

A Quiet Place

The child smiled up from the chair, eyes luminous in the softly lit room she was tiny and undernourished, blonde hair tied back harshly but her smile warmed you deep inside. The chair, a big relaxer seemed somehow to enfold her safe at last. She was playing quietly with some fuzzy felts, her feet contained in the hands of the reflexologist, quiet music played in the background to the accompaniment of the water fountain. The room was filled by a lovely fragrance and an Aladdins cave of treasures to delight children of all ages.

"Hello, do you mind if I come in and look at Quiet Place?"

"No, come in" she replied

What is happening to you I asked

I am having my feet massaged she said its lovely

I can see, you lucky girl I wish it was me. What else happens here?

Well, Kathy lets me take a smelly tissue back to class and I have got one for my friend and the teacher too. Oh yes and one for my mum.

And what is that? I asked

Kathy lets me choose a smell from her box and put the oil in the foot spa. Then I can have the same oil to take with me in case I feel sad in the day, and it will make me feel like I am back here in the Quiet Place again happy.

Ah I see and what are the rest of the things in here for, I can see that Kathy has finished now would you mind showing me around?

She put on her shoes and socks still smiling and relaxed and took my hand innocently. This is where I can go and hide and listen to one of the stories. She took me into a tent made of many colours and filled with soft cushions, sparkling lights and soft toys.

Mmm I thought I could just stay here myself.

She invited me to sit down and showed me some of her favourite books all full of spirit and hope and fun*.

Then we came out of the tent and went to the musical instruments, a huge gong hung on a beautiful carved wooden hangar.

What is that I asked

I can only bang the gong on the way out she looked up shyly at Kathy who nodded permission

But I can show you now if you like

Yes please

She picked up a blue padded hammer and shockingly for one so fragile gave it an almighty thwack and the whole room vibrated with a beautiful but hardly quiet sound.

Wow I said for there was nothing else to be said

She laughed mischievously at my surprise and took my hand to show me the other instruments lovely sounding bells, a rain stick, ocean drums and wooden xylophones. What do you use these for? I asked

Well I see Fran as well as Kathy and if I am feeling a bit too sad to talk Fran talks with me through the drums and we have musical conversations, I usually feel better then and perhaps do a drawing or play with the sand or clay.

But come and look at these, this is my favourite toy, she is a mummy polar bear with her baby. She picked them up and started to play without any self-consciousness. Mummy bear speaking to baby bear, having a little tea party and being tucked up in bed. Little things that go on in most children's lives as the norm but not with this little one.

What is that I asked

It's a trampoline which Fran lets me jump on when I come in it helps me keep fit

Keep fit I thought this fragile little girl?

Yes I go to ballet

She smiled up at Kathy who nodded for her to continue

I was on stage yesterday and everyone clapped, she looked down shyly.

I have asthma and cannot always do my practice and so Fran and Kathy have helped me to do this show.

I raised my eyebrows? Tell me more and Kathy said

When N first came she was very shy and often felt unwell. Her little brother comes as well and he used to be a bit grumpy with you N didn't he.

Yes, he used to kick and punch me very hard all the time but now he has stopped and we are good friends. I don't seem to be so sick all the time and have been able to practice and won my prize and that is what I said I wanted to do when Fran first asked me.

Yes said Kathy N is on her second six week programme because we are making good progress and wanted to support her through this show and there we are. Now it is time to go back to class N

Thank-you for showing me around she smiled sweetly and taking Kathys hand they went happily back to class.

I picked up her case notes for I already knew of her case with giving supervision to Fran

I stood in the room enjoying the atmosphere, the sense of stillness and peace I had hoped would be here when the idea first came to me. to be able to share this peace with others who didn't want to sit and meditate, whose lives were a noisy and chaotic simply because that is how they are where there is no privacy to think your own thoughts and just be still. Then those whose circumstances are more nightmarish, living with trauma and violence to learn how to trust an adult again to touch and be touched with care and nurture to be listened to and respected to feel love and experience compassion for others that is what A Quiet Place is all about It encompasses the whole family because we are not islands floating in the ocean unattached to our families, environment communities and society -we are each a unique flower blooming in the soil of our genetics and nurtured by our experiences. These experiences are soaked in since we are in the womb with the body chemicals and will inform our behaviour because the body and mind are rippling connections -effecting our immune system ad our bodies ability to fight infections and therefore our ability to respond and learn to the best of our potential.

