowledge and confidence' which requires her to adapt her approach.

Other practical skills identified included 'problem-solving', which Edie shared helps her support CYP effectively. Mel recognised the need to be 'current', particularly with regards to training and policies, to ensure that the most effective support is being provided. Separately, Ivy and Jay reflected on the importance of being organised, Jay noted, 'you have to be incredibly organised in terms of just knowing what you are doing when', Jay later added that you need to be 'very clear'. Edie echoed the need for 'good organisation' and Ciara explained that being organised is helpful for 'managing adults' and for 'sending consistent messages'.

Ciara further stated: 'it's a lot of demonstrating expectations, teaching students the expectations. A lot of our students come from homes where perhaps they don't have boundaries. So, it's about teaching them our boundaries. Sometimes the behaviour needs to be taught to these students. They don't understand. If you just tell them how to behave, you have to teach them how to behave. Our students need consistency. That's a huge thing in our in our school. So, we try to send the same messages and I teach staff to send and train staff on sending the same messages to students. Even the vocabulary that we use, we assist staff to use a certain vocabulary, a certain language with the students'.

The use of verbs in this extract, including 'to teach', 'to try' 'send the same messages 'train staff', 'assist' indicates the active role Ciara plays in supporting colleagues and CYP. These actions denote the need for practical-based skills, seemingly essential for pastoral staff to effectively fulfil their roles. The researcher's interpretation is that these skills link to each superordinate theme. For instance, practical skills are necessary to manage multi-faceted pastoral responsibilities, navigate safeguarding protocols, understand, and address the impact

of trauma. Practical skills form the foundation that enable pastoral staff to integrate and apply the theoretical and procedural knowledge needed in their roles, ensuring comprehensive and effective support for CYP exposed to DVA.

The Role of Relational Skills: Relational skills can be understood as the interactions between individuals to build fulfilling and constructive relationships. All eight participants reflected upon the relational skills they use to support CYP exposed to DVA. Jay, the first to be interviewed, highlighted the need for an 'awful lot of people skills and resilience'. The researcher identified participants' reflections on using their relational skills in a therapeutic way, to support well-being. Jon discussed working with CYP in a 'supportive therapeutic way' and emphasised how this helps him to 'build a therapeutic relationship' with CYP at his school.

Stein (1964) as cited in Van Dijke et al (2020) explained that it is through empathy that people connect with other's experiential world and "experience foreign consciousness". Reflecting on this, the researcher acknowledged that multiple participants discussed the significance of being empathetic, which facilitates understanding and connection with others. Jon stated the importance of 'an ability to empathise or at least sympathise,' while Ciara mentioned that 'a lot of empathy' is needed in her pastoral role. Edie agreed, affirming that you need 'empathy', a sentiment further echoed by Mel, who, when asked what skills she felt were necessary in her role, answered, 'empathy without doubt'.

Rita and Ivy identified different but interconnected relational concepts that involve understanding, responding to, and supporting the emotional needs of others. Rita indicated the importance of being 'kind, compassionate and caring', and Ivy reflected on the importance of 'patience', 'understanding', and 'compassion' as important attributes that help pastoral staff connect with others and fulfil their roles. Ivy highlighted that these attributes are valued as 'you are going to have very difficult conversations with people at times' and felt that these skills would help during those conversations. Edie also identified the need for pastoral staff to be 'very open to dialogue', as they are likely to facilitate or be present during some challenging discussions with pupils, parents, and school staff.

Two of the participants discussed the importance of reflection and shared that being reflective helps them to develop their relational skills. Ciara reflected on 'my own experiences', stating that her experiences, from her childhood have helped her in providing a 'caring role' and her understanding of others' situations. Having these reflections and demonstrating this self-awareness, appear to have contributed to Ciara's confidence in her role. The researcher felt

that the language Ciara used, for example, 'trying to unpick', 'trying to understand' and the 'need to consider' indicates Ciara's thoughtfulness and use of insight as she relates to her pastoral responsibilities and experiences. Similarly, Zara emphasised the importance of reflective practice stating, 'understanding how to reflect back' and not 'putting our own views on situations' is important. Zara went on to discuss how she uses rhetorical questioning and tries to encourage others to be reflective through asking questions such as 'how do you feel about that rather than...commenting personal views'. Further, Zara shared that her ability to be reflective and encourage reflection comes from her own 'therapeutic background'.

Further, participants identified the significance of resilience. Jay and Ivy indicated that their own resilience has helped them to support CYP exposed to DVA. Jon reflected on his response when hearing some of the traumatic experiences of CYP and shared that his own resilience is essential for him to be able to provide effective support for these CYP.

Jon explained: 'When you hear about some of the traumatic things that kids are going through. I think there's got to be a bit of your spine that's made of steel sometimes so that you can, you know, you don't suddenly collapse and go, oh my god oh, because the reality is, you know, you're, you know, in my case, I'm the one that's got to try and find some kind of intervention that's going to work. And in order to do that, I have to try and do so. With a clear mind, with an understanding of what the underlying issue is'.

Jon also described that 'a sense of humour' can also help, 'to find light in sometimes quite dark situations'. The researcher reflected that this is powerful statement indicating the impact pastoral staff can make. In summary, the final superordinate theme, is divided into two subordinate themes to highlight the importance of both practical and relational skills used by pastoral staff, to support CYP exposed to DVA. Practical skills may involve taking an adaptive, active approach and problem-solving, where necessary. Relational skills involve connecting with others, demonstrating empathy and resilience, as well as being a reflective practitioner.

Summary of Findings

As outlined, following data analysis, four superordinate themes and ten subordinate themes were identified. The superordinate themes included, multi-faceted pastoral responsibilities, awareness of safeguarding, understanding the impact of experiencing trauma e.g., DVA and interpersonal qualities of pastoral staff. These themes were discussed alongside associated subordinate themes, helping to clarify the experiences of pastoral staff supporting

CYP exposed to DVA. The analysis provides a nuanced understanding of pastoral staff's day-to-day interactions and the related challenges.

Discussion

This research explored the experiences of pastoral staff supporting CYP exposed to DVA. It aimed to address the research question *What are the experiences of pastoral staff working with CYP, who are or have previously been, exposed to DVA?* IPA was used to approach the research and led to the identification of four superordinate themes. This discussion will review the findings.

Multi-faceted Pastoral Responsibilities

The first superordinate theme identified the multiple responsibilities undertaken by pastoral staff, emerging across all eight interviews. Participants were asked to provide a 'brief description of their role', although no participant explicitly stated they undertake multiple responsibilities, the variety of tasks mentioned highlighted this reality. Literature confirms this, underscoring the increasing expectations placed on school staff in general, and highlighting perceptions of work-related stress among primary and secondary school staff, caused by multiple demands and expectations (Doyle and Jones, 2013; Lupton and Thomas, 2018; Ofsted, 2019). Subordinate themes detailed some of these responsibilities - intervention based work, communication with parents and liaison with external agencies. The researcher specifically acknowledged reflections related to the benefits of communicating with parents. These findings are consistent with Jessiman. et al's (2022) research on parents' views around the importance of support from pastoral staff. Jessiman et al.'s (2022) findings referred to parents' praise for pastoral staff, noting how they were responsive and skilled in supporting both student and parental needs. Confirming research from Pomerantz et al. (2007) discerns the positive impact that communication between parents and pastoral staff can have on CYP. Their research found that strong partnerships between school staff and parents contribute to the social and emotional development of children (Pomerantz et al., 2007). When parents and school staff work together to create a supportive environment, children feel more connected and secure, which can improve self-esteem, resilience, and overall wellbeing (Burton & Goodman, 2011; Fantuzzo et al., 2004). A unique finding from the current study is its detailed exploration of the specific methods used to communicate with parents, beyond recognising the importance of such communication. Participants highlighted various strategies such as 'coffee mornings', 'parent groups', and 'one-to-one meetings' as ways to foster relationships with parents. While teachers often have structured opportunities to develop relationships with parents, such as parent

evenings, this study illuminates the proactive role pastoral staff need to take in nurturing connections with parents. This focus on the practical, day-to-day methods pastoral staff use to engage with parents is a distinctive and valuable contribution of this research, offering deeper insights into the relational dynamics between pastoral staff and parents.

Liaison with external agencies was identified as another subordinate theme. Participants referenced accessing specialist support, expertise, resources, training and interventions from LA agencies and multi-agency professionals. Research promotes the importance of communicating with and accessing support from various systems around the child (Bronfenbrenner, 1979), including multiagency professionals (Carr-Jones, 2021). Noel (2013) emphasises the importance of referring serious problems to experts who can help, confirming the narratives in the present study. The researcher hypothesised whether the emphasis on external agencies may be related to a lack of confidence in responding to needs (Ellis, 2012; 2018; Gallagher, 2014; Stanley et al., 2015). This could potentially be attributed to limited training for frontline workers, such as pastoral staff themselves.

Importance of Awareness of Safeguarding

The second superordinate theme was centred around experiences of safeguarding. Three of the interviewees were the DSLs for their schools. Although safeguarding duties appeared interconnected with participants' pastoral roles, they are not synonymous. Limitations around information privacy, in line with safeguarding protocols, and safeguarding training were included within this superordinate theme as well.

While existing literature has examined the lack of clarity surrounding pastoral roles, it has not focused on the intricate link between pastoral roles and safeguarding responsibilities. This study uniquely highlights the interconnectedness between pastoral and safeguarding duties, further emphasising the multifaceted nature of pastoral professionals' work, identified by the first superordinate theme. The researcher reflected on the comparison between the interconnectedness of pastoral and safeguarding duties and the notion of 'Skill Flexibility'. 'Skill Flexibility,' as defined by Atkinson (1984), involves mastering various skills and seamlessly transitioning between distinct roles as needed. The researcher felt that participants' accounts indicate their proficiency in this area. Additionally, organisation is needed to demonstrate 'Skill Flexibility,' aligning with the subordinate theme 'The Importance of Practical-Based Skills', whereby multiple participants referred to the importance of being organised.

Considering how schools' benefit from professionals demonstrating 'Skill Flexibility,' the researcher reflected on research from Rosenblatt and Inbal (1999), suggesting that holding multiple titles can enhance efficiency in human resource management, especially in smaller schools. This also has economic advantages. Smaller and perhaps more intimate schools may provide existing staff with more opportunities to assume various roles (Rosenblatt, 2001). However, in the current study, Jon, and Zara, who held the roles of DSL and consequently undertook most safeguarding responsibilities in their schools worked in secondary schools. The researcher hypothesised that professionals in larger secondary schools might undertake multiple responsibilities within the same domain, such as managing several pastoral roles or multiple learning responsibilities. In contrast, the researcher speculated that in smaller primary schools, professionals might take on various responsibilities across different domains. For instance, a staff member might cover both pastoral and learning duties.

Navigating the balance between confidentiality, safeguarding, and information sharing poses significant challenges for professionals working with CYP exposed to DVA. Confidentiality and privacy of CYP information is a complex issue, grounded in legal and ethical frameworks such as the Data Protection Act (2018), which governs the collection, use, and disclosure of personal data. It also includes rules for schools related to legislation compliance and meeting safeguarding measures. While interviewees did not explore the complexities of relevant legal frameworks and legislation in detail, they presented an understanding of 'confidentiality' and meeting safeguarding measures. Further, participants expressed frustration related to not being privy to certain information about a child or not being able to share personal information pertaining to a child with colleagues. Additionally, participants expressed wanting to respect family privacy. This links to research from Duffet et al. (2005) which explores ethical considerations involved in information sharing. Duffet et al explore the delicate balance between safeguarding a child's best interests, respecting family privacy, and mitigating potential harm from disclosure. As such, the researcher reflected on the importance of school professionals' being familiar with the guidance "Keeping Children Safe in Education" (KCSIE, 2023), as this outlines relevant principles for information sharing, including proportionality, necessity, and parental consent.

