

# The Effects of School Exclusion and Effective Interventions

A joint paper by RAPt and Place2Be



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**RAPt**

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# Introduction

There are high levels of school exclusions in the UK. Figures from the Department for Education (2013)<sup>1</sup> show that 7 pupils in every 10,000 were permanently excluded from school in 2011/2012 and 216 in every 10,000 were excluded temporarily. These pupils, and the complex needs they often have, are a particularly challenging group to work with. Efforts to reduce the risk of school exclusion are nevertheless worthwhile, as research has shown that school exclusion may increase the risk of young people's involvement in crime.<sup>2</sup> The most common age to be excluded from school is between age 13 and 14.<sup>3</sup> This is also the age that delinquent behaviour starts to increase.<sup>4</sup> There may be several similar mechanisms linking crime and school exclusion. One of these might be the occurrence of behavioural and emotional symptoms. For example, research has shown that boys aged between 6 and 8 who have both emotional problems and behavioural problems are significantly more likely to offend at age 19.<sup>5</sup>

Today, RAPt (The Rehabilitation for Addicted Prisoners Trust) and Place2Be publish a briefing on exclusions, childhood emotional problems, mental health and criminal behaviour. This paper aims to provide insight into factors that are associated with school exclusions and criminal behaviour in young offenders, as well as the interventions that work best to divert young people from offending.



**7** pupils in every **10,000** were permanently excluded from school in 2011/2012

Pupil school exclusion is rising in the UK



# Place2Be and RAPt

Place2Be is a charity providing integrated mental health services in 235 UK schools reaching 94,000 children, and offering training and advice for teachers and parents. RAPt is a charity that delivers services, both in the criminal justice system and in the community, to help people overcome the grip of addiction. Approximately 20,000 people a year use a RAPt service, but the families and communities who also benefit, means the impact resonates far wider. Fundamental to the RAPt ethos is that everyone is capable of transformational change, no matter how entrenched their addiction or how prolific their crimes.

Although Place2Be and RAPt work with different client groups, there are certain similarities between the two charities. Both organisations work with individuals with complex needs that may represent a risk for criminal behaviour and drug use. In addition, individuals who engage with these services often have more than one mental health or behavioural issue.

Furthermore, both charities share a common aspiration to support individuals to overcome early difficulties and grow into pro-social and well-adjusted members of society.

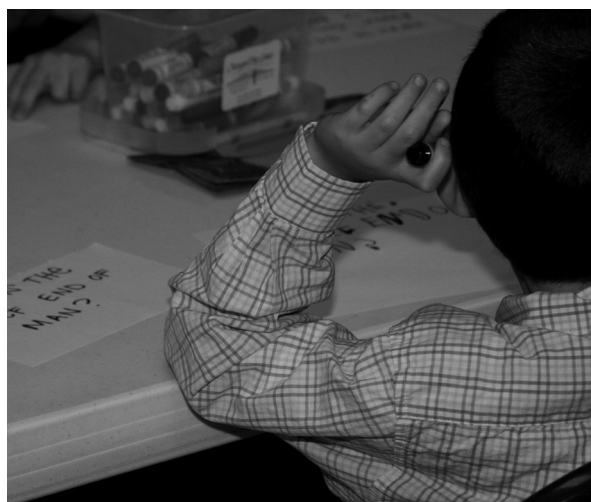
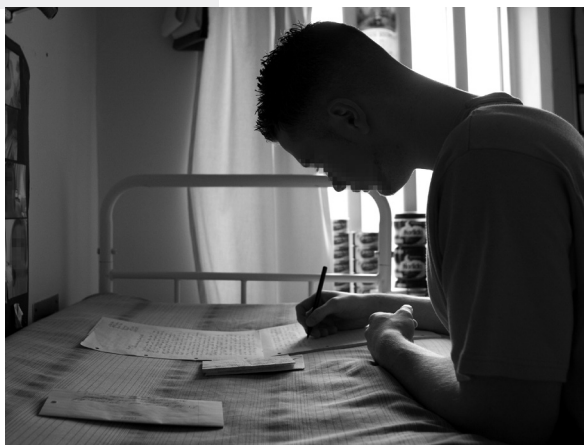


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## Factors associated with school exclusion

The most common reason for pupils to be excluded relates to behavioural issues: 39.2% of permanent exclusions were caused by persistent disruptive behaviour.<sup>1</sup> Pupils with special educational needs, children diagnosed with ADHD<sup>6</sup> and those eligible for free school meals<sup>1</sup> are also at an increased risk of exclusion from school.

Figures from Place2Be show that half of the children's families had contact with another agency in the previous year (50%), a quarter had been in contact with social care, 8% had been in contact with Child and Adolescent Mental Health Services (CAMHS) and 9% had been involved with the police and criminal justice system.

Not all children are able to access early interventions and support. Thus many grow up with mental health problems, misusing substances, offending or a combination of these. Criminal behaviour and substance misuse are interlinked, complex and mutually reinforcing factors. A recent national survey<sup>8</sup> found that 75% of young offenders had used illegal drugs in the year before entering custody. A study in the US also showed that 21% of young offenders in custody aged between 10 and 18 years were dependent on two or more substances.<sup>9</sup> In addition, there is a link between mental health problems and substance misuse, with almost 90% of 16 to 18 year olds who had a major mental health issue also misusing substances.<sup>9,10</sup> Recent research by RAPt has also shown that some of these mental health symptoms are associated with reconviction upon release.<sup>11</sup>

## A case for early intervention

Exclusion from school at a young age can increase the risk that young people are removed from positive influences and are more exposed to potentially negative ones. For example, as a result of exclusion, adolescents may try to seek attention from peers by engaging in criminal behaviour, thereby increasing the likelihood of risk-taking behaviour.<sup>12</sup>


As a result, several treatment approaches have been evaluated that focus on what works best for young people. Research shows that providing an intervention early has been found most effective. Diverting young people from offending needs to start early, prior to the age that they are most likely to commit offences.<sup>13</sup> As the most prevalent offending behaviour often starts at a young age, interventions should be timely and need to focus on addressing risky behaviours and keeping children in school for as long as possible.

The following two case studies aim to illustrate a journey from school exclusion into crime and beyond. They highlight how interventions at different stages could help to prevent this trajectory or break the cycle.

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## A journey to recovery – RAPt case study

David described himself as a 'different' child who never really felt part of his family. He believed himself to be 'unlovable' because he wouldn't let anyone get close to him. A lack of boundaries by his single-parent father and his desire to fit in with and be accepted by others led to early involvement in petty crime, smoking and drinking beer from his dad's home-brew barrel. He described incidents such as being 'put in through windows of offices' at age 6 by older children and seeking attention by setting fire to the bins.

Although David described junior school as being 'OK', his experiences changed at age 11 when he started to become bullied for being 'different'. This is when he began truanting. By age 13, David was 'bunking-off' habitually and becoming involved in fighting at school, which resulted in his first experience of exclusion. Fuelled by his desire to be 'one of the boys' he began abusing aerosols and solvents. Following this, David's involvement in crime escalated from street robbery to car theft and he was subsequently excluded from three more schools. His violent behaviour and drug use also escalated and his role shifted from victim to bully;

***"By the time I was 16 I was really quite aggressive [...] inside I was really fearful and frightened of everyone but on the outside I was this lunatic that kept people away by talking about knives and guns and stabbing people and stuff so that was my defence mechanism."***

The life that followed was one characterised by chaos, violence, misuse of and dependence on multiple drugs, destructive co-dependent relationships and emotional isolation.

David was imprisoned for a drug-related offence in 2013. It was while incarcerated that he completed the RAPt SDTP (Substance Dependence Treatment Programme). For David, this was the turning point when he realised he was an addict and that he needed help;

***"The RAPt programme helped me come to terms with myself and realise that the drug problem was a solution to my life problem, to what was going on in my head"***

David has learned to ask for help and gets support from his fellowship sponsor as well as through his continuing connection with RAPt. He feels that helping other people in recovery also helps him with his ongoing journey. He has reconnected with his family and is starting to rebuild relationships with his children.

Looking back, David feels that he was let down by the education system during his early life. He feels that his behaviour was clearly becoming 'antisocial' and that he was showing obvious signs of requiring psychological help, with behaviours such as tattooing himself with aggressive images and phrases. He believes this went unnoticed and unaddressed by teachers. He described being excluded from school as being 'right up there' in terms of what contributed to his pathway into a life of crime and drug use. From David's perspective, exclusion from school allowed him the freedom and opportunity to escalate his antisocial lifestyle and become embroiled with other like-minded adolescents;

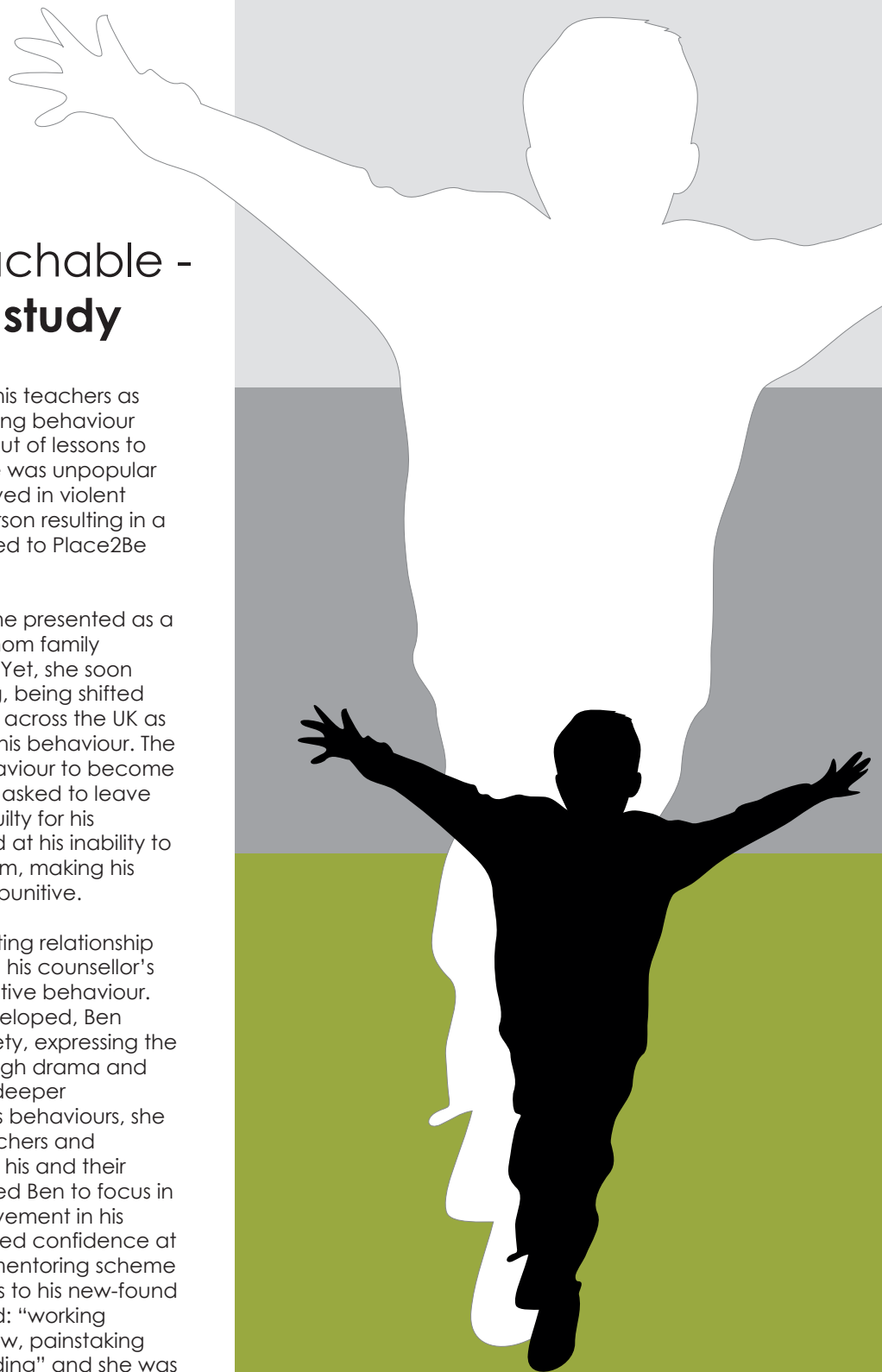
***"It's a big thing, getting excluded from school. I think it's giving people too much time and a lot of kids like myself are looking at getting excluded from school because we don't wanna be in that environment of people telling [them what to do]. I certainly didn't. From my own personal experience, getting excluded from school was like going round telling everyone, 'Yeah, I've done it, I'm excluded' and it gives you, like, 'street-cred' to me, you know."***

## Deemed unteachable - Place2Be case study

11 year old Ben was deemed by his teachers as 'unteachable'. His attention-seeking behaviour frequently resulted in being sent out of lessons to aimlessly wander the corridors. He was unpopular with his peers and often got involved in violent arguments. After an incident of arson resulting in a five day exclusion, Ben was referred to Place2Be for a year of counselling.

When Ben first met his counsellor he presented as a funny, charming young boy to whom family seemed exceptionally important. Yet, she soon learned of his unstable upbringing, being shifted between family members' homes across the UK as they felt they couldn't cope with his behaviour. The loss of his grandfather led his behaviour to become even more disruptive and he was asked to leave his school. Ben's father felt very guilty for his unsettled start in life but despaired at his inability to form a positive relationship with him, making his parenting style authoritarian and punitive.

It took many weeks to build a trusting relationship with Ben and he frequently tested his counsellor's loyalty with his extremely provocative behaviour. However, as their relationship developed, Ben gradually began to show his anxiety, expressing the difficulties of his life at home through drama and play. As the counsellor gained a deeper understanding of the root of Ben's behaviours, she was able to share this with his teachers and develop strategies to ensure both his and their needs were being met. This allowed Ben to focus in lessons, showing significant improvement in his academic achievement. He gained confidence at school, making friends, joining a mentoring scheme and even quitting smoking, thanks to his new-found belief in himself. His counsellor said: "working therapeutically with Ben was a slow, painstaking process but also extremely rewarding" and she was "so proud" of the dramatic change in his self-esteem.





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