The unfolding of A Quiet Place in any environment also depends upon the same premise. It has various criteria which roll out into the unique form of a school or whatever environment within which it exists.

I spoke to one of the teachers who had sent a number of children through the programme and made good use of it herself. This woman I knew to be one of the best and most dedicated teachers I had come across had been having her own family problems. So difficult had things become at home with health problems that she had taken time off for stress related difficulties. We had been able to offer her aromatherapy and psychotherapy which had maintained her in school with her 11 year olds at a crucial transitional phase for the last half term of the year. For her self esteem this had been a wonderful achievement, for the children the least disruption to their learning and the financial costs for the school saved hundreds of pounds of supply cover.

Penelope Moon

Penny has been teaching for nearly 28 years. In particular her interests lie in special Needs and Behaviour Management. She is a qualified Hypno-psychotherapist and is involved in training others. She is a founder member of Cheiron - A Quiet Place. She co-ordinates the Early Years Behaviour Team for Liverpool Local Education Authority from where she is seconded out to develop A Quiet Place.

In particular she is interested in :

Holistic education and its practical implementation within mainstream education. The development of emotional and spiritual intelligence will enhance the general ability to learn and help create a well-rounded individual. This is most relevant in our present state of society.

Complementary Therapy and its application to a broad range of conditions of the mind, body and spirit.

Parenting and the delicate issues surrounding the successful initial engagement and long term sustainability of support for families under stress

A Quiet Place

A Quiet Place aims

to provide children with a space where someone will listen to them in moments of crisis and stress.

help children to benefit from education by assisting in the removal of the blocks resulting from stress factors

assist in the process of preventing the build up of mental health problems by addressing issues at an early stage

deliver effective interventions via the holistic and creative use of innovative person-centred approaches

provide therapeutic support to children and their families within the host school

provide training and support for the staff of that school

provide innovative and targeted interventions that support the child to remain in mainstream provision

The Cheiron Trust – A Quiet Place Project

It is an action research programme which aims to develop emotional health, self esteem and confidence, and to use solution based strategies to develop positive relationships and improve communication skills.

Originally a specialised ‘within schools’ programme of therapeutic support for children experiencing behavioural and /or emotional difficulties, plans are being made for the development of Quiet Places and Quiet Spaces within businesses and community bases. Based on the concept of ‘wholism’ in its fullest sense, it utilises both traditional and complementary approaches in support of the *whole* person – mind, emotions, body and spirit, in the context of their *whole* life, incorporating support for the individual, the family, school staff and where applicable, the wider community.

A Quiet Place is more than a room. It is a very specific programme characterised by

- The *supervised practice* of therapists trained to a professional level via nationally recognised training programmes
- Strict quality control via on-going monitoring and evaluation of the programme – via Liverpool University : Department of Education

There are now many Quiet Places in Liverpool and others developing all over the country with interest overseas. Many children and families are having access to this empowering provision which helps them deal positively with their lives both in school and afterwards. It offers life-long learning about themselves and their relationships, strategies for successful communication and tools to develop more of the potential that lies hidden within.

Expressing interest:

For those who are interested in setting up a Quiet Place please contact

References :

- Bennathan.M.&Boxall.M.(1996) *Effective Intervention in primary Schools : Nurture Groups*. David Fulton Publishers.
- Department of Education and Employment : *Learning Elements of Single Regeneration Budget : Case Studies and Thematic Good Practice (5) 1999* London DfEE
- Department of Education and Employment: (1999) *Social Inclusion: Pupil Support* (Circular 10/99).London DfEE
- Kurtz. Z. (1996) *Treating Children Well*. London Mental Health Foundation
- Mills.J.C.& Crowley. R.J.(1986) *Therapeutic Metaphors for Children and the Child Within*. New York: Brunner/Mazel
- Olness. K. &Cohen D.P. (1996) *Hypnosis and Hypnotherapy with Children* (3rd Edition).London; Guildford Press
- Speke/Garston Partnership(1996) *Pathways to Integration; Regeneration Plan*. Speke, Liverpool:Speke/Garston Partnership
- Field.T.,Quintino.O.,Hernandez-Reif.M.,& Koslovsky.G. (1998)'Adolescents with attention deficit hyperactivity disorder benefit from massage therapy', *Adolescence*.33(129), 103-108
- Spalding.B.: 'The Contribution of a "Quiet Place" to Early Intervention Strategies for Children with Emotional and Behavioural Difficulties' *British Journal of Special Education* Vol:27 (3) 129-134
- Tankersley. M., Kamps.D., Mancina.C. &Weidinger. D.(1996)'Social Interventions for Headstart Children with Behaviour Risks', *Journal of Emotional and Behavioural Disorders*. 4 (3) 171-182
- Walker.H.M., Kavanagh K., Stiller.B., Golly.A., Severson H. & Feil.E.(1998) 'First Step to Success, an early intervention approach for preventing school antisocial behaviour', *Journal of Emotional and Behavioural Disorders*. 6(2). 66-81

Her comments about the children include :

'I have been to the Quiet Place myself and do use the techniques I have learned at home' (teacher response).

. Some also referred to the obvious pleasure the children took in the room and its facilities, and its effect in making them more reflective - 'they seem to be more able to stop and think things through'.

Of those where the improvement had been marked, self-confidence was often cited:

'His progress through the intervention as akin to 'watching a flower blossom'. He began to make appropriate eye contact (something he never did previously), especially with me, and he began to relate more strongly to me. He grew in confidence in class, no longer afraid to ask or answer questions. The intervention made him 'feel special' (especially the massage sessions), and he particularly benefited from 1:1 sessions with the therapist. The computer software also proved to be beneficial, providing A with a non-intrusive relaxing activity.' (Child 13 - teacher)

Of the responses all were positive; fourteen of the children were felt to have improved noticeably, and of these, seven considerably. In seven of the children there were no marked changes in behaviour in the classroom. In one of the cases where only slight improvements had been noted the peer group situation was seen to be the major factor, and in the other three the teacher felt that the need was longer term than could be effectively dealt with by a six week intervention.

All of the teachers interviewed after the intervention with the child in their class showed a good understanding of the work that went on in the Quiet Place, and some of them had taken advantage of it themselves. This appeared to help when choosing children to attend, as most the referrals made were very appropriate. Very often poor self-confidence, poor self-esteem, constant

attention seeking and a general sense of insecurity were cited as the main reasons for referral.

The teachers were also asked for their opinions about the effect the Quiet Place had had on the school as a whole. Of the six who responded, all noted positive changes and reference was made to the overall calming effect the work in the room appeared to have on the daily life of the school community. A reduction was also noted in the difficult behaviour in the playground

What seems to work in the Quiet Place?

An analysis of the interview responses of the teachers in 18 of the cases and parents in 16, revealed the following pattern of comments regarding the effectiveness of the provision:

A calming influence

This was particularly noted in 8 of the cases, and featured highly in the teacher (and headteacher) responses regarding its effect on the school as a whole

Eight Parents reported that their children seemed a 'lot calmer in themselves', and five of the parents particularly valued the assistance they themselves had received at the Quiet Place:

'She has become much more relaxed in herself and above all has managed to free herself from being dependent on her sister. She is now able to make friends on her own and has become less socially dependent on her

sister. I went up for a massage too and thoroughly enjoyed it - very relaxing'.

(Child 8 - parent)

'After her period at the Quiet Place she seems to still have loads of energy, but has calmed down - she hasn't mentioned her dad so much and doesn't appear to want to see him as much as previously. She is not 'kicking off' so much and appears to be a lot calmer in herself. Her arguments with her sibs now seem more like the normal sort of thing that goes on in families, but she is still not sleeping regularly.' (Child 4 - parent)

Self-Esteem

In thirteen of the cases self-esteem featured as a major cause of the difficulties experienced prior to visiting the Quiet Place. Both teachers and parents also noted marked changes in the levels of confidence in these children as well as an enhanced ability to discuss problems:

'After her time in the Quiet Place she is much more forthcoming and talkative and she has started to go out much more. She will now open out and have a conversation, she is much chattier on the whole.' (Child 9 - parent)

For three of the children where self-esteem was cited, acute attention seeking behaviour had also been reported prior to the programme. The increased attention offered by the programme, both in terms of personal attention and massage seemed to make a considerable difference.

Ability to reflect and talk things through

The ability to reflect on their own behaviour and difficulties was also cited; the explicit identification of problems and feelings and bringing them to expression.

'After attending the Quiet Place she appears more settled, and is aware of how much she herself has improved. She has a much more positive attitude. The Quiet Place seems to fulfil her need for attention and provides an opportunity for her to get away from the stresses and strains of the classroom. She can now reflect much better on her difficulties.' (Child 10 - teacher)

'Since attending the Quiet Place she is much more tolerant with her brothers and sisters and will talk about what is going on with her, she can now discuss her difficulties and has become more open. She has had an opportunity to work on her problems and has made progress.' (Child 10 - parent)

Anger management

In four of the successful cases anger management, working with feelings and making sense of them, was mentioned by both teachers and parents as a major issue which had been addressed.

'He was approaching adults with the expectation of negative, confrontational responses. He is now seeking help from others rather than closing down into himself. He is now able to take the needs of others more into consideration. He has calmed down considerably and is able to keep his temper for longer and is able to rationalise rather than just fly off the handle as he used to do. It has helped him to settle in. His outbursts are more moderate and he is not running off anymore.'

(Child 3 - teacher)

Reducing parental stress

Several of the parents interviewed referred to the direct effect the intervention had had on them, and in consequence also on the atmosphere at home:

'I also appreciated the help I received there - helped me to relieve stress and develop more positive thoughts - I found it helped - I would like it ideally for all children - help them to change old patterns. I found it most helpful as it works on a deeper level and helps to work with the stress.'"(Child 4 - parent)

'The Quiet Place was a 'God send' - he can be taken out to calm down - it is helping me as well as I have individual sessions and feel I am gaining more insight - I couldn't see any solutions earlier, I was too caught up in it all. It is good to have someone to talk it through with.' (Child 3 - parent)

One of the major advantages of provision such as this is that parents have a direct line to help. One of the headteachers noted what a relief it was to be able to direct parents to assistance when they were under stress, rather than having to rely on referrals to outside agencies. There would appear to be within the Quiet Place model great potential for the on-site development of multi-disciplinary work with families in need.

Longer term problems and interventions

In six of the cases there are references to the need for longer term intervention and the feeling was expressed that the six-week programme merely started to move a process into gear:

'During the intervention period, C's behaviour improved significantly but was still not perfect. After the initial intervention period finished, C continued to have massages, which he had particularly enjoyed. However, as soon as the intervention period finished, C's behaviour took a drastic decline. He was out of control and hard to handle. This has continued to be the pattern, especially in recent weeks, as talk of which secondary school he will be sent to has arisen, causing extreme anxiety and unrest in C and in the family (C has been physically sick in the past when discussing secondary school).' (Child 15 - parent)

'She can get herself in a state - finds it hard to build up relationships with others - they are aware that she had lashed out in the past. She is now keener to make contact with others - but it still doesn't last too long. She is now beginning to listen to

others and is trying harder to be nice to them. Still too early to make a clear assessment - but there are improvements in her relationships with others.'

(Child 1 - teacher)

The teachers made several points regarding the way in which the Quiet Place had impinged on the life of the school:

- That it has had a significant effect on the emotional needs of the children through the opportunity it provided for more contact time on a 1:1 basis for those children who have a great need for it. It combines an opportunity for them to gain a greater understanding of themselves with fulfilling their need for more attention.
- The boosting of children's self-esteem is a major issue
- There is a fair amount of jealousy on the part of the other children - why are the children who go there so special? Why can't all go?
- It hasn't as yet really impinged on all children only a few

With regard to future developments the teachers felt:

- It should be available to more children
- The school could never manage it from its own resourcing
- Children might attend for a variety of reasons e.g. grief, separation, etc.
- Opening it up as a wider resource for parents and families.

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children experiencing behavioural and /or emotional difficulties. Based on the concept of 'wholism' in its fullest sense, it utilises both traditional and complementary approaches in support of the *whole* child - mind, emotions, body and spirit, in the context of their *whole* life, incorporating support for family, child and school staff.

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- The *supervised practice* of therapists trained to a professional level via nationally recognised training programmes
- Strict quality control via on-going monitoring and evaluation of the programme - currently with Liverpool University : Department of Education as a registered PhD programme

There are now 6 in Liverpool and others developing all over the country with interest overseas. Many children and families are having access to this empowering provision which helps them deal positively with their lives both in school and afterwards. It is a life long learning about themselves and their relationships and successful communications to develop many more of the potential that lies hidden within

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3. Parenting and the delicate issues surrounding the successful initial engagement and long term sustainability of support for families under stress

No blame is the key phrase involved. Successful support and long term engagement leading to changes in behaviour need through the ACE factor:

- **Awareness**
- **Choices**
- **Energy**

Further Information:

Parent Pack can be obtained by accessing the web-site:

www.cheiron-quietplace.com

or writing to:

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Bandler .R.& Grinder. J. (1982) *Reframing Real People*.Utah:Moab
Bennathan.M.&Boxall.M.(1996) *Effective Intervention in primary
Schools:Nurture Groups*. David Fulton Publishers.
Bradway.K. (1997) *Sandplay: Silent Workshop of the Psyche*. London:
Routledge
Day J.(1994) *Creative Visualisation with Children*. Shaftesbury:Element
Department of Education and Employment : *Learning Elements of Single
Regeneration Budget : Case Studies and Thematic Good Practice (5) 1999*
London DfEE
Department of Education and Employment: (1999) *Social Inclusion:Pupil
Support*
(Circular 10/99).London DfEE

Kurtz. Z. (1996) *Treating Children Well*. London: Mental Health Foundation
Mills.J.C.& Crowley. R.J.(1986) *Therapeutic Metaphors for Children and the Child Within*. New York: Brunner/Mazel
Oaklander V. (1997) *Windows to our Children*. New York : Gestalt Journal Press.
Olness. K. &Cohen D.P. (1996) *Hypnosis and Hypnotherapy with Children* (3rd Edition).London;Guildford Press
Speke/Garston Partnership(1996) *Pathways to Integration; Regeneration Plan*. Speke, Liverpool:Speke/Garston Partnership

1. Cigales.M., Field..T., Lundy.B., Cuandra. A.&Hart.S. (1997) 'Massage enhances recovery from habituation in normal infants' *Infant Behaviour and Development*.20(1),29-34
2. Field.T.,Morrow.C., Valdeon.C. Larson.S., Kuhn.C.& Schanberg.S.(1992) 'Massage reduces anxiety in child and adolescent psychiatric patients' *Academy of Child and Adolescent Psychiatry*. 31 (1), 125-131.
3. Field.T.,Quintino.O.,Hernandez-Reif.M.& Koslovsky.G. (1998)' Adolescents with attention deficit hyperactivity disorder benefit from massage therapy', *Adolescence*.33(129), 103-108
4. Spalding.B.: 'The Contribution of a "Quiet Place" to Early Intervention Strategies for Children with Emotional and Behavioural Difficulties' *British Journal of Special Education Vol:27 (3) 129-134*
5. Tankersley. M., Kamps.D., Mancina.C. &Weidinger. D.(1996)' Social Interventions for Headstart Children with Behaviour Risks', *Journal of Emotