

HOW DO NURTURE GROUP PRACTITIONERS MAKE SENSE OF THEIR RELATIONSHIP WITH THE NURTURE GROUP CHILD?

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ABSTRACT

Nurture groups aim to meet the developmental needs of vulnerable children identified as having Social, Emotional and Mental Health (SEMH) needs. Past research has highlighted the need to explore and explain the practitioner-child relationship in nurture groups. In this research, five nurture group practitioners from Key Stage 1 (KS1) nurture groups were interviewed about how they make sense of their relationship with the nurture group child, to identify what makes a successful nurture relationship, and the factors that challenge it. A symbolic interactionist and critical realist position was taken, using a grounded theory analysis. Results revealed a relationship journey that develops into a 'close' relationship. The practitioner becomes attuned to the child's needs and emotional experiences, enabling them to provide containment to the child and put appropriate support in place. The relationship journey contains a number of challenges, which the practitioner tries to overcome. These challenges place an emotional load on the practitioner, and so they seek containment themselves. However, the challenges contribute towards the development of a trusting and 'close' relationship. This relationship journey is discussed in relation to psychodynamic and attachment theories. Implications for nurture group practitioners, stakeholders and educational psychologists are explored.

INTRODUCTION

Research has frequently shown that childhood exposure to abuse, loss, high levels of adversity and risk often leads to poorer outcomes, including low academic achievement, social exclusion, and later unemployment and poorer wellbeing in adulthood (Bellis, et. al. 2014; Green et. al. 2005). Many children and young people across the UK today experience a high level of adversity and risk, which is likely to have a significant impact on their wellbeing, development and learning (Roffey, 2016). The promotion of children and young people's emotional wellbeing and mental health is high on the UK Government agenda, with schools highlighted as being well-placed to support children and young people's emotional wellbeing and mental health (Department of Health, 2015; Department of Health and Department for Education, 2017; Public Health England, 2015). The Children and Families Act (2014) places a statutory duty on all Local Authorities (LAs) and schools to support the emotional wellbeing and mental health of young people, especially those with Special Educational Needs and Disabilities (SEND). The Government has also recently produced

a green paper outlining the next steps in transforming children and young people's mental health (Department of Health and Department for Education, 2017).

A number of reports suggest evidence-based targeted interventions that aim to support vulnerable children and young people (Cheney, et. al. 2014; Public Health England, 2015; Roffey, 2016). In an evidence-based review of targeted school-based interventions for children and young people with identified emotional wellbeing and mental health needs, nurture groups were identified as holding the strongest evidence base for promoting successful outcomes over other school-based group interventions e.g. social and emotional aspects of learning, cognitive behavioural therapy (Cheney et. al. 2014). The UK Government and large-scale studies have repeatedly reported on the benefits of nurture groups for promoting the social, emotional and academic outcomes of vulnerable young people with SEMH needs, across primary and secondary educational settings (Bennett, 2015; Hughes and Schlösser, 2014; Ofsted, 2008, 2011; Public Health England, 2015; Steer, 2005).

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Nurture groups

Nurture groups are targeted, school-based interventions, aimed at meeting the developmental needs of vulnerable children with SEMH needs (Boxall and Lucas, 2010). They were first developed in the 1960s by educational psychologist Marjorie Boxall in response to large numbers of young people starting school with significant social, emotional and behavioural difficulties, who were struggling to access mainstream education. Their difficulties were understood as being a result of disrupted or impoverished early nurturing experiences (Boxall and Lucas, 2010).

Nurture groups are inclusive classes of typically 10-12 children, supported by two consistent nurture practitioners. For a full description of the three main models of nurture groups practice, the reader should refer to Cooper and Whitebread (2007). Nurture groups aim to support children by providing opportunities to develop secure, nurturing relationships. Nurture practitioners offer a safe base (Bowlby, 1988) from which children can explore and learn, and who model trusting, predictable relationships. The relationship between the practitioner and child is frequently cited as vital for the child's development, and success of the nurture groups (e.g. Bennathan and Boxall, 2000; Billington, 2012).

Unfortunately, there is a dearth of research looking into the processes operating within nurture groups, or the factors that lead to a successful nurture provision. Several researchers have highlighted that research must begin to identify the processes of change i.e. why nurture groups work, to understand better the outcomes typically seen (Bennett, 2015; Cheney et al. 2014; Garner and Thomas, 2011; Hughes and Schlösser, 2014).

A small amount of research has indicated the importance of the practitioner-child relationship (Chiappella, 2015; Cooper, et. al. 2001; Garner and Thomas, 2011; Griffiths, et. al. 2014; Kourmoulaki, 2013; Pyle and Rae, 2015). This research has suggested that the practitioner-child relationship is one that is close (Pyle and Rae, 2015), with trust identified as a key process taking place within a nurture group relationship, and vital to the nurture group's success (Chiappella, 2015).

The relationship between the practitioner and child has been linked to an attachment theory framework (Bowlby, 1969), describing the relationship to be a representation of an attachment relationship, where the parent/practitioner provides safety, care, and a base from which the child/young person can venture out and learn (Garner and Thomas, 2011). Kourmoulaki (2013) identified that nurture group practitioners provided feelings of safety and trust, by offering consistency and attention, and being attuned to the young people's needs. Nurture group children report feeling more

accepted by nurture group practitioners (compared to children taught in mainstream classes) and develop a degree of closeness that would reflect a secure attachment relationship (Balisteri, 2016).

AIMS OF CURRENT STUDY

A small number of studies indicate that the relationships within nurture groups play an important role towards enabling the positive outcomes typically seen (Garner and Thomas, 2011; Griffiths, et. al. 2014). However, further research was seen as necessary to develop a more thorough understanding of what factors are at play within nurture group practitioner-child relationships.

The purpose of the research was to explore and explain the contexts and in particular the factors that operate within and influence the nature of the nurture group practitioner-child relationship, to identify what makes a successful relationship. It was hoped the research would shed light on how nurture group practitioners make sense of their relationship with the nurture group child, and the factors that enable or challenge the relationship to contribute to the understanding of the relationship, which is so often seen as having central importance to the success of nurture groups (Billington, 2012).

METHODOLOGY

The research outlined in this paper is qualitative; seeking out the views, perceptions and explanations held by nurture group practitioners. It explores the interpretations that participants give to the nurture group practitioner-child relationship, and then shifts to an explanatory approach seeking to explain the factors and contexts at play.

Three research questions were posed:

1. How do nurture group practitioners make sense of the relationship between the nurture group practitioner and nurture group child?
2. What enables the relationship between the nurture group practitioner and nurture group child?
3. What challenges the relationship between the nurture group practitioner and nurture group child?

Researcher position

The research was approached from a symbolic interactionist ontological position. Symbolic interactionism focuses on the subjective meanings or interpretations that individuals give to their experiences and the external world, through joint interactions with each other (Blumer, 1969). As this research sought to study the relationship between the nurture group practitioner and child (whereby a relationship exists as a series of interactions), symbolic interactionism was viewed as a well-fitting position to take.

A critical realist epistemological position was adopted for this study. A critical realist approach looks to find explanations for *what works*, in *what context(s)*, and why, by identifying mechanisms, contextual factors and outcomes (Bhaskar, 2008).

Participants

The LA within which this research took place (an Outer London Borough) has a long history of running nurture groups for its most vulnerable children. Thirteen primary or infant schools (all mainstream settings) across the LA offered a KS1 nurture group provision, all operating on a full-time basis (children attended for nine half-day sessions per week). To ensure the research reflected nurture groups that followed a Boxall model (Cooper and Whitebread, 2007), only practitioners who worked in settings which held the Marjorie Boxall Quality Mark Award (QMA, an optional accreditation of high quality nurture group practice, The Nurture Group Network, 2015) and/or were known within the LA to model strong nurture group practice, who followed the Boxall model, and met the LA's own nurture group policies and procedures, were approached. In May 2016 three settings were identified as holding the QMA, and eight were deemed to meet the LA nurture group policies and procedures to a high standard (three of which held the QMA).

Overall, five participants from three settings consented to participate in the research, each having attended nurture group training, either through the Nurture

Group Network or with the LA, and had at least one year's experience. Two were qualified teachers, one was a higher-level teaching assistant, and two were teaching assistants. All participants were female.

Procedure for data collection

Data were generated via semi-structured interviews with the researcher to gain detailed insight into nurture group practitioners' views and perceptions (see **Appendix 1**). Other data sources were considered, but the desire was to stay focused on the practitioners' perceptions of the relationship. Interviews were audio recorded for transcription and analysis.

Analysis

The data were analysed through the Corbin and Strauss (2008) grounded theory approach. Grounded theory enables researchers to describe and find explanations for social processes (Glaser and Strauss, 1967). Grounded theory was selected as it best suited the aims, ontological and epistemological orientation of the study, offering a way to describe and explain what makes a successful nurture group practitioner-child relationship.

Figure 1 outlines the analysis approach taken, allowing individual concepts, themes, subthemes and categories to inductively emerge, creating a theory that could explain the nurture group practitioner-child relationship.

Figure 1: Analysis process.

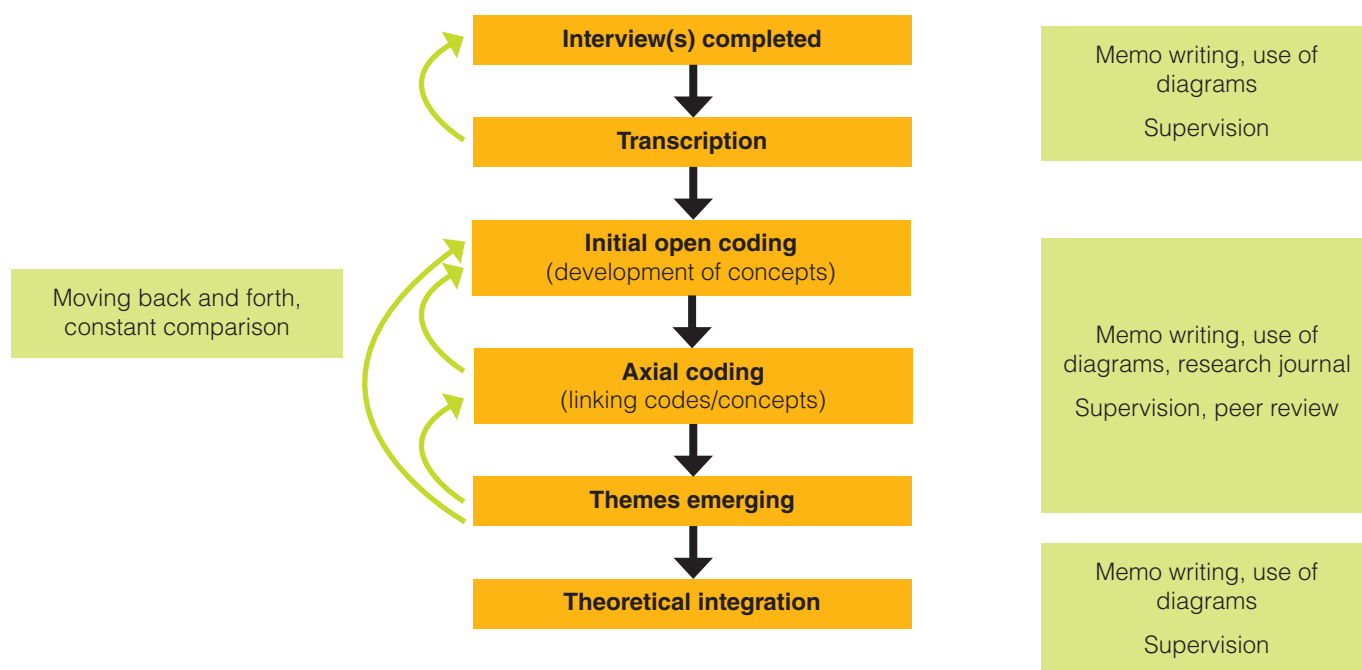


Table 1: Examples from the analysis of the use of analytical tools, open coding and memos.

Data excerpts from transcripts	Memo	Analytical tool used	Open code(s) used
'In the mainstream classroom you have 30 kids, and you haven't really got the time to give them that much attention.' (Antonia)	Here the participant seems to suggest that limited attention can be given to the child in the mainstream classroom. Perhaps the opposite of this is the child receiving much more attention in the nurture group.	Flip-flopping	Attention to the child
'We put a lot of effort into what we do, so you feel like it's part of you, you're doing a lot. Part of you sort of giving it to them, aren't you?' (Claire)	This seems really powerful 'you're giving something of yourself'. It suggests that a lot of effort has been put into the relationship, and that the practitioner feels they are handing over something of themselves for the child to take away and keep.	Asking questions of the data	Internal role model Relationship beyond the nurture group
'It's mentally and physically draining.' (Sofia)	The term 'draining' seems to hold quite a strong message. I have an image of the practitioner's strengths and resources leaking away, as they provide containment for the child.	Notice emotions and the meaning they give to the text.	Emotional load Being a container

Transcriptions were analysed with the support of MaxQDA software. Each transcript was read once to become more familiar with the data before beginning the analysis process.

Transcripts were analysed in turn, beginning with initial open coding. Each transcript was carefully searched and broken down to look for meanings of words or phrases (Corbin and Strauss, 2008). The meanings that arose were termed and labelled as code concepts. A range of analytical tools were used to support the coding process (see **Table 1**). Corbin and Strauss (2008) suggest the researcher uses analytic tools designed to support the coding process, allowing the researcher to interact with the data, and avoid bringing in prior assumptions or biases.

As various concepts arose from the data, relationships or links between concepts were noticed. This was the basis of the axial coding process. Corbin and Strauss (2008) describe this as not a separate process to initial open coding; axial and open coding occur alongside each other as more concepts emerge, develop, and change. This follows the iterative back

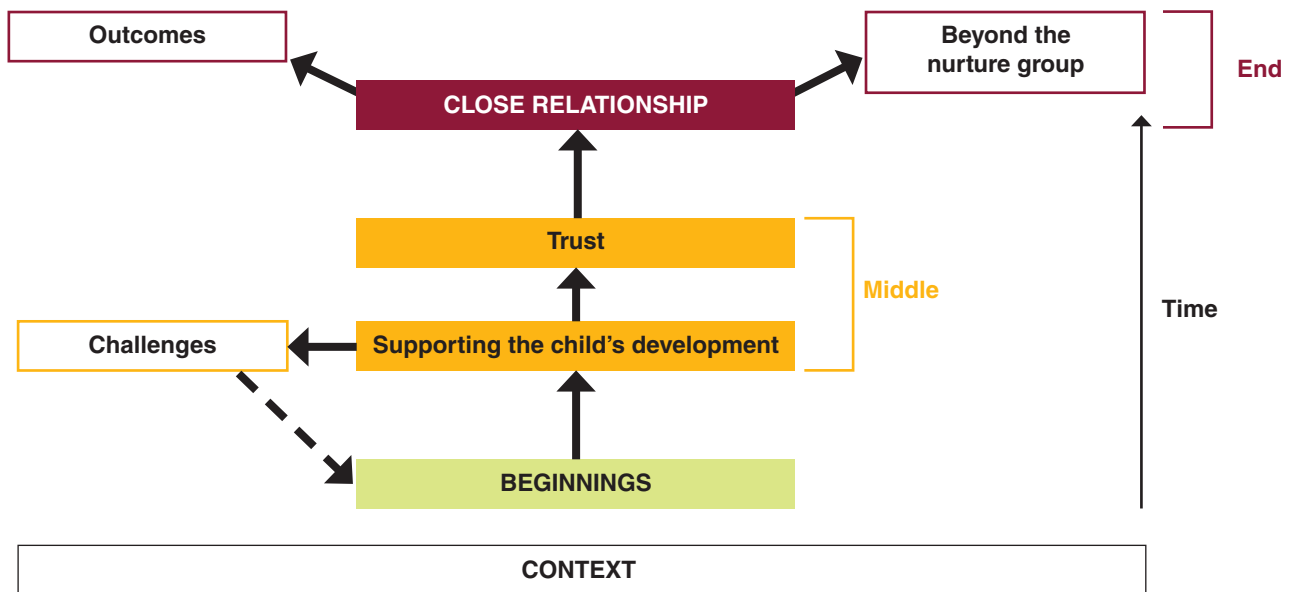
and forth, constant comparison method of grounded theory, as demonstrated in **Figure 1**. As relationships, similarities or links between individual concepts were identified, themes, subthemes and categories emerged and allowed the data to be pulled together in a meaningful way.

Trustworthiness and ethical approval

Lincoln and Guba's (1985) evaluative principles of credibility, transferability, dependability and confirmability were followed. This included using supervision, memo writing, and use of a reflexive research journal to ensure trustworthiness of the research. The research journal was used to record and reflect on the process and emerging codes/themes during analysis. Peer review with fellow doctoral educational psychology trainees, as well as research supervision enabled the researcher to check for and uncover any biases, explore and clarify interpretations of codes and categories, and sound out the emerging theory.

Ethical approval was gained via the Tavistock and Portman NHS Foundation Trust.

Figure 2: Simple diagrammatic representation of the nurture group practitioner-child relationship.



RESULTS

Figure 2 provides a simple diagrammatic overview of the theory which emerged, representing the nurture group practitioner-child relationship. The theory is comprised of five key categories:

- Beginnings
- Supporting the child's development
- Trust
- Challenges
- A close relationship

A more detailed overview of the theory, depicting the smaller concepts within each category, and how the concepts relate to each other, feeding up towards the overarching category of a 'close relationship', can be seen in **Appendix 2**.

Context

The context relates to the setting, structures and boundaries of the nurture group, comprised of four different sub concepts:

- Home and family environment: The nurture group resembles a 'family' and family home
- Fun, enjoyable environment
- Structure of the nurture group: clear routines and boundaries, small child: adult ratio, range of activities
- Presence of reliable adults

Beginnings

The beginning is made up of three sub-categories:

1. The child transitions into the nurture group

At this beginning stage of the practitioner-child relationship there are anxious and wary feelings experienced by the practitioner and especially the child. The child may be scared and anxious at first, withdrawing from the practitioner and other children, or seeming unsettled, communicated through their behaviour.

'She didn't know none of our faces, so that I think was quite a scary feeling for her' (Nikki)

'At the same time, she was scared of coming in here, I was sort of like scared of her reaction [laughs] to me.' (Nikki)

2. Spending time together

The practitioner and child spend time together, interacting and communicating through play, structured activities and conversation. The practitioner and child closely interact with each other on a frequent basis, facilitating the development of a relationship.

'You have to constantly be engaging and interacting with the child at all times. So, through that, you do build a relationship with the child, you get quite close to the child, you know.' (Antonia)

3. Getting to know and understand each other

The third sub-category is the practitioner and child coming to know and understand each other. The child gets to know the practitioner through observing the practitioner from a safe distance and through direct interaction, noticing how the practitioner engages and interacts with other children, as if gathering information

about the practitioner's character, and how they are likely to respond to the child and make them feel.

'I find that they, they are watching you...they look to see how you're interacting with other children, like how the other children are responding to you as well.' (Nikki)

Similarly, the practitioner gets to know and understand the child by observing them, directly spending time with the child, and reflecting on the child's behaviour. The practitioner consequently comes to know the child's strengths and needs, interests, and personality, which helps them to develop an understanding of the child, their internal world, and what they might be communicating through their behaviour.

'Once you get to know them, you sort of get an idea, you have to know their home life, their background, their social skills, like what their strengths, their weaknesses.' (Nikki)

Supporting the child's development

Over time the practitioner facilitates and nourishes the child's development:

- **Child feels noticed:** the child feels valued, held-in-mind, and acknowledged for who they are. The practitioner has set up ways to allow the child to experience feelings of self-worth.
- **Meeting the child's individual needs:** the practitioner sensitively and appropriately responds to and meets the child's individual needs, plans developmentally suitable learning activities, and is attuned to the child's emotional experiences.
- **Containing the child:** the practitioner understands and 'holds' the child's feelings, and helps the child make sense of their emotions.

'If you don't understand how they're feeling, then you can't really help them move away from what they're thinking.' (Sofia)

Trust

Trust is a key aspect of the development of the relationship between the practitioner and child. Trust builds over time, and along with it, the relationship. Without trust, there is no relationship.

'It's building that trusting relationship with the child and the nurture teacher...the group is small...you have that advantage to get to know that child better, and that child gets to know you. So, I, I definitely think it's trusting relationship that will be, that's number one.' (Antonia)

'Trust' is made up of three sub-concepts that feed into each other:

- The child feels comfortable, relaxed, and safe with the practitioner
- The child feels safe to approach the practitioner and share their thoughts
- The child feels understood

'The trust I think...they're just more relaxed with you, they're relaxed with you, they'll say most things, they'll tell you things. And, you know they wanna come and talk to you.' (Claire)

Trust in the relationship is vital for the child to feel comfortable to share aspects of themselves with the practitioner. If trust doesn't exist, the child won't open up.

Challenges

The practitioner and child can face challenges along their relationship journey, which disrupt the relationship, although can be overcome. Three types of challenge were identified:

1. The child's behaviour feels challenging: the practitioner witnesses misbehaviour, arguments between the nurture group children, violent behaviour, and receives hurtful comments from the child. The child's behaviour can feel unsafe and unpredictable.

'His behaviour is extreme, and he's very violent, and very aggressive. He can be very defiant, and unsafe.' (Antonia)

2. There being no connection between the practitioner and child: the child seems to push the practitioner away and shut themselves off to avoid unearthing difficult, overwhelming feelings, as a form of defence.

'Not being able to communicate with them. So, if the child's completely shut down, it's difficult knowing that something is wrong, but they don't want to say. That's quite challenging in itself. Knowing that you want to help, but you're not, you can't do anything else then.' (Sofia)

3. Difficulties facilitating change for the child: the practitioner can find it difficult to facilitate change for the child, to understand, calm, comfort, or reach the child, and therefore meet their needs.

These difficulties can lead to the **relationship being emotionally draining for the practitioner:** the practitioner may worry about the child, feel frustrated, drained and overwhelmed, and question their methods and skills.

'It can be very mentally and physically draining. There's so many things you take in and try to deal with, but at the same time, you can't show certain emotions to the child. You just keep holding things in.' (Sofia)

The practitioner (the container) seeks containment themselves: the practitioner as container needs to find ways of seeking and receiving support and emotional containment themselves in response to the heavy emotional load they are carrying for the child.

'I'm just glad that I've got my colleague, coz we just bounce off each other. You need somebody with the same kind of personality as you. To understand it. Because there's times when things just become so overwhelming, you just, all you have to do is look at each other and you know it's time for the other person to step in while the other just has five minutes out.' (Sofia)

A 'close relationship' develops

Through the processes described, a relationship between the practitioner and child can develop into a 'close relationship', one connected through trust, sharing the same relationship journey, and the practitioner having a strong and personal understanding of the child.

'It's one that's quite special. And because you have that closeness and you see them every day, but you work closely with them...And so for me it's definitely, yeah, special! I would say it's quite a special one.' (Antonia)

Close relationships can be experienced as challenging relationships, while still evoking strong feelings of a bond between the practitioner and child. Many participants talked about challenges, within the context of a strong relationship they had with a child.

'We have a child in our nurture group who is extremely challenging. And he is a lovely boy, a really lovely boy...We have a good bond. A good relationship, a close relationship. I would say close.' (Antonia)

At times, the comforting feelings that a child may feel towards the practitioner can mirror a parent-child relationship. The child sees the practitioner as a safe base, seeking close proximity or physical contact with the practitioner.

'When they are ready, they will come to you, coz they know that's what they can do.' (Sofia)

With the practitioner also taking on a parental role, they feel a great sense of responsibility for protecting, nurturing, containing, safeguarding, and supporting the development of the child.

'We've got to keep them safe.' (Claire)

Perceived outcomes: Positive outcomes are seen to emerge as a result of the practitioner putting appropriate support in place to meet the child's developmental needs, and the presence of trust and

the close bond that develops between the practitioner and child.

'By the end of it they really do come out like different children.' (Nikki)

It is important to note that for some children, positive outcomes aren't as plentiful, particularly when long term challenges have existed, and there has been less of a connection between the practitioner and child.

Relationship beyond the nurture group: Once the child has left the nurture group, the practitioner experiences feelings of loss, knowing that their relationship with the child will inevitably change and dwindle, but maintains hope that a connection will remain.

'It's like your own children going off and you know, leaving home I think. It is to me sometimes. You think 'oh, they've gone'.' (Claire)

DISCUSSION

This research set out to explore and explain the relationship between the nurture groups practitioner and child. Three research questions were posed which are discussed below (questions 1 and 2 will be discussed together). Links to attachment and psychodynamic theory will be made when discussing the results.

Question 1: How do nurture group practitioners make sense of the relationship between the nurture group practitioner and nurture group child?

Question 2: What enables the relationship between the nurture group practitioner and nurture group child?

A *relationship journey* emerges between the nurture group practitioner and child, leading towards the development of a *close relationship*. The beginning of the relationship journey reflects a period of anxiety and getting to know each other. As described by Youell (2006) all beginnings evoke feelings of anxiety of the unknown. This research highlights the importance of the practitioner developing an understanding of what the child may be communicating through their behaviour, their needs, and their internal world, through observing, paying attention to, and reflecting on the child's verbal and non-verbal communications. This attunement to the child fits with the psychodynamic concept of reverie; the capacity for a caregiver or significant adult e.g. a nurture group practitioner, to be sensitive and attuned to the child's emotional experiences and communications (Bion, 1962). Being attuned and sensitive to the child's needs has previously been identified as a key characteristic of the nurture group practitioner (Kourmoulaki, 2013).

Throughout the practitioner-child relationship journey, the practitioner has the capacity to recognise and understand the child's feelings (which are often painful and scary). They help to 'hold' or manage these feelings, before helping the child to understand their emotional experiences. Containment refers to the capacity for a person to notice and understand another's powerful and difficult emotions, and respond to these emotions in a way which helps to reduce that person's pain and distress (Bion, 1962). An adult (such as a nurture group practitioner) can help to contain a child by taking in, processing, and holding a child's difficult feelings, and then helping the child to safely make sense of their feelings (Youell, 2006).

Through the act of containment, a child can begin to develop feelings of trust and safety in the containing adult (Youell, 2006). This research highlights that the containment provided by the nurture group practitioner enables the child to feel understood, and thus begin to open up and share more about themselves. They recognise the support and consistency the practitioner provides, enabling them to feel safe enough to learn from the practitioner. As the child shares more about themselves with the practitioner, the practitioner develops deeper knowledge and understanding of the child. The developing rapport between the practitioner and child leads to a 'close relationship'. Previous studies have also described the practitioner-child relationship as one that is close (Balisteri, 2016; Garner and Thomas, 2011; Kourmoulaki, 2013). The close relationship is one where the practitioner and child experience a shared journey over time, which is unique to each and every relationship. Participants often used the terms special, a connection and close, to describe the relationship they develop with the child. The child experiences feelings of comfort, safety, and being cared for by the practitioner, just as a child may feel towards a parent. The practitioner seeks to protect the child, contain their anxieties and fears, and support their development, as a parent would to their child. The practitioner and child's experience of a parent-child relationship is akin to a secure attachment relationship (Bowlby, 1969), where the practitioner provides reliable and sensitive emotional security, becoming a safe base for the child. As a result of the close relationship positive outcomes emerge (for the most part) for the child.

Previous studies have also made links between the nurture group practitioner-child relationship and the development of positive SEMH outcomes (Garner and Thomas, 2011; Pyle and Rae, 2015). The child also begins to be less reliant on the nurture group practitioner, developing a sense of independence in managing situations and relationships on their own. The child is able to figuratively hold on to the experience of the practitioner being sensitively attuned to their needs, and providing emotional containment.

As the child transitions out of the nurture group, this represents an ending to the practitioner-child relationship journey. Endings are recognised as evoking conflicting emotions, representing growth and development, as well as loss (Salzberger-Wittenberg, et. al. 1999; Youell, 2006). Participants described experiencing painful and difficult feelings e.g. loss, wishing to maintain a protective role.

Question 3: What challenges the relationship between the nurture group practitioner and nurture group child?

The results of this research highlight the challenges that often arise in the relationship journey between the nurture group practitioner and child. The practitioner may struggle to form a connection with the child, and the child may seem to push the practitioner away and emotionally shut themselves off. For other relationships, the child's behaviour can feel challenging. The child may harm others, misbehave, or become involved in arguments, all of which can lead to the relationship feeling unsafe and unpredictable. These differences in the way the child presents and relates to the practitioner could be understood in terms of different forms of attachment patterns and relationships (Ainsworth, et. al. 1978; Bowlby, 1969). For example, an insecure avoidant attachment style (Ainsworth et. al. 1978) mirrors the lack of connection that practitioners experience in some relationships with nurture children.

The challenges experienced by the practitioner impact on their feeling of being able to contain the child, support their development and facilitate change. This can cause the practitioner to feel frustrated and anxious, and full of doubt of not being good enough. These feelings experienced by the practitioner relate to the psychodynamic concept of projection; a form of communication, where a person transfers their unbearable feelings into another as a way of relieving their own emotional load (Burgo, 2012). The practitioners' feelings of anxiety, frustration and not feeling good enough may in fact be the child's own feelings that they have projected into the practitioner.

These challenges contribute to a significant emotionally draining experience for the practitioners. Participants frequently used strong emotion carrying words, such as stressed, worried, frustrated, and overwhelmed. Previous research into nurture groups has also described similar emotionally draining experiences (Birch, 2016, Middleton, 2018). The current research highlights the importance of practitioners (the containers) being contained themselves, to continue providing emotional security to the nurture group child. Bion (1985) discussed the notion of container-contained, whereby for an adult to provide containment to a child, they must themselves feel emotionally

secure. Participants highlighted the necessity of seeking support for themselves, so they could continue to carry the child's emotional load.

Challenges in the relationship between the nurture group practitioner and child can lead to the practitioner feeling unable to facilitate change, and question their approach to supporting the child. However, when faced by this challenge, participants often described taking the time to reflect on what the child may be communicating through their behaviour, helpfully prompting them to seek greater understanding of the child. Therefore, it could be that the challenges faced by the practitioner become part of a shared difficult experience that contributes to the development of a close relationship bond.

Implications

The results of this research have implications for training and development of nurture group practitioners and nurture group practice. The results can be used to inform and guide practitioners in how to develop a close and successful relationship with their nurture groups children, and how to manage the challenges that may be faced along the way. Links to psychodynamic and attachment theory could be used as part of training and supervision for nurture group practitioners to enhance their theoretical understanding of the relationship, and reflect on the possible factors at play when challenges arise.

The research also highlights the emotional challenge that nurture group practitioners face, and the importance of having supportive structures in place to offer emotional containment. Jackson (2002) stresses the importance of school staff having a space to process the emotions they face in their work with children, providing containment and relief from the strains and persecutory feelings they hold. Hulusi and Maggs (2015) argue that these reflective systems enable school staff to break down and make sense of the child and their own experiences, and thus have capacity to continue to work effectively to meet the needs of the child. This has implications for nurture group settings, LAs and professionals such as educational psychologists to ensure that safe, supportive structures are in place to help nurture group practitioners manage the emotional load, respond to challenges when they arise, and help meet the needs of the nurture children. Supportive structures could include monthly individual or group supervision, facilitated by practitioners such as educational psychologists or appropriately trained advisory teachers, network meetings, and termly training opportunities (see Rae et. al. 2017). In addition, structures could be put in place within individual settings to ensure that practitioners have access to support and guidance from colleagues throughout the week.

Finally, the results of the current study could be translated into a storybook to narrate the nurture group practitioner-child relationship journey in a way that is more accessible to nurture group practitioners, stakeholders, parents/carers and professionals. Please see **Appendix 3 and 4** for a copy of a suggested story description and corresponding drawing intended for all those involved in the support, training and supervision of nurture practitioners, e.g. educational psychologists and advisory teachers.

Limitations

We acknowledge that the nurture groups practitioner is just one person within a two-person relationship. The views and experiences of the child could have also offered insight into the practitioner-child relationship. This research could have sought the perspectives of both the practitioner and child, allowing some triangulation of the data and insight from both sides of the relationship. However, seeking the perspective of the child most likely would not have offered the same depth of insight into the relationship due to the developmental ages of the children in KS1 nurture groups.

The small sample is the main limitation of this research. In future, seeking a larger sample, perhaps by expanding the research to nurture groups outside of the LA, would provide a greater volume of data, adding to the power and richness of the analysis.

Future research

To build on the results of this grounded theory study of the nurture group practitioner-child relationship, the next step would be to test the results out to increase the reliability. This could be done by seeking nurture group practitioners' views of the research, and exploring whether the results reflect their own experiences. Focus groups, or a survey using semi-structured interviews or questionnaires could be used to verify the results.

As the current research focused on the practitioner-child relationship from the perspective of the nurture group practitioner, it would be interesting for further research to explore the relationship from the child's perspective. Balisteri (2016) studied this, though the breadth and depth to which the child's views were sought was narrow, with limitations in the quantitative measures used. A qualitative approach to exploring the child's views would add a degree of richness to the current research and the study by Balisteri (2016).

It would also be interesting to explore the nurture group practitioner-child relationship within alternative models of nurture groups or a different age group to identify the similarities and differences in the practitioner-child relationships across those nurture groups where the views of young people may be more easily gathered.

Research could seek to further explore and explain nurture groups in relation to psychodynamic theory. Further exploration and/or application of a psychodynamic perspective could help increase the theoretical understanding of nurture groups, and the practitioner-child relationship, alongside attachment theory, which is already central to the foundation of nurture groups.

CONCLUSIONS

This small-scale research explored and explained how nurture group practitioners make sense of their relationship with the nurture group child. It provides an explanatory insight into the factors that lead to a successful practitioner-child relationship, and the challenges that can arise. Five key categories; *beginnings, supporting the child's development, trust, challenges and a close relationship* were identified. These categories link over time and describe a relationship journey, with the category of 'a close relationship' being the overarching category. The practitioner-child relationship can be understood in relation to attachment and psychodynamic theory, to help describe the processes at play within the relationship journey.

This research has implications for training for practitioners, where attachment and psychodynamic theory can be shared to provide greater understanding of the factors that shape and influence the practitioner-child relationship. The findings also indicate the importance of supportive structures being available for nurture group practitioners to reflect on the nurture child, to develop a greater understanding of their communications and needs, and receive containment from the heavy emotional load of the role.

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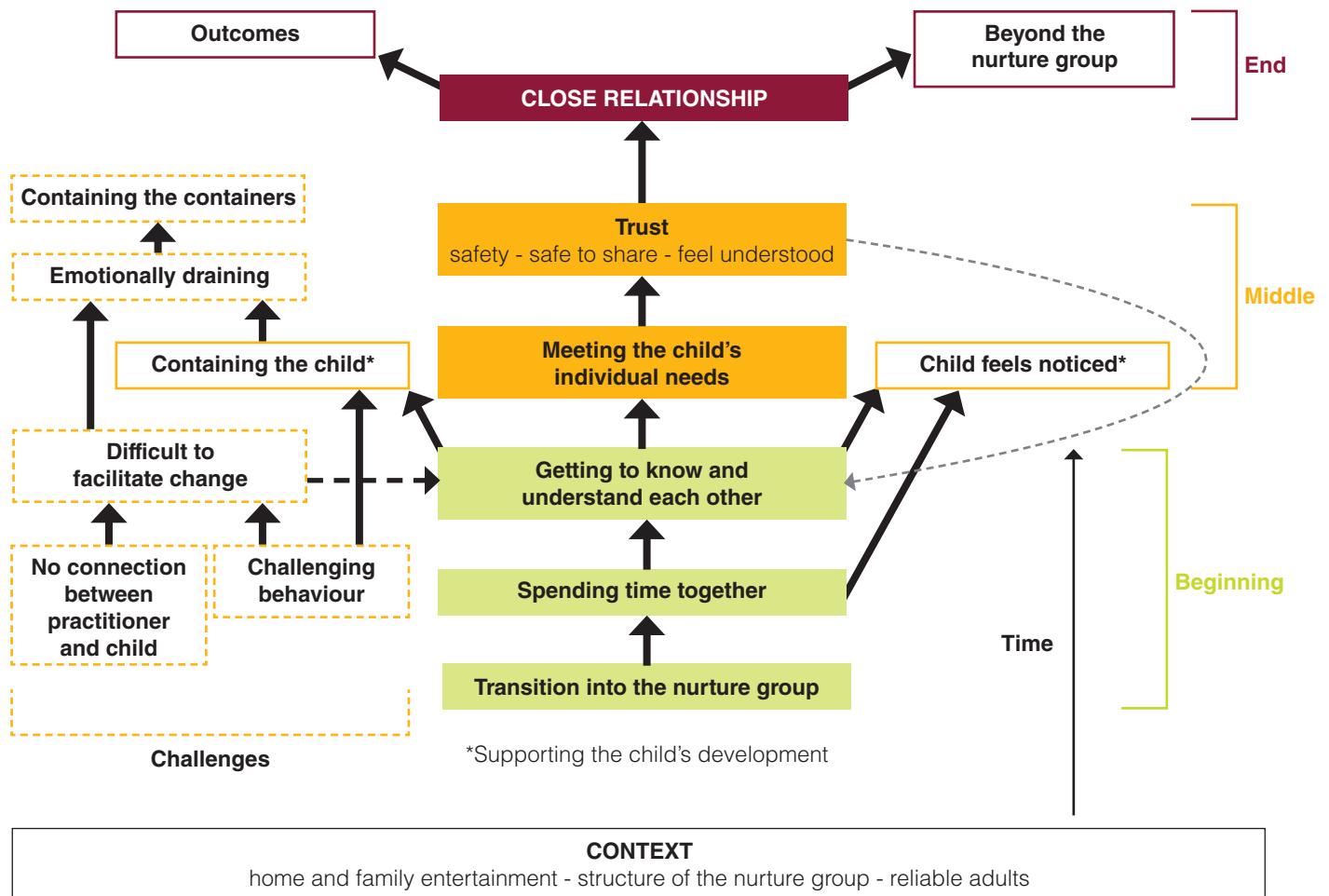
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APPENDIX 1: Interview schedule

1. How would you describe your relationship with the children in your nurture group?
2. Can you tell me about how the relationship between a nurture practitioner and nurture group child develops?
 - How does the relationship change over time?
 - What do you feel influences this change?
3. Can you recall a nurture group child with whom you have held a good relationship?
 - Could you describe that relationship?
 - What enabled that relationship?
4. Can you recall a nurture group child with whom you have held more of a challenging relationship?
 - Could you describe that relationship?
 - What do you feel challenged that relationship?
5. Do you think that the relationship(s) held between the nurture group practitioner and nurture group child is important?
 - If yes, what do you feel is important about the relationship(s)?
6. As you look back over the relationships you have held as a nurture group practitioner, what do you feel has been important about these relationships?
7. Is there anything else you would like to share about the relationship?

APPENDIX 2: Detailed map of the emergent theory of the nurture group practitioner-child relationship



APPENDIX 3: Suggested story description and corresponding drawing (Appendix 4)

Intended for all those involved in the support, training and supervision of nurture practitioners, e.g. educational psychologists and advisory teachers.

A STORY ABOUT A JOURNEY BETWEEN A PRACTITIONER AND CHILD

This story begins with a practitioner and a child who venture out on a journey with their nurture family. The child has a heavy backpack full of feelings and experiences that require nurturing. The practitioner has a responsibility of guiding and protecting the child, although the child doesn't yet trust the practitioner to keep them safe. The practitioner and child spend a lot of time together, and slowly begin to get to know and understand each other as they continue further on their journey.

Over time, the practitioner is able to carry some of the weight from the child's backpack, and replace it with experiences that nourish and extend the child's development and wellbeing. While rewarding, this act can be emotionally draining for the practitioner.

While some journeys are relatively smooth, other journeys may venture along treacherous paths, into a dark forest where the practitioner and child become separated and lose their way, or lead up a steep and rocky volcano, where eruptions are unpredictable and threaten the practitioner and child's safety. These paths are full of fear, worry and doubt, which the practitioner tries hard to carry to protect the child, adding to their emotional load. To ensure the practitioner can survive and continue the journey with the child, they draw on support from others along the way, who help to carry the load or enable the practitioner to leave some of the load behind.

When the journey ventures on to a treacherous path, the practitioner has the tricky task of trying to find a different path, or head back to an earlier point. Treacherous paths can be overcome, but can cause damage and leave scars that never quite go away.

Over time the practitioner and child's journey nears an end, and something very close and special has been built: their relationship. This relationship feels very powerful and emotive, where both practitioner and child have a deep understanding of each other, just like a parent and child. The child feels great trust, comfort and safety in the practitioner, and is nourished enough to continue to develop and become independent. The practitioner feels great fondness and pride in the child's journey, yet begins to mourn the expected loss that the end of the journey brings.

The epilogue to this story tells the reader that for some practitioners and children (although not all), their relationship journey continues in some way. Every so often they visit each other or wave as they pass by, re-experiencing the feelings they previously had towards each other.

APPENDIX 4: Illustration of the story of the practitioner-child journey: A pictorial representation of the results