All participants reported having attended some form of safeguarding training. This was anticipated by the researcher as safeguarding training is mandated by law and statutory guidance in the UK for all school staff (KCSIE, 2014, 2021). Safeguarding training enables early recognition and intervention, essential for safeguarding CYP and preventing further harm

(Sidebotham et al., 2018). This is established by equipping individuals with knowledge and awareness of child protection issues, including recognising signs of abuse, neglect, and exploitation. Moving from early recognition to effective response, safeguarding training also helps staff, especially those in safeguarding roles, learn effective and appropriate ways to respond to concerns and disclosures from CYP. Professionals' responses to safeguarding cases may include referral to support services and intervention provision, which are crucial and can impact CYP's outcomes (Devaney, 2016). Having explored general safeguarding training, which acknowledges DVA, one participant mentioned attending DVA-specific training, and other participants reflected on their hopes to attend DVA-specific training. Participants hoped more focused training would help them to develop their skills and knowledge of DVA, particularly how to recognise and respond to reports of DVA.

Seemingly, this superordinate theme correlates with the first superordinate theme, with safeguarding responsibilities being one of many responsibilities pastoral staff undertake. Further, situations of a safeguarding nature require communication with CYP, parents, and external agencies, and wider literature emphasises the importance of effective communication and coordination between professionals (Edwards & Stanley, 2018). This convergence of findings underscores the necessity of collaborative and well-structured approaches for addressing safeguarding and the broader pastoral responsibilities within educational settings. Those in pastoral roles appear well-positioned to provide effective support in these areas, interpreting and implementing relevant principles in their practice.

Understanding the Impact of CYP Experiencing Trauma (e.g., DVA)

The third superordinate theme relates to participant understanding of the impact of CYP experiencing trauma. This theme emphasises the crucial role of pastoral staff in comprehending how experiencing trauma, such as DVA can impact CYP. Witnessing DVA is inherently traumatic for CYP, as it exposes them to frightening and unpredictable events that threaten their sense of safety and security (Bowlby, 1969). Research consistently highlights the detrimental effects of witnessing domestic violence on children and young people's emotional, psychological, and social well-being (Gorman-Smith et al., 2000; Margolin et al., 2000; Wolfe et al., 2003). CYP exposed to DVA are more likely to experience anxiety, depression, aggression, and low self-esteem (Gorman-Smith et al., 2000; Margolin et al., 2000; Wolfe et al., 2003). Additionally, witnessing domestic violence can lead to the development of insecure attachment patterns, further exacerbating emotional and relational difficulties (Bowlby, 1969; Carlson et al., 1989; Lieberman, 1991). Rita demonstrated this understanding of attachment in

her statement 'you can build an attachment with them like a healthy attachment, because you've got, you've got to remember that a lot of these children don't have healthy attachments, so they need to know what healthy attachment looks like'. Both the current study and findings within wider literature underscores the need for pastoral staff to understand the profound and lasting impact of trauma, such as DVA, on CYP's well-being. Hence it is necessary for pastoral staff to provide support, intervention, and resources aimed at mitigating the effects of trauma and promoting healing and resilience in affected individuals. By recognising the traumatic nature of witnessing DVA and addressing its consequences, through informed and compassionate support, pastoral staff can play a crucial role in the recovery and well-being of CYP exposed to DVA. The subordinate themes sought to address this, referring to promoting a sense of safety for CYP, and the implementation of trauma-informed approaches within educational settings.

The subordinate theme, promoting a sense of safety for CYP, aligns with research from Morrison et al. (2020) which emphasises the importance of creating safe and supportive environments for CYP affected by trauma. Three participants reflect on the 'safe space' they try to create for CYP. Research has shown that safe spaces are crucial in facilitating therapeutic interventions and promoting recovery among trauma-affected children (Saunders, 2018). Safe spaces can help reduce feelings of anxiety, hyperarousal, and disassociation, commonly experienced by trauma survivors, allowing them to experience a greater sense of control and empowerment over their environment (Levenson, 2017). Further, spaces that are free from triggers or reminders of past traumas allow children to regulate their emotions, build trust with relevant caregivers and engage in therapeutic activities more effectively (Brice 2016). The participants emphasised the significance in creating a space where CYP feel safe and secure. Through creating this kind of space staff can better cultivate an atmosphere of acceptance and understanding, where CYP feel validated, supported, and empowered to seek help.

Jon talked about CYP in his school not wanting specific support, and wanting to continue as normal, possibly allowing school to be their 'neutral space', separate from what is going on at home. Jon went on to say that some of these CYP did not want to discuss their home life with school staff. Consequently, the researcher continued her exploration pertaining to the value of 'spaces', specifically 'neutral spaces'. Neutral spaces are environments that are free from external influences or associations that may trigger traumatic memories or emotions (Van der Kolk, 2014). Neutral spaces can provide a sense of emotional neutrality and objectivity, allowing individuals to engage in a therapeutic process without being overwhelmed by past traumas or negative experiences. When interpreting participants' experiences, their

narratives suggest that both safe and neutral spaces are valuable in supporting children who have experienced trauma. By providing environments that are physically and emotionally safe, professionals can create optimal conditions for healing, growth, and resilience among trauma-affected children.

The second subordinate theme explored participants' experiences implementing a trauma-based approach and ethos in their practice. Research from The University of California identifies the Healthy Environments and Response to Trauma in Schools (HEARTS, 2008) program. This program promotes school success through creating trauma-informed school environments, as a whole school approach to support children affected by trauma (Dorado et al., 2016). Similarly, the LA in which participants work (and the researcher is on placement) provides training on TIP to promote a whole school approach, aimed at understanding the behaviour of CYP and supporting their emotional wellbeing. This training, developed by practitioners within the LA for other practitioners within the LA aims to ensure a shared understanding is held across all settings. School staff are encouraged to apply TIP to understand the behaviour of CYP and support their emotional wellbeing. The training highlights interconnected values including, compassion, connection, kindness, hope and belonging. Participants shared their experiences of applying TIP in their practice, and how TIP values help them to understand potential trauma underlying a child's behaviour. This directly aligns with research from Waters et al. (2019) which emphasises the effectiveness of trauma-informed approaches, such as TIP, in enhancing professionals' understanding of trauma and the impact this can have on a child's behaviour. Within the present study, understanding of trauma has enabled participants to recognise trauma-related symptoms, such as hypervigilance, dissociation, and emotional dysregulation, and respond with sensitivity and empathy (Cook et al., 2017), making it easier for pastoral staff to provide appropriate support and interventions.

The researcher reflected whether participant familiarity with TIP enhanced participant ability to comprehend the impact of trauma on CYP, contributing to the creation of this superordinate theme -'Understanding the Impact of Experiencing Trauma'. Adopting a TIP framework helps professionals to appreciate the specific ways trauma affects a child's development and behaviour (Child Welfare Information Gateway, 2019; Perry & Szalavitz, 2017). Alongside identifying trauma-related symptoms, research discusses how trauma-informed environments contribute to emotional and cognitive recovery, particularly when such environments prioritise safety, trust, and empowerment (Van der Kolk, 2014; Fallot & Harris,

2009; Levenson, 2017). This understanding is vital for creating supportive environments that foster healing and resilience in trauma-affected individuals. The researcher further speculated that this understanding likely contributed to the subordinate theme, which recognised the importance of 'Promoting a sense of Safety for CYP' in supporting CYP healing and resilience.

Interpersonal Qualities of Pastoral Staff

This superordinate theme captured certain skills and attributes participants identified as crucial in their role in supporting CYP exposed to DVA. To the researcher's knowledge, no previous study has identified and highlighted such skills, making this a unique finding. While the researcher acknowledges the risks of defining concrete skills for a role—potentially limiting the subjective and dynamic nature of these roles—the participants' accounts provide valuable insights, interpreted by the researcher, into the competencies they find essential. There was a sense that both practical and relational skills were key to the participants' experiences of supporting CYP exposed to DVA. In the current study practical skills are understood as relating to flexibility in approach, organisation and problem-solving. Relational skills are described as the ability to understand the human experience to connect with others, as well as demonstrating resilience and engaging in reflective practice.

The participants identified the importance of applying practical skills in their work, consistent with findings reported in wider literature which convey the importance of the 'ability to offer practical help' as a key skill required by pastoral staff (Marland, 1983). The findings from the current study indicated practical based skills such as flexibility in approach and organisation around safety planning and referral procedures as key to supporting CYP exposed to DVA. One participant described supporting a family with logistical and safety arrangements related to DVA, consistent with wider literature reporting that children exposed to DVA often require assistance with safety planning to navigate potentially dangerous situations and access support services (Evans et al., 2008).

In the present study, narratives emerged regarding the use of relational skills to support CYP exposed to DVA. Mel highlighted using her relational skills to build connections with CYP, to help them feel safe, and comfortable to be open about their experiences. What was highlighted in the interviews and stood out to the researcher is that, as reported in wider literature, 'it all comes down to relationships; if you can get those right all else follows' (Noel, 2013). Participants indicated the importance of developing and maintaining good relationships with CYP and in connection with the first superordinate theme, participants reflected on

utilising their relational skills to deliver personalised interventions. Interventions reportedly varied to meet the individual child's needs, some were psychoeducational, to educate CYP about the impacts of exposure to DVA and related challenges, on their brain, body, and emotions. Other interventions reported were practical, seeking to teach CYP coping skills and techniques to manage symptoms of distress, associated with trauma (Linehan, 2015). For example, relaxation exercises, mindfulness practices, grounding techniques, and emotional regulation strategies.

Other relational skills involving building connections through effective communication were evidenced and included compassion and empathy. Empathy was highlighted across interviews, emphasising the importance of understanding, and sharing the feelings of CYP who have experienced trauma. This aligns with broader research identifying empathy as crucial for effective therapeutic relationships and outcomes (Elliott et al., 2011). It is important pastoral staff to have excellent communication and interpersonal skills as these enable empathetic practice and connections to be built (Hodge et al., 2013). Furthermore, Zara, Ciara and Jon pinpointed reflectivity as a relational skill that enhances their practice. Reflectivity enables individuals to gain insight into their own experiences by examining their practice, learning from feedback, and demonstrating flexibility. Participants reflected on potential underlying emotions and motivations driving their behaviour and they identified areas for personal growth and development (Grant et al., 2017). Through reflective practice, professionals can evolve their approaches, ultimately supporting CYP more effectively.

Different interviewees referenced the resilience they felt they, or those in similar roles, need to support CYP exposed to DVA. They specifically mentioned the demands and responsibilities of their role, and the potentially traumatic information that may be shared with them. The research literature suggests that by adopting a resilient perspective, individuals are better able to cope with occupational stress (Howard & Johnson, 2004). Research has also focused on the role of humour as a defence against stress (Cann et al., 2000), correlating with a view shared by Jon. Jon shared that he uses humour to help, 'to find light in sometimes quite dark situations', whilst he was not referring to humour to support occupational stress, the researcher hypothesised that humour may mitigate some of the pressures he faced at work. Additionally, CYP exposed to DVA are having to cope with unpredictable circumstances and often challenging home-lives, which as discerned can impact wellbeing and increase anxiety. Robinson (1977) stated 'anxiety is one of the most common sources of discomfort that prompts the use of humour' (p.116). Seemingly, humour is naturally reinforcing and can be used to help

alleviate anxiety. Although, the account did not indicate using humour to this cause, the researcher discerned that humour could benefit both staff wellbeing and CYP being supported.

Uniquely, the findings of this superordinate theme highlight ways in which participants have made sense of their experiences through the skills they used to support CYP. An implication of this being, when schools are recruiting for pastoral positions, it is important that those recruiting consider whether the individual demonstrates both practical and relational skills. This can ensure that pastoral staff can effectively address the diverse needs of CYP, providing comprehensive support that encompasses both practical assistance and emotional well-being.

Limitations and future research

This section will discuss various limitations the researcher identified during her study and propose ideas for future research directions. Please note additional limitations and implications will be addressed in the reflective chapter.

SENCo Participation

Three of the participants were school SENCOs. While the recruitment information did not specifically target SENCOs, their participation may be attributed to their multifaceted roles within schools. Additionally, as the primary point of contact for EPs, SENCOs may have been more likely to receive the recruitment information and therefore more likely to express interest in participating. The literature supports the notion that SENCOs are indeed more inclined to engage with research compared to other school staff, owing to their professional responsibility for SEN provision. Studies by Bertrand et al. (2016) and Jones and Jordan (2016) demonstrate SENCO recognition related to the value of research participation in enhancing knowledge and practice. SENCOs have been found to view research as a valuable tool for informing their decision-making processes, accessing evidence-based practices, and staying abreast of developments in the field of special education.

The inclusion of SENCOs in educational and psychological research studies has several implications. Firstly, researchers may recognise the potential interest and expertise of SENCOs in contributing to research, including those related to SEN provision and pastoral support. Secondly, efforts could be made to explicitly involve SENCOs in research recruitment and engagement strategies, given their pivotal role within schools, future research could draw on

the insights and perspectives offered by SENCOs to inform evidence-based practices and enhance outcomes for SEN students.

Generalisability

This study adopted a constructivist approach and used IPA to analyse data gathered from eight participants, who held various professional titles and worked across schools in one LA. Although the research did not aim to adopt an empirical or generalisable approach, the small sample and the qualitative nature of the study mean the findings are not generalisable to a wider population. However, the study provides rich, detailed insights into the experiences of these participants and their pastoral roles in supporting CYP exposed to DVA. To enhance generalisability, future research could incorporate quantitative methods with larger and more diverse samples. This would allow the inclusion of pastoral staff from various educational settings or across multiple LAs. Generalisability may be further impacted due to lack of cultural diversity in the LA. Since cultural diversity can influence perspectives, experiences, and behaviours, the absence of diverse cultural representation in the research sample may limit the applicability of the findings to more culturally diverse settings (Chamberlain, 2005). To obtain a cross-cultural understanding of the research question, future research could include participants from a variation of cultural backgrounds.

Double Hermeneutic

Given the interpretive nature of IPA, the findings represent both the researcher's sense-making and participants' perspectives, a phenomenon known as the double hermeneutic. (Condliffe, 2021; Smith & Osborn, 2015). Consequently, the identified themes are shaped, and meaning is made because of the researcher's interpretation of the interviews, this subjective interpretation will have influenced how themes were generated in the current study. Future research could explore themes that were discussed during interviews but were not identified as superordinate or subordinate themes. Two such areas include participants' experiences related to supporting parental mental health difficulties arising from experiencing DVA, and the boundaries around pastoral staff supporting CYP exposed to DVA.

Implications for Practice

There were two subordinate themes that all eight participants underscored; the importance of effective communication with parents whose children have been exposed to DVA and the utilisation of relational skills when supporting CYP exposed to DVA. These insights hold significant implications for school staff, particularly pastoral staff in schools. These

implications are equally crucial for EPs who play key roles in supporting both school staff and CYP exposed to DVA, as such EPs may be able to facilitate the support.

- School staff to access training which raises awareness of DVA. This can be provided by EPs or other professionals with specialised knowledge of the area, while remaining mindful of their own knowledge and competencies in the area (British Psychological Society, 2018).
- School staff to access training on therapeutic approaches and interventions tailored to the needs of CYP exposed to DVA, equipping pastoral staff with the necessary skills to support these children effectively. Training programmes can positively impact the competence and confidence of school staff in delivering therapeutic interventions (Ford et al., 2019; Bennett & McDermott (2016). These can be provided by EPs or other professionals with specialised knowledge of therapeutic approaches and interventions.
- EPs to offer reflective spaces and supervisions for school staff to access. These can help mitigate the emotional burden on pastoral staff within schools (Dalton, 2019; Ellis, 2012, 2018; Treisman, 2021).
- School staff to be encouraged to use creative and empowering methods to help CYP
 make sense of their experiences, such as techniques found within narrative therapy,
 which are non-blaming and view individuals as separate from their problems (Cort &
 Cline, 2014; Treisman, 2021).
- EPs to facilitate opportunities to enhance home-school communication and adopt a joint systems approach through consultation (Dowling & Osborne, 1985, 1984; McGuiggan, 2021).
- EPs to promote, and school staff to engage with, the development of multi-agency working by offering group consultation, which is underpinned by psychological understandings of team cohesiveness and role identity and positioning (Evan, 2005; Lecionni, 2002; Peck, 1998; Tuckman, 1965; Matthews & Singh, 2005)

The above demonstrates how EPs are well placed to offer wider training and guidance, helping to effect systemic change within schools to support wellbeing for all (Gallagher, 2014). By implementing these strategies, EPs can effectively support staff to address the needs of CYP exposed to DVA and contribute to creating a supportive and nurturing school environment for students and their families.

Conclusion

DVA as a phenomenon continues to impact the lives of many CYP, and their families. Exposure to DVA within the home environment can cause long-term effects on CYP, affecting their day-to-day interactions and experiences, including at school. Legislation and policy have recognised the significance of this societal issue. As such, professionals working with CYP, including teachers, pastoral staff, and EPs have a responsibility to safeguard and support these CYP. Whilst teachers' experiences supporting these CYP have been considered, (Ellis 2012, 2018), the experiences of pastoral staff in this area have not previously been explored.

This IPA study aimed to address a gap in UK-based literature by conducting semistructured interviews to investigate how pastoral staff make sense of their experiences supporting CYP exposed to DVA. Through qualitative analysis four superordinate themes emerged, illuminating the experiences of pastoral staff, these themes include multifaceted nature of pastoral responsibilities, the importance of safeguarding awareness, understanding the impact of trauma—particularly DVA, and the significance of interpersonal qualities in supporting affected students. Findings in the current research resonate with some of the themes and subthemes identified in Berger and Meltzer (2021) research. This suggests parallels can be drawn between Australian and UK education systems in how certain pastoral professionals support CYP exposed to DVA-related challenges. It is important to note what this study adds to the current literature and the distinctive dimensions of the experiences of participants in the research: Firstly, the interconnection between pastoral and safeguarding roles, uniquely highlighting how these roles are intertwined, implying a necessity for pastoral staff to navigate both sets of responsibilities effectively. Secondly, practical communication between pastoral staff and parents, detailed examples of how pastoral staff communicate with parents are indicated, including coffee mornings, parent groups, and one-to-one meetings, these offer a nuanced understanding of relationship-building strategies pastoral staff may use. Finally, the study identifies specific interpersonal skills that pastoral staff use to support CYP, underscoring the importance of both practical and relational skills in their roles. This suggests that recruitment for pastoral positions should prioritise candidates who demonstrate these essential qualities.

While this study's qualitative nature precludes generalisability, these insights can stimulate further reflection and discussion within academic and practitioner communities. It is hoped that this research will contribute to ongoing dialogue and inspire future investigations into how pastoral staff can provide support CYP exposed to DVA in educational settings

Chapter 3: Reflective Chapter

Introduction

The process of completing a piece of empirical research is shaped by past experiences, ideas, decisions, and interpretations of the researcher (Braun & Clarke, 2022; Nadin & Cassell, 2006). This chapter will be written in the first person to share my personal experience in conducting this research and reflect on my active role doing so. This chapter therefore discusses the research process, from selecting the research area, identifying the epistemology and methodology, completing the ethics application, recruiting participants, collecting, and analysing the data, to discussing the findings. Consideration of potential limitations within the current research will be interweaved throughout this chapter. This chapter will end exploring the contributions and implications of this research for EP practice.

Identifying Research Topic

Following my undergraduate degree, I worked as an Education Facilitator for a community-based charity, supporting women who have experienced Domestic Violence and Abuse (DVA), the charity also supported the children and young people (CYP) of these women. My role involved facilitating sessions for 16–25-year-olds about healthy and unhealthy relationships. Following this, I worked as a School Wellbeing Facilitator, undertaking a pastoral-based role, in a large secondary school. This gave me insight into how pastoral teams run and some of the duties pastoral staff undertake. My subsequent job as an Assistant EP, involved supporting an EP, at two inner London schools, I attended consultations and delivered interventions. I was struck by the prevalence of CYP exposed to DVA. Moreover, I was surprised that during consultations teachers mentioned, in a somewhat casual and seemingly indifferent manner, that a child in their class had been exposed to or was currently being exposed to DVA. This led me to reflect on the possibility that teachers and other school professionals may not fully grasp the implications of a child being exposed to DVA and how this experience may affect a child's school experience.

During my first year on the doctoral training course, I furthered my knowledge and interest in the field of DVA by writing my 'Child in Context' assignment on the historical and contemporary policy and legislation related to CYP exposure to DVA. Recognising my extended interest in this area, I decided to pursue CYP exposure to DVA for my doctoral thesis, with the aim of making a positive contribution to this field of research and positively impacting CYP at an individual, group, and systemic level.

Reviewing the Literature

My initial literature search allowed me to explore some of the protective and mitigating factors that affect CYP exposed to DVA. As a person who observes religious practices, I was drawn to research investigating religion as a factor that can impact a CYP's experience of exposure to DVA. However, I encountered difficulties in finding sufficient rationale for this specific area of inquiry. I also recognised that exploring a broader topic would enable greater flexibility in data collection. Additionally, research by March and Smith (1995) found that exploratory studies, with broader topics, tend to uncover innovative ideas and perspectives, contributing to the advancement of knowledge. I wanted my research to allow for a comprehensive exploration of this topic, with the opportunity to potentially contribute to the EP profession.

I considered investigating the experiences of teachers supporting CYP exposed to DVA. However, upon reviewing existing literature, I discovered that numerous studies had already examined this area of research. This prompted me to broaden my scope and explore the experiences of other school staff members, as such further reviews of the literature led me to explore the roles of pastoral staff in this area. I reflected how these staff are at the front line, uniquely placed to assess the underlying nature of the problems facing troubled pupils and to consider what type of intervention would be best to support these pupils (Kyricou, 2014). Recognising the pivotal role pastoral staff can have, I investigated whether their experiences supporting CYP exposed to DVA had been researched. I discovered that Berger and Meltzer's had explored the qualitative experiences of Australian mental health professionals working with students exposed to DV. This led me to realise that similar research, focusing on the experiences of frontline staff in UK based schools, had not been conducted. Thus, identifying the gap in the literature pertaining to the experiences of pastoral staff in the UK, motivated me to investigate this area.

Generating the research question

Having read Alase's (2017) article, which states, 'research questions should 'encapsulate the essence of what the research study is trying to uncover' and that research questions should be 'open-ended'. I brought this article to supervision and in our discussion, we considered research from Robson and McCartan (2017), who identified that the 'what' question seemed appropriate for the exploratory nature of my study. I then looked to Berger and Meltzer's (2021) research which asked the following two questions:

- 1. What are the experiences of mental health and wellbeing staff in relation to students who are exposed to DV[A]?
- 2. What role do mental health and wellbeing staff play in response to students who are exposed to DV[A]?

Drawing on this, I reflected that the second question could be addressed within the first, this led to the formulation of the research question for my study:

What are the experiences of pastoral staff working with CYP who are, or have previously been, exposed to DVA?

Methodology

Epistemology and Ontology

Prior to the doctoral training course, I had not fully explored how epistemology and ontology might shape my practice as a researcher, and a trainee EP. However, in my first year on the doctoral course, my group chose a constructivist position to approach the 'Critical Psychological and Pedagogical Theory and Practice' assignment. The constructivist concept that knowledge is constructed via experience, and reflecting on experience, is something with which I strongly identified. As the current study was an individual piece of work, and having a developing interest in social constructivism, I explored whether this would be an appropriate position for this research. Social constructivism places greater emphasis on the social and cultural contexts that shape individuals' interpretations and understandings. While this can provide insights into broader social phenomena and collective meanings, I realised it may overlook the nuances and intricacies of individual experiences which are key to exploratory research. Therefore, I decided it would be better to apply a constructivist approach, which emphasises the subjective construction of knowledge by individuals based on their unique perspectives and experiences. This allows for a deeper exploration of the lived experiences of participants and a richer understanding of their realities. My decision to adopt a constructivist epistemological position was also influenced by Berger and Meltzer's paper, which applied a similar approach to experiences of school mental health professionals in response to students exposed to DV. Their use of constructivism reinforced the validity of my chosen methodology and its alignment with the chosen research area.

From my research question and epistemological position, I perceived that an exploratory approach would be suited to my research. Understanding that exploratory approaches and qualitative methodology often work hand in hand; to deepen one's

understanding of complex phenomena, I explored different qualitative methodologies that may be appropriate for data collection in the present study. My exploration of the different qualitative methodologies is laid out in Table 12.

Qualitative Approaches

Table 12

Table highlighting major qualitative approaches used in research

Qualitative	Description of approach
Approach	Considered the conservation of the States and Classic (1067) and since
Grounded theory	Grounded theory was developed by Straus and Glaser (1967) and aims to develop theory about a particular phenomenon. It focuses on identifying categories of meaning from data and the generation of new theories from analysis of data. Grounded theory is appropriate for a large amount of data and when the focus of the data is not always psychological.
Discursive Approaches	Discursive psychology is concerned with what people do with talk and writing (discourse practices). Discursive psychology also explores the resources that people draw on in their discourse practices, such as devices and category systems (Potter & Wetherell, 1995). It analyses how people draw on cultural resources and use language in different contexts to construct certain versions of reality (Potter and Wetherell, 1987; Willig, 2013).
Narrative Approaches	Narrative approaches are interested in the content of people's stories, and some are interested in the structure of the narrative and ways in which it may constrain people's experiences (Smith et al., 2009).
Thematic Analysis	Thematic Analysis allows for a broad analysis of data; however, it is a methodology as opposed to a methodological approach.
Phenomenology	Phenomenological psychology seeks to understand lived experience and how things are perceived as they appear to our consciousness. This approach explores the meaning of experiences for humans and how humans make sense of what they perceive and interpret their lived realities.
IPA	IPA is rooted in Heidegger's (1927) hermeneutic-existential phenomenology. IPA seeks to examine human lived experience. It was developed by Smith (1996), who worked in health psychology, IPA has since been applied to other branches of psychology, including educational psychology. IPA focuses on personal meaning and sensemaking within a particular environment (Smith et al., 2009).

Having investigated the qualitative approaches laid out in Table 12, I recognised that either Thematic Analysis (TA) or Interpretative Phenological Analysis (IPA) would be best suited to my research. TA and IPA use inductive methods to identify and interpret themes emerging from data, rather than imposing pre-defined categories. Both allow for flexibility and adaptation based on the specific research question and data, and they focus on understanding the meaning that participants attach to their experience, instead of describing them objectively.

As IPA prioritises exploring the lived experiences and voices of participants (Larkin et al., 2006), I felt it would be the appropriate approach to answer my research question. IPA would enable a nuanced exploration of how participants viewed their experience of supporting CYP exposed to DVA.

Ethics and Participant Recruitment

Ethics

When developing this study, I addressed a range of potential ethical concerns and secured ethical approval from the University of East Anglia (UEA) Ethics Committee (Appendix A). Mindful of my obligations to participants (BERA, 2018; BPS, 2021), I took measures to mitigate risks associated with participant involvement. This included providing clear and comprehensive information about the study in the participant information sheet and consent form. I ensured participants had chances to ask questions both during and after interviews, either on the Microsoft Teams call or via email. I acknowledged the potential impact of asking participants to discuss this emotive topic. To manage this risk, I signposted participants to agencies and wider networks that provide support for those impacted by DVA (Appendix G). Participant details were not shared, and pseudonyms were used to ensure participants were unidentifiable. No ethical concerns arose during the interviews; however, if any had arisen, I would have discussed them with my supervisor. Navigating the ethical considerations and obtaining ethical approval for my study was initially challenging, particularly due to the emotive nature of the topic and the ethics committee's requirement for detailed plans on participant debriefing. However, this thorough approach to obtaining ethical approval ultimately provided me with a solid framework for fulfilling ethical responsibilities throughout the subsequent phases of my research project.

Participant Recruitment

I invited headteachers to be 'gatekeepers' for the research (Appendix B) and asked their permission to contact pastoral staff in their schools (Appendix C). On reflection, this could

have been a limitation, as headteachers who provided consent for their staff to take part may have recognised the research as addressing a prominent issue and felt confident in their staff's experiences with DVA-related work. Conversely, headteachers who did not deem DVA as a significant issue, or doubted their pastoral staff's confidence in this area might not have passed the recruitment information along. This indicates the influence 'gatekeepers' have on research, which is linked to research by Clark (2011) indicating that gatekeepers play a crucial role in the recruitment process and their perceptions and priorities can shape the sample. Thus, the value the 'gatekeepers' in the current study placed on the research area, in this case DVA, is likely to have limited the sample to schools which see the significance of DVA and its impact on CYP.

Furthermore, headteachers who did pass on the recruitment information, may have subconsciously put pressure on their pastoral staff to take part. They may have done this by asking a pastoral member of staff if they were going to participate in the research or forwarding the recruitment information more than once. This subconscious pressure may have been due to some headteachers wanting to promote specific work or interventions they provide for CYP (via the researcher). For example, in the context of my placement LA, which trains schools in TIP, headteachers may have seen participation from their school as an opportunity to demonstrate their commitment to implementing LA initiatives, specifically TIP, potentially leading them to exert more influence on their staff to take part in the research. This phenomenon, of subconscious pressure, is supported by research from Gates and Dyson (2017), who discuss how organisational affiliations, and the desire to align with perceived expectations from authoritative bodies can influence participation in research.

The first participant to show interest worked in an SEMH provision and not a mainstream school, therefore they were not suitable for the study. I reflected on whether I should have included specialist provisions within my recruitment criteria. However, the nature of specialist provisions, such as SEMH provisions is different to mainstream schools and may have changed the direction of the findings. With the support of my supervisor eight participants who met the criteria volunteered. Five participants worked in mainstream secondary schools and three worked in mainstream primary schools. Two lots of participants worked at the same schools, however in different roles, 'Associate Deputy Headteacher' and 'Senior Safeguarding and Wellbeing Manager' and 'SENCo' and 'Learning Mentor'. One participant was male and the rest female. I reflected that recruitment relied on individuals' identification of their position as a pastoral member of staff. As such, their roles and experience in schools varied, with some

participants focusing on practical pastoral responsibilities related to Special Educational Needs provision, such as one planning, annual reviews and funding applications. Others held more pastoral responsibilities relating to supporting CYP wellbeing and implementing trauma-based practice. This highlighted to me the vastness of what is understood to make up the pastoral role. Another important reflection from the data collection was that the professional roles I was anticipating, such as 'Behaviour Lead', 'Education Welfare Officer', 'School Counsellor' and 'Wellbeing or Mental Health Officer/ Coordinator', 'Family Liaison Officer' were not recruited. Instead, participants included 'SENCOs', two 'Learning Mentors', two 'Associate/Deputy Headteachers'. I reflected on why this may be in the discussion section of the empirical chapter.

Data Analysis and Discussion

The data analysis process allowed me to enhance my learning and understanding of research methods and approaches, specifically IPA.

When using IPA to analyse the interviews I was conscious of finding the balance between answering my research question and generating relevant emergent themes. In line with Smith and Osborn's (2002) IPA steps, I began the process of analysis by reading and rereading each transcript and becoming fully immersed in each participant's narrative, this helped me to me understand the essence of their individual experiences. Using this inductive approach to complete step 1 and step 2 (Table 2), led me to identify the emergent themes.

There were moments during re-reading the interviews where I felt concerned, recognising that had I asked specific follow-up questions this may have resulted in a deeper exploration process. However, as Smith et al., (2009) argued the bottom line with IPA is that it is 'participant- oriented', I reflected that had I asked specific follow- up questions, then that may have moved my research towards being more 'researcher-oriented'. Additionally, feelings of apprehension emerged when I was coding and developing themes in line with step 2 and step 3 (Table 2), I wanted to ensure that I did not miss any key ideas or themes out. Reminding myself of Howell's (1982) Stages of Competency Model and Johari's Window (Luft, 1969) I recognised that my feelings of frustration and apprehension may have been related to my 'conscious incompetence' conducting IPA. However, as my analysis progressed to step 4,5,6 (Table 2) I realised I was moved towards feeling more 'consciously competent'. These reflections have impacted my practice as a TEP, firstly in considering when follow-up questions are useful, particularly during casework to elicit deeper discussions. Secondly, when feeling

sceptical about my knowledge and skills, I seek to remind myself that I am continuously learning, allowing my practice to evolve in a positive way. Further, my feelings of 'conscious competence' developed upon recognising similarities between my superordinate themes and the themes identified in Berger and Meltzer's paper. This convergence or consistency across different studies strengthens the validity and reliability of the research findings.

A further reflection was that the narratives drawn from the IPA process were less complex and challenging than I expected. I speculated whether this could be attributed to: participant desire for positive self-presentation and the focus of my interview questions. Firstly, individuals naturally tend to present themselves positively, particularly in professional settings, a behaviour rooted in psychological theories like impression management and self-presentation (Goffman, 1959). Research suggests that this tendency, known as "self-enhancement," leads participants to emphasise successes while downplaying challenges (Baumeister, 2010). This inclination can shape the data collected in IPA, resulting in narratives that are more success-oriented and less reflective of the complexities or difficulties faced (Sedikides & Gregg, 2008). I wondered whether the professional nature of the interviews meant participants, elicited this "self-enhancement," and as such participant accounts subconsciously downplayed some of the challenges faced.

Secondly, the solution-oriented style of my interview questions may have influenced the data collected. Solution-oriented approaches emphasise strengths, resources, and effective strategies, which naturally guide participants towards discussing positive outcomes and successes. Consequently, the questions asked may have shaped less complex participant narratives, focusing on the more positive aspects of their roles (Epston & White, 1990). While this approach highlights effective practices and can be empowering, it may also streamline narratives, potentially overlooking deeper challenges and complexities (Kelly, 2008). Reflecting on this, the narratives shared may have been influenced by self-presentation of participants and the style of questions asked.

Alternative Theme

My initial draft included resilience as a master theme, also known as a Group Experiential Theme (GET). Master themes are developed by looking across individual cases for patterns of convergence and divergence. It was interesting to see how resilience aligned with each superordinate theme, Table 13 indicates quotes relating to the intersection of resilience within each superordinate theme.

 Table 13

 Quotes representing links between resilience and each superordinate theme

	Resil	ience	
Multi-faceted responsibilities	Awareness of safeguarding	Understanding the Impact of experiencing Trauma	Interpersonal qualities
Jay: An awful lot of people skills and resilience. I find that you'd always dealing with very different levels of staffing, knowledge, and confidence. Jon: When you hear	Zara: where you don't get like vicarious trauma as a result of that because it's on a constant kind of conveyor belt, that when the new worker started, who I kind of supervise, I said if you ever do	Rita: Ok, so they definitely need resilience because you hear some absolutely horrendous stories. You need to be able to look after yourselfAnd try and switch off from it when you get home,	Zara: You are out of bounds for like 15 minutes just to because I'm big into neuroscience and there's a whole thing around having that that space, that ever that physical space of how to preven vicarious trauma
about some of the traumatic things that kids are going through. I think there's got to be a bit of your spine that's made of steel sometimes so that you can, you know, you don't suddenly collapse and go, Oh my God. Oh, because that the reality is, you know, in my case, I'm the one that's got to try and find some kind of intervention that's going to work. And in order to do that, I have to have to try and do so. With a clear mind, with an understanding of what the underlying	have a student that comes in and does disclose these things, you you need, you need mental space. So, get up from your desk, you know, go into the kitchen.	because otherwise it will consume you in regard to supporting the children themselves. I think a good knowledge of the how trauma affects the brain is useful?	from impacting us so much and utilising your team to air your feeling, because it you're there's resilience and there there's taking on too much and distinguishing the difference between the two. So I would definitely say it someone is able to reflect on their own practice and to know.

issue is

This intersection of resilience with each superordinate theme underscores its importance. Resilience appears vital in managing the multifaceted nature of pastoral responsibilities, addressing safeguarding issues and understanding and responding to CYP's experiences of trauma. However, it is important to note that my observation of resilience, as a necessary component for providing pastoral support emerged from my own meaning-making process. While Jay explicitly mentioned resilience, it was not detailed frequently or prominently enough by multiple participants to be considered a master theme. IPA aims to capture the "essence" of the phenomenon from the participant's perspective (Smith & Osborn, 2008). Therefore, I felt that my interpretation of resilience as a master theme would have been based on my own interpretation of the narratives, rather than the participants' direct experiences, and therefore was not consistent with the IPA methodology. Thus, while resilience was evidenced across themes, it was not identified as an independent theme or master theme. Instead, the significance of resilience is interwoven throughout aspects of pastoral staff's experiences, reflecting its importance without overstating its prominence based solely on my interpretation.

This reflection highlights the subjective nature of IPA-based research, where the researcher informs the findings. This illustrates the 'double hermeneutic' underpinning IPA, as my interpretation of the data plays a crucial role. While I do not believe this weakens the research, I feel it is important to acknowledge this subjectivity.

Multiple Roles

The overlap between multiple roles within educational settings, particularly the combination of managerial duties and pastoral responsibilities, holds significant implications for my research into the experiences of pastoral staff supporting CYP exposed to DVA. Although I briefly address some advantages of multiple roles in the discussion section of the empirical chapter, I now want to explore some of the challenges. Firstly, Blandford (2017) suggests that balancing roles may create role conflict, where the demands of administrative tasks overshadow the pastoral care role. Secondly, Clarke and O'donoghue (2017) emphasise that managerial responsibilities, such as attending meetings and strategic planning, can limit the time available for meaningful engagement with students. This dynamic is particularly relevant to my research, as pastoral staff may find themselves stretched between competing demands, potentially detracting from their ability to offer the necessary emotional support, depth, quality, and stability that CYP exposed to DVA require.

Additionally, Gilligan et al. (2009) highlights that meaningful relationships between staff and students requires time and attention, underscoring the importance of deep engagement in pastoral care. When pastoral staff are constrained by managerial duties, their ability to deeply engage with and understand the needs of CYP exposed to DVA may be compromised. This can hinder the development of trust and the establishment of strong, supportive relationships—critical elements in such sensitive situations—as well as impede the effectiveness of interventions and support strategies, which rely heavily on a thorough understanding of the student's circumstances and emotional state.

Further, dual roles of staff members may also affect how students perceive and trust them. Noddings (2005) discusses the importance of relationships in educational settings, emphasising that students are more likely to seek support from staff they view as approachable and understanding. Students may perceive staff holding multiple roles, which include disciplinary or managerial responsibilities, as less approachable, potentially fearing judgment or consequences. This is particularly relevant for CYP exposed to DVA, who may be hesitant to disclose sensitive issues if they do not fully trust the staff member. Coleman (2010) suggests that the trust necessary for effective pastoral care can be undermined when students view staff members primarily as authority figures rather than caregivers. For CYP dealing with DVA, this trust is crucial, as they need to feel safe and confident in the support they receive. Privacy concerns, as discussed by Buckley et al. (2007), further complicate this dynamic, as students may withhold personal information due to fears about confidentiality or perceived judgment.

It is important to understand the potential nuances that exist in the experiences of pastoral staff supporting CYP exposed to DVA, when undertaking multiple roles. I recognise that these nuances may have influenced my findings, potentially shaping the way participants approached their roles. Reflecting how this may affect the care delivered is important, particularly when developing recommendations for improving support for CYP exposed to DVA.

Considerations

Notable Obstacles

In this section I reflect on certain obstacles I encountered during my research journey and share how I overcame them.

Impact: In August 2022 when I began the exploration of my research topic, I felt resolute that I wanted to produce impactful research. I was compelled to produce research that would 'make a difference' without delay. I discussed this in supervision, and whilst my supervisor understood this desire, she rationalised that to have an immediate and noticeable impact was a somewhat unrealistic aim when producing research of this size and on my own. I had to recalibrate; in doing so I came across Gardner's (2011) article 'Educational research what (a) to do about impact!' Gardner states,

'Educational research generally does not have an immediate impact on policy or practice; indeed, it may take many years for the insights from research to filter through. Unlike some areas of research that have the potential to impact on society, it cannot be represented or distilled into simple one-line actions. It needs to be interpreted and mediated in a variety of processes to accommodate different circumstances' (Gardner, 2011, p559).

Further, the British Educational Research Association (BERA, 2018) discusses that educational research does not always explain, predict, or generalise theory. Therefore, educational researchers should strive to improve the relevance and impact of their work. Reflecting on these points, I re-set my personal research aims, to focus on improving understanding and illuminating ideas across my chosen research area.

Supervisor Change: Supervisors play a crucial role in the experience of postgraduate researchers (Griffiths et al., 2015). They oversee the research project and provide feedback throughout, as well as providing emotional support where necessary. Feedback is a fundamental component of learning (Clynes & Raftery, 2008). Heath (2002) suggests that a researcher's success is influenced by their supervisor, as they provide time and support to ensure the researcher's skills are fostered to a level that results in the production of a thesis of an acceptable standard. Therefore, when my supervisor stepped down from her role at UEA in February/ March 2023, I was initially concerned as I had a good working relationship with my supervisor and questioned how this change would impact my research project and the completion of my thesis. However, I was allocated a new and experienced supervisor who alleviated any concerns and supported me to complete the thesis. Literature on postgraduate study, particularly the role of a supervisor and supervisory change indicates that providing a written, chronological account of your thinking and work to date, including details of support and input you have found useful, will support the transition of supervisor (Norris, 2015). In

line with this, I organised a three -way meeting for my initial supervisor and my new supervisor, to discuss my work to date and to support my new supervisor with understanding my style of work and my thesis content to date. Norris (2015) also advises that it is helpful to remind your institution to take any disruption into account when they are assessing either your progress or your support needs. I therefore contacted UEA postgraduate research team and obtained an extension, allowing me time to adjust to the supervisory change.

TEP and Researcher: Another challenge I encountered during the research process was balancing my role as a researcher and a TEP and managing my inclination to adopt the role of a TEP when completing my research. My genuine interest in my research area and desire to ensure participants felt heard, influenced by my training and placement, may have inadvertently influenced discussions. These influences can be presented in non-verbal cues as well. In response to this, I consciously monitored my contributions and expressions during interviews, navigating the tension between my role as a TEP and my aim to maintain objectivity in the research process. Langley and Klag (2019) discuss this dilemma in terms of four dimensions of authorial choice: visibility, voice, stance, and reflexivity. They emphasise the researcher's inevitable impact on research outcomes, stressing the importance of transparency in acknowledging our contributions to build trustworthiness and reliability. Willig (2017) further emphasises the need for personal and epistemological reflexivity, suggesting that understanding the researcher's role in interpreting the phenomenon being studied is crucial. Through critical reflection and the use of appendices to document the research journey, I have tried to offer transparency.

Reflecting on these obstacles has highlighted to me just how much I have learnt through this process and by engaging in my first research project of this size. I feel have developed my skills, not only related to planning, and designing research, but skills of reflective practice flexibility and determination.

Dissemination

As well as reflecting upon the development and execution of my research, I have considered how the findings can be shared and disseminated, in line with a core competency of EP practice (BPS Practice Guidelines, 2017, 9.9; HCPC 8.9). This competency is corroborated in research from BERA (2018) which highlights researchers have a responsibility to make their research public for the benefit of educational professionals, policymakers and the wider public. Although my qualitative research study did not intend to be generalisable on a

wider scale, discussion around the findings is essential. EPs are in a key position to facilitate these discussions. EPs can also play a role in collaborating with systems around CYP, for example they can support families, contribute to multi-agency responses and work with school professionals, specifically pastoral staff at an individual, group, and systemic level, to facilitate change.

I plan to disseminate this research within the context of my placement provider through presenting my findings at my LA's summer conference. I also hope to share my research with a wider audience of EPs TEPs and AEPs at other important conferences such as the AEP and DECP conferences, where research is shared amongst colleagues. I also hope to seek publication opportunities.

Implications

The Bronfenbrenner model highlights that CYP do not exist in isolation from their relationships, interactions, personal characteristics, contexts and environments, and pervading time factors in their life, and therefore should be supported holistically. Regarding DVA specifically, it has been suggested in Government documents that all statutory organisations should have responsibility for this work (2009). As such, a key motivator for completing this work was to inform EP practice through contributing to a wider understanding of the experiences of pastoral staff working with CYP exposed to DVA. One participant referred to accessing supervision (from an external agency) to support his, often intense, work and to provide 'emotional containment', which he highly valued. The other seven participants did not report having access to supervision. The LA where I conducted the research, is recognised as being able to provide EP supervision to staff members, specifically to staff working in their link schools. This supervision can promote the health and wellbeing of staff. As one participant identified the benefit of supervision on his ability to provide support to vulnerable CYP, this signals to EPs in the LA the benefit of offering supervision to support pastoral staff.

Statistics around CYP exposure to DVA, indicated in the literature review and references to the traumatic impact of this exposure on CYP referenced in the empirical chapter are significant. Consequently, EPs both locally and nationally, may benefit from increased awareness of this issue. As a result, I created a brief guide for EPs to develop their awareness about the impact of DVA on CYP and consider how they can help schools in this area (Figure 7). I plan to share this guide with my LA EP colleagues and should they find it useful I would

be happy to share it with other EP services. Key messages from this document echo the implications for EP practice laid out in the empirical chapter.

Future Research

National

Pastoral care in UK-based primary and secondary schools has changed significantly over the last twenty years (Long, 2022). A key change is that pastoral roles have increasingly been undertaken by non-teaching staff (Edmond & Price, 2009; Rice, O'Toole, & Soan, 2021). However, in some schools, pastoral responsibilities continue to be fulfilled by teachers. Additionally, the notable changes, indicate that even more transformations will occur in the next ten to twenty years. Further, consideration of future research is rooted in the limitations of the present study, situation within both the current context of pastoral care- a relatively recent focus- and the specific context of the LA where the research was conducted. Whilst it is accepted that findings of qualitative research cannot be generalised, it is important to consider that the current study contributes to a gap in the literature concerning this topic and the completion of similar studies in other localities may be considered beneficial.

International

The research was qualitative and conducted in UK based schools. Similar research has been conducted in Australia, presenting similar findings. Australia and the UK are primarily western, individualistic cultures and therefore it remains unclear if results from these studies would be consistent within other cultures, specifically eastern, collectivist cultures. As such and replicating this research design in these contexts would be warranted.

Conclusion

This chapter reflects on my research journey, exploring the experiences of pastoral staff supporting CYP exposed to DVA, from inception to dissemination. It highlights the challenges, successes, and implications of the study. Conducting this research alongside my doctoral training course demanded effective time management, flexibility, efficiency, and resilience. Moreover, it enhanced my awareness of ethical implications in research, as well as my proficiency in research design and analysis. These skills have significantly contributed to my personal and professional growth as a TEP, which I aim to integrate into my future practice. Moving forward, I hope that the response to DVA will always be informed by psychological perspectives, acknowledging its multifaceted nature, whilst proposing relevant approaches to managing its impact on CYP, their families, schools, and the wider community.

Figure 7

Poster for EPs regarding impact and support for CYP exposed to DVA

Information for EPs on impact of CYP exposure to Domestic Violence and Abuse (DVA) and how we (EPs) can provide support

This leaflet aims to raise awareness of the impact of exposure to DVA on CYP we work to support.

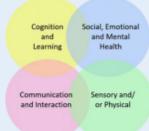
Definition:

Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members1 regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse: psychological, physical, sexual, financial and emotional' (Home Office, 2013).

Statistics

Between 2016-17, over 200,000 children under 16 were referred to Child Protection services due to experiencing DV.

Exposure to DVA impacts CYP's



How can you (EPs) help?

- Provide staff training to raise awareness of DVA among school staff, while being mindful of our own knowledge and competencies in the area.
- Provide staff training on therapeutic approaches and interventions tailored to the needs of CYP exposed to DVA.
- Offer reflective spaces, such as supervision, to help mitigate the emotional burden on practitioners within schools.
- Offer or encourage the use of creative and empowering methods to help CYP make sense of their experiences, such as techniques found within narrative therapy.
- Facilitate opportunities to enhance home-school communication and adopt a joint systems approach through consultation.
- · Promote the development of multi-agency working.

Appendices

Appendix A: Ethical Approval

Appendix B: Gatekeeper Invitation

Appendix C: Gatekeeper consent Form

Appendix D: Advertisement for Pastoral Staff

Appendix E: Participant Information Sheet and Consent Form

Appendix F: Possible Interview questions to choose from

Appendix G: Debrief Letter

Appendix H: Initial Noting

Appendix I: Identifying Superordinate and Subordinate Themes for each pseudonymised

participant

Appendix J: Examples of superordinate themes with linked quotes

Appendix K: Examples of superordinate themes with linked quotes

Appendix A: Ethical Approval

Please note: In line with the ethics approval the indicated changes were made.



University of East Anglia Norwich Research Park Norwich. NR4 7TJ

Email: ethicsmonitor@uea.ac.uk Web: www.uea.ac.uk

Study title: Exploring the experiences of pastoral staff working with Children Young People (CYP), who are or have previously been, exposed to Domestic Violence (DV).

Application ID: ETH2223-1836

Dear Sarah,

Your application was considered on 15th June 2023 by the EDU S-REC (School of Education and Lifelong Learning Research Ethics Subcommittee).

The decision is: approved.

You are therefore able to start your project subject to any other necessary approvals being given.

Please also note that the approval is given but with the following to be adhered to.

- You recognise that the gatekeepers for your project are Head Teachers and only SENCos if the Head Teacher themselves delegates this to their SENCo.
- 2. Your PIS is proofread as there are a few errors still e.g., extra full stops etc. Plus please ensure all sections read as though written to the participant so use of your rather than their for example when referring to experiences. It is really important that these public-facing documents provide a good reflection of the University, School, and you as a researcher.

This approval will expire on 28th June 2024.

Please note that your project is granted ethics approval only for the length of time identified above. Any extension to a project must obtain ethics approval by the EDU S-REC (School of Education and Lifelong Learning Research Ethics Subcommittee) before continuing.

It is a requirement of this ethics approval that you should report any adverse events which occur during your project to the EDU S-REC (School of Education and Lifelong Learning Research Ethics Subcommittee) as soon as possible. An adverse event is one which was not anticipated in the research design, and which could potentially cause risk or harm to the participants or the researcher, or which reveals potential risks in the treatment under evaluation. For research involving animals, it may be the unintended death of an animal after trapping or carrying out a procedure.

Any amendments to your submitted project in terms of design, sample, data collection, focus etc. should be notified to the EDU S-REC (School of Education and Lifelong Learning Research Ethics Subcommittee) in advance to ensure ethical compliance. If the amendments are substantial a new application may be required.

Approval by the EDU S-REC (School of Education and Lifelong Learning Research Ethics Subcommittee) should not be taken as evidence that your study is compliant with the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018. If you need guidance on how to make your study UK GDPR compliant, please contact the UEA Data Protection Officer (dataprotection@uea.ac.uk).

I would like to wish you every success with your project.

On behalf of the EDU S-REC (School of Education and Lifelong Learning Research Ethics Subcommittee)

Yours sincerely,

Victoria Warburton

Appendix B: Gatekeeper Invitation

Ms Sarah Manuel

Trainee Educational Psychologist

6th June 2023

Faculty of Social Sciences

School of Education and

Lifelong Learning

University of East Anglia

Norwich Research Park

Norwich NR4 7TJ

United Kingdom

Email:

s.manuel@uea.ac.uk

Tel: Email to arrange a

telephone call

Web: www.uea.ac.uk

Dear...

My name is Sarah Manuel. I am currently a Trainee Educational Psychologist at the University of East Anglia.

I wonder if you could help me? I am looking to interview pastoral members of staff, for example, pastoral lead, behaviour lead, wellbeing officer/coordinator, family liaison officer or safeguarding officer, to explore their experiences of working with children and young people who are or have previously been exposed to domestic violence.

As a 'gatekeeper' I wanted to ask if you would be happy to pass on an advertisement to potential participants within your school.

If you are happy to help me, please **complete the attached consent form and email it to me at** s.manuel@uea.ac.uk and I will then send over the advertisement.

If you have any questions regarding this study, you can contact me on the email address above or my supervisor at s.wilkinson6@uea.ac.uk

Many thanks in advance,

Kind regards,

Sarah



Appendix C: Gatekeeper Consent form

Ms Sarah Manuel Faculty of Social Sciences Trainee Educational Psychologist School of Education and Lifelong Learning 6th June 2023 University of East Anglia Norwich Research Park Norwich NR4 7TJ United Kingdom Email: s.manuel@uea.ac.uk Tel: Email to arrange a telephone call Web: www.uea.ac.uk Dear..... My name is Sarah Manuel. I am currently a Trainee Educational Psychologist at the University of East Anglia. I wonder if you could help me and act as a 'Gatekeeper' for my doctoral research project? I am looking to interview pastoral members of staff to explore their experiences of working with children and young people who are or have previously been exposed to domestic violence. As a 'gatekeeper' I wanted to ask if you would be happy to facilitate contact between myself and pastoral members of staff at your school. These staff may have professional titles such as pastoral lead, behaviour lead wellbeing officer/coordinator, family liaison officer or safeguarding officer. All answers and results from the research are kept strictly confidential and the results will be reported in a thesis available to all participants on completion. If you are happy and willing to participate within this project as 'Gatekeeper', then

If you have any questions regarding this study, you can contact me on the email address above or my supervisor at s.wilkinson6@uea.ac.uk

please sign, date and return this letter to Sarah Manuel via email (s.manuel@uea.ac.uk) at your

I, (*print* name), hereby accept the invitation to act as a 'Gatekeeper' in the research project outlined above.

Headteacher or SENCO Signature:

earliest convenience.

Date:	
Dutter	



Appendix D: Advertisement for Pastoral Staff

Ms Sarah Manuel

Trainee Educational Psychologist

6th June 2023

Faculty of Social Sciences

School of Education and

Lifelong Learning

University of East Anglia

Norwich Research Park

Norwich NR4 7TJ

United Kingdom

Email:

s.manuel@uea.ac.uk

Tel: Email to arrange a

telephone call

Web: www.uea.ac.uk

Are you a member of pastoral staff working in a primary or secondary school?

My name is Sarah Manuel. I am currently a Trainee Educational Psychologist at the University of East Anglia.

I wonder if you could help me? I am looking for 6-10 Pastoral members of staff for example, pastoral lead, behaviour lead, wellbeing officer/ coordinator, family liaison officer or safeguarding officer, to take part in a research project which will form part of my doctorate. The research will be exploring your experiences of working with Children and Young People, who are or have previously been, exposed to Domestic Violence.

The participation will involve one online interview (using Microsoft Teams) lasting a maximum of one hour.

If you are interested in taking part in this research, please contact me at: <u>s.manuel@uea.ac.uk</u> and I will send you a participant information sheet with an attached consent form.

If you have any questions regarding this study, you can contact me on the email address above or my supervisor at s.wilkinson6@uea.ac.uk

Thank you for taking the time to read this request and I look forward to hearing from you.

Kind regards,

Sarah Manuel



Appendix E: Participant Information Sheet and Consent Form

Ms Sarah Manuel

Trainee Educational Psychologist

6th June 2023

Faculty of Social Sciences

School of Education and

Lifelong Learning

University of East Anglia

Norwich Research Park

Norwich NR4 7TJ

United Kingdom

Email:

s.manuel@uea.ac.uk

Tel: Email to arrange a

telephone call

Web: www.uea.ac.uk

What are the experiences of pastoral staff working with Children and Young People (CYP), who are or have previously been, exposed to Domestic Violence and Abuse (DVA)?

PARTICIPANT INFORMATION SHEET

1. What is this study about?

You have been asked to take part in this study seeking to explore experiences of pastoral staff working with Children and Young People who are or have previously been exposed to Domestic Violence.

This Participant Information Sheet tells you about the research study. Knowing what is involved will help you decide if you want to participate in the study. Please read this sheet carefully and ask questions about anything you don't understand or want to know more about.

Participation in this research study is completely voluntary. By giving consent to take part in this study you are telling us that you:

- ✓ Understand what you have read.
- ✓ Agree to take part in the research study as outlined below.
- ✓ You have received a copy of this Participant Information Sheet to keep.

2. Who is running the study?

The study is being carried out by the following researcher: Miss Sarah Manuel who is a

Trainee Educational Psychologist studying at the University of East Anglia (UEA). Contact email s.manuel@uea.ac.uk

Sarah's research will take place under the supervision of Dr Susan Wilkinson

Contact email: s.wilkinson6@uea.ac.uk

3. What will the study involve for me?

You will be asked to take part in an online interview using Microsoft Teams. This interview will explore their experiences and views of working with and supporting Children and Young People exposed and impacted by Domestic Violence.

4. How much of my time will the study take?

The interview will take approximately 45 minutes - 1 hour to complete.

If you choose to review your transcript this it will take approximately 30 - 45 minutes of your time to read.

5. Do I have to be in the study? Can I withdraw from the study once I have started?

It is completely voluntary to participate in this interview and you do not have to participate. Your decision whether to participate will not affect your current or future relationship with the researchers or anyone else at the University of East Anglia now or in the future.

If you decide to take part in the study, you will be able to withdraw your consent up to the point that your data is fully anonymised. You can do this by letting the researcher know that you would like to withdraw and you will not have to provide a reason. Once you have signed the consent form and an interview date has been arranged, you can withdraw in the following ways:

- Prior to the interview: you can notify me via the email address provided on the consent form.
- In situ (online): you can verbally inform me during the interview that you want to withdraw.
- Retrospectively: you can contact me via the email address provided.

6. What are the consequences if I withdraw from the study?

If the right to withdraw is exercised at any point recordings and, transcription notes will be destroyed via a confidential waste method, unless you say you want them to be kept. If you withdraw, at any point, none of the information you provided will be included in the study results, up until the point I have analysed and published the results.

Please also note that information would not be destroyed if any information of a safeguarding nature had been disclosed during the interview. If this was to be the case, you would be informed that this information may have to be passed on as per the safeguarding guidelines.

7. Are there any risks or costs associated with being in the study?

Questions regarding your experiences supporting Children and Young People exposed to Domestic Violence will be asked. While the questions are not designed to be sensitive, this is an emotive subject and may bring up challenging memories or feelings. You are encouraged to stop the interview if at any time you feel uncomfortable. The interviewer will signpost to any support organisations, following the interview, to allow for further conversation or support.

8. Are there any benefits associated with being in the study?

This study will hopefully provide insight into the role of pastoral staff in Children and Young People exposed to Domestic Violence.

This study may be used to support the development of agreed principles to underpin future training of staff in how to support Children and Young People exposed to Domestic Violence.

9. What will happen to information provided by me and data collected during the study?

By consenting to participate, you agree to your responses being collected, anonymised and pseudonymised and used for the purpose of this study. The data collected during the study will be transcribed so the researcher can use Interpretative Phenomenological Analysis (IPA) to

analyse data and then report the findings of the study. Study findings will be written up for the researcher's thesis submission as part of the Educational Psychology Doctorate that the trainees are undertaking at UEA.

Your personal data and any information you provide during the study will be stored in a password protected folder on a password- protected computer. Only the researcher Ms Sarah Manuel will have access to this information.

Your personal data and information will only be used as outlined in this Participant Information Sheet, unless you consent otherwise. Data management will follow the Data Protection Act 2018 (DPA 2018) and UK General Data Protection Regulation (UK GDPR), and the University of East Anglia's Research Data Management Policy.

The information you provide will be stored securely and your identity will be kept strictly confidential, except as required by law. Study findings may be published.

10. What if I would like further information about the study?

When you have read this information, I will be available to discuss it with you further and answer any questions you may have. If you still have questions, Dr Susan Wilkinson, my research supervisor will be able to discuss them with you.

11. Will I be told the results of the study?

You have a right to receive feedback about the overall results of this study. You can inform the Researcher that you wish to receive feedback by selecting the box to indicate that you would like feedback. This feedback will be in the form of a one-page lay summary. This feedback will be available once the researcher's thesis has been completed and approved by those marking it.

12. What if I have a complaint or any concerns about the study?

If there is a problem, please let me know. You can contact me via the University of East Anglia at the following address:

Ms Sarah Manuel
School of Education and Lifelong Learning
University of East Anglia

NORWICH NR4 7TJ

s.manuel@uea.ac.uk

Email to arrange a telephone call

Research supervisor

Dr Susan Wilkinson

s.wilkinson6@uea.ac.uk

If you are concerned about the way this study is being conducted or wish to make a complaint to someone independent from the study, please contact the Head of School of Education and Lifelong Learning:

Professor of Higher Education Research

Yann Lebeau

Contact email: Y.Lebeau@uea.ac.uk

13. How do I know that this study has been approved to take place?

To protect your safety, rights, well-being and dignity, all research at the University of East Anglia is reviewed by a Research Ethics Body. This research was approved by the EDU S-REC (School of Education and Lifelong Learning Research Ethics Subcommittee). Application ID: ETH2223-1836

14. What is the general data protection information I need to be informed about?

According to data protection legislation, we are required to inform you that the legal basis for processing your data as listed in Article 6(1) of the UK GDPR is because this allows us to process personal data when it is necessary to perform our public tasks as a University.

In addition to the specific information provided above about why your personal data is required and how it will be used, there is also some general information that needs to be provided for you:

- The data controller is the University of East Anglia.
- For further information, you can contact the University's Data Protection Officer at dataprotection@uea.ac.uk
- You can also find out more about your data protection rights at the <u>Information</u> Commissioner's Office (ICO).

• If you are unhappy with how your personal data has been used, please contact the University's Data Protection Officer at dataprotection@uea.ac.uk in the first instance.

15. OK, I want to take part – what do I do next?

You will need to sign the attached form with your name and signature and email it to me (at email below). Please keep a copy of both the participant information sheet and consent form for your information.

Sarah Manuel

s.manuel@uea.ac.uk

16. Further information

This information was last updated on 6th June 2023

If there are changes to the information provided, you will be notified by email and telephone call.

This information sheet is for you to keep

PARTICIPANT CONSENT FORM

I,	[PRINT	NAME],	am	willing	to
participate in this research study.					

In giving my consent I state that:

- I understand the purpose of the study, what I will be asked to do, and any risks/benefits involved.
- I have read the Participant Information Sheet, which I may keep, for my records, and have been able to discuss my involvement in the study with the researchers if I wished to do so.
- The researchers have answered any questions that I had about the study and I am happy with the answers.

- I understand that being in this study is completely voluntary and I do not have to take part. My decision whether to be in the study will not affect my relationship with the researchers or anyone else at the University of East Anglia (or my Educational Psychology Service) now or in the future.
- I understand that I may stop the interview at any time if I do not wish to continue and that unless I indicate otherwise any recordings will then be erased and the information provided will not be included in the study results. I also understand that I may refuse to answer any questions I don't wish to answer.
- I understand that the results of this study may be published. Although every effort will be made to protect my identity.
- I understand that personal information about me that is collected over the course of this project will be stored securely and will only be used for purposes that I have agreed to. I understand that information about me will only be told to others with my permission, except as required by law.

I consent to:					
Video-recording		YES	O	NO	O
Audio-recording		YES	O	NO	O
Reviewing transcripts	YES	О	NO		
*** ***			0.1	. 1.0	
Would you like to receive a one-page	e lay s	summary	of the	study?	
		VES	O	NO	O
		113	O	110	· ·
If answered yes please indicate your	prefe	rred form	of fee	dback an	d address.
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Appendix F: Possible Interview questions to choose from

Participant Characteristics

- What is your professional title?
- Can you give a brief description of your role?
- Can you tell me about some of the children and young people (CYP) you support in your role?
- What skills do you need for your role?
- Have you had any training to help support you in your role?

Support provided

- What is your previous experience of supporting Children and Young People exposed to Domestic Violence and Abuse (DVA)?
- How confident did you feel when supporting these CYP?
- What has helped you support these CYP?
- What has hindered your ability to support these CYP?
- Are there any specific interventions that you applied to your work with these CYP?
- Have you attended any training on supporting CYP exposed to DVA?
- Have you sought support from external organisations when supporting these CYP? If so, which ones? If not, in future do you think you would?

Future

- What skills would you recommend to pastoral staff supporting CYP exposed to DVA?
- What training would you recommend to pastoral staff supporting CYP exposed to DVA?

Appendix G: Debrief Letter – the debrief letter was read out at the end of each interview and then emailed to the participant

Ms Sarah Manuel Faculty of Social Sciences

Trainee Educational Psychologist School of Education and

Lifelong Learning

University of East Anglia

Norwich Research Park

Norwich NR4 7TJ

United Kingdom

Email:

s.manuel@uea.ac.uk

Tel: Email to arrange a

telephone call

Web: www.uea.ac.uk

Dear Participant,

6th June 2023

Thank you for taking the time to speak with me today, your insight and reflections have been invaluable to my thesis.

If you have any further questions or require any further information regarding this research study, please do not hesitate to contact me or my supervisor, details can be found below -

Researcher: Sarah Manuel

s.manuel@uea.ac.uk

Supervisor: Dr Susan Wilkinson

s.wilkinson6@uea.ac.uk

Please note that if completing this interview has raised any uncomfortable feelings or emotional distress the following organisations can be accessed for further support. I have also included websites of charities that may be useful to draw from when supporting children or young people who are or have experienced Domestic Violence.

Organisation	Website	Phone and/ or Email	
Women's	www.womensaid.org.uk	Email:	Live
Aid		helpline@womensaid.org.uk	chat
			available
			on
			website

National Domestic Abuse Helpline	www.refuge.org.uk	Phone Number: 0808 2000 247	Live chat available on website
Victim Support and Refuge	www.victimsupport.org.uk	Phone Number: 08 08 16 89 111	Live chat available on website
Samaritans	www.samaritans.org	Phone Number: 116 123 Email: jo@samaritans.org	
Children's Heard and Seen	www.childrenheardandseen.co.uk		
Time Matters UK	www.timemattersuk.com	info@timemattersuk.com	
Barnardo's	www.barnardos.org.uk		
Prisoner's Families Helpline	www.prisonersfamilies.org	Phone Number: 0808 808 2003	

Please let me know if you would like to receive a copy of your transcript or a summary of my final thesis.

Many thanks again,

Kind regards,

Sarah



Appendix H: Initial Noting

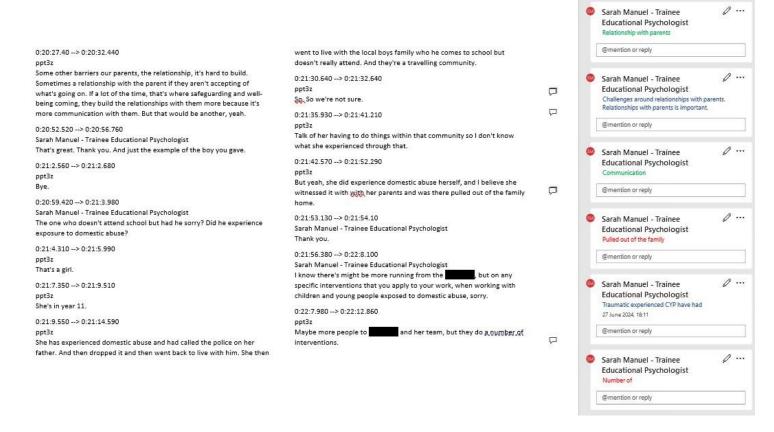
Example of a transcript with initial notes and emerging themes. Each transcript was analysed using the same process, highlighting quotes and using the comment section on Microsoft Word, from the beginning to the end of the transcript.

Key:

Green - Descriptive

Red – Linguistic

Blue - Conceptual



0:22:14.740 --> 0:22:25.540

ppt3z

So inclusion do and the same department do zones of regulation where they go through different zones with the students. We have a morning intervention where we we we don't just make it specific for. Into that's been domestic abuse. It's students who are having trouble to regulate themselves in the morning, and we've for the day. And we look at what positives are. They're going to have that day.

0:22:39.250 --> 0:22:39.450

Sarah Manuel - Trainee Educational Psychologist Mm hmm.

0:22:39.870 --> 0:22:51.310

ppt3z

And then they have a positive report that staff have to write a positive comment on. They can't write anything that's negative because often they're not experiencing that positivity.

0:22:51.190 --> 0:22:52.150

Sarah Manuel - Trainee Educational Psychologist

Mm hmm mm hmm.

0:22:52.630 -> 0:22:59.230

ppt3z

To motivate them to be the best version of themselves. I know that team do safe for me.

0:23:0.100 --> 0:23:0.180

Sarah Manuel - Trainee Educational Psychologist

0:23:0.560 --> 0:23:3.0 ppt3z The SEMH.

0:23:3.120 --> 0:23:6.680

ppt3z

Interventions with the students. But then she's probably the best one for that.

0:23:6.620 --> 0:23:9.540

0:23:11.360 --> 0:23:28.360

Sarah Manuel - Trainee Educational Psychologist

OK, I will definitely ask her. Thank you.

Sarah Manuel - Trainee Educational Psychologist

And I know you spoke about some. We spoke a bit earlier about sort of training that you've helped doing your role, but is there any specific training you've attended on supporting children, young people exposed to domestic windence and it can be in your previous role as in your previous coheal.

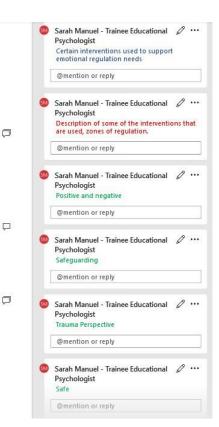
0:23:27.760 --> 0:23:36.720

ppt3z

I would say it's more, it's more our safeguarding and our trauma perspective is probably the things that I've done. Those are the. Yeah, yeah, the training.

0:23:34.320 --> 0:23:39.0

Sarah Manuel - Trainee Educational Psychologist
OK. And you've done them both in this role or were you that?



Appendix I: Identifying Superordinate and Subordinate Themes for each pseudonymised participant

Please note: Table 6 presents the same findings in a different format

Intervie wee	Superordinate Themes Subordinate themes								
Jay	Interpersonal Qual Resilience, communi with a variety of peo- responsibility	icate	Multi-faceted role Support parents with SEMH needs		involve Commi externa working	unication with al support, g with local ity, drawing	Allowing time to con how to support rt, ocal		Interventio ns Applied Specific and general
Rita	Trauma based appitrauma informed con			erpersonal Qualities ing, personal experiences		Parent engagement Parent groups, relationships with parents		rces and entions box	Awareness of Safeguardi ng Privacy, safeguardin g rules, contact orders
Ciara	Trauma based approach Trauma Informed Practice	Quality Consistence emotion availa	stent,	Awareness of Safeguarding	Communicate with parents Communicate during meeting difficult conversations		ion 1gs,	Limitations due to external agency roles	Variety of work Variety of work, focus on the child's needs

Jon	Trauma response Trauma Informed Practice Training, understanding if behaviour as indication of trauma	Interpersonal Qualities Therapeutic ski resilience, sens humour		Multi-faceted role Finding interventions to support CYP, facilitating parent meetings		stions to Safeguarding Discussions around safeguarding, DV as a safeguarding concern		d as	work Significant traumas, access supervision to support these CYP		Collaborati on with external agencies Refer to other agencies, social care referrals
Ivy	Understanding of impact of experiencing Trauma Awareness of trauma response	Interpersonal Qualities Patience, understanding, compassion, communication skills		Awareness of role boundaries Different roles of schools' professionals		Awareness of Safeguarding Difficult conversations, information privacy, respect		у,	Variation in role Providing mentoring, making, referrals to and work with other agencies, communication and collaborating with parents,		Environme ntal factors School as a safe place
Mel	Interpersonal qualic Confidence, empathy		Comn	Variety of role Communication with parents, communication with different organisations			fidentiality ar reness guarding rmation privacties, guideline in the school	y,	Recognition of external support Knowing what is out there	Flexi havir adap const cultu	deration for
Edie	ing the Good	personal qualities organisation, hetic, knowledgeable		Multi-faceted pastoral role Responsibilitie s and variety within role Coordinated support for	Parent engage nt Awaren of thing going o outside	ess	Role boundaries Feelings of powerlessn ess	SE Dys dist	pport for comp MH needs sregulations, ruptive and ngerous behavio	olex	Environme ntal factors School as a safe place, opposite to home which

	Applying the Trauma Informed Practice ethos of the school			CYP wi	support ith it support support wes with	pare supp to si	ther				may feel unsafe
Zara	Understand ing the impact of experiencin g trauma (e.g., D.VA) CYP can 'trauma dump', understandi ng complex trauma, Trauma Informed Practice	Understandi ng of mental health Understandi ng the interaction between safeguarding needs and SEMH needs, understandin g mental health	Environment support Safe space, ne space		Awarene of Safeguar ng Safeguar ng role	rdi	Parent involven Relation between children their par	ship and	Collaborati ve practice School wellbeing team, liaison and communicati on with services	Interperso nal Qualities Reflective, therapeutic skills, expertise	Challenges faced within the variation of work Responsibilities change, uncertainty of what the day may bring limited time

Appendix J: Examples of repeated themes across participants, similar themes highlighted in same colour

Jay

- 1. Interpersonal Qualities
- 2. Multi-faceted Role
- 3. Eternal agencies involvement
- 4. Reflective Practitioner
- 5. Interventions Applied

Rita

- 1. Trauma based approach
- 2. Interpersonal Qualities
- 3. Parent engagement
- 4. Resources and Interventions
- 5. Awareness of Safeguarding

<u>Ciara</u>

- 1. Trauma based approach
- 2. Interpersonal Qualities
- 3. Awareness of Safeguarding
- 4. Communication with parents
- 5. Limitations due to external agency roles
- 6. Variety of work

<u>Jon</u>

- 1. Trauma response
- 2. Interpersonal Qualities
- 3. Multi-faceted role

- 4. Awareness of safeguarding
- 5. Complexity of work
- 6. Collaboration of external agencies

Ivy

- 1. Understanding of impact of experiencing trauma
- 2. Interpersonal Qualities
- 3. Awareness of role boundaries
- 4. Awareness of Safeguarding
- 5. Variation in role
- 6. Environmental Factors

Mel

- l. Interpersonal Qualities
- 2. Variety of role
- 3. Confidentiality and awareness of safeguarding
- 4. Recognition of external support
- 5. Reflection on role

Edie

- 1. Understanding the impact of experiencing trauma (e.g., D.VA)
- 2. Interpersonal Qualities
- 3. Multi-faceted pastoral role
- 4. Parental engagement

. Role boundaries

- 6. Support for complex SEMH needs
- 7. Environmental factors

Zara

- 1. Understanding the impact of experiencing trauma (e.g., D.VA)
- 2. Understanding of mental health
- 3. Environmental support
- 4. Awareness of Safeguarding
- 5. Parental Involvement
- 6. Collaborative Practice
- 7. Interpersonal Qualities
- 8. Challenges faced within variation of work

Appendix K: Examples of superordinate themes with linked quotes

	ay
Superordinate Theme	Linked Quotes
Interpersonal Qualities	- An awful lot of people skills and resilience. I find that you'd always dealing with very different levels of staffing, knowledge and confidence.
Multi-faceted Role	- Think it's increasingly important the parental role as well. So, I'm having to support more parents than ever had to before in terms of their mental health.
Safeguarding Considerations	 But due to confidentiality, that wouldn't necessarily be imparted to everybody. And maybe some, maybe something around that is to do with confidentiality, I don't know whether some of people think it's not fair to pass that information on and if it's become more public. The head or the safeguarding lead and that that that issues are being hidden, I suppose, by everything else, So, her link was the head teacher, who was safeguarding leads and would hold, and she would hold the safeguarding records because something that has concerned me a little bit lately is I've uncovered certain things where the head teacher would receive records from children coming up from primary, from preschool to primary school,
External Pressures / Involvement	 We weren't able to replace them because of finance cuts. And you know the local authority expect more and more in terms of, you know, we have to be up to date with provision intervention.

Superordinate Theme	on Linked Quotes
Trauma Response	 You know whatever spectrum in your head you have of the range of issues or traumas that schools might deal with. Yeah, we we are dealing with everything. Done is for all teachers to be trauma Informed practise trained so that they understand that the way in which children present could be an indication of potential trauma. In essence, it's trying to get staff to try and be as relational as they can be.
Interpersonal Qualities	 When you hear about some of the traumatic things that kids are going through. I think there's got to be a bit of your spine that's made of steel sometimes so that you can, you know, you don't suddenly collapse and go, Oh my God. Oh, because that the reality is, you know, you're, you know, in my case, I'm the one that's got to try and find some kind of intervention that's going to work. And in order to do that, I I have to have to try and do so. With a clear mind, with an understanding of what the underlying issue is. You need a sense of humour to to find. To find the light in sometimes quite dark situations, you know, and sometimes that can be shared with a child you know you can just say, well, this is rubbish, isn't it, you know, or whatever. Or even just afterwards where you know you, you yourself can just sort of laugh at sometimes the absurdity of what you're having to deal with, either through the lack of any services at the moment or the difficulty in getting parents to understand. I think if you don't have some kind of humour, then I think that the whole thing just becomes over bit overwhelming and you know, overbearing.

Glossary of Terms

ACE(s) – Adverse Childhood Experience(s)

BERA- British Educational Research Association

BPS – British Psychological Society

CYP – Children and Young Person/ People

DfE – Department for Education

DA – Domestic Abuse

DV – Domestic Violence

DVA- Domestic Violence and Abuse

EP(s) – Educational Psychologist(s)

EPS- Educational Psychology Service

IPA- Interpretative Phenomenological Analysis

LA - Local Authority

SEND – Special Educational Needs and Disability

SENCO- Special Educational Needs and Disability Coordinator

SEND CoP - Special Educational Needs and Disability Code of Practice

TA -s

Thematic Analysis

TEP- Trainee Educational Psychologist

TIP - Trauma Informed Practice

UK – United Kingdom

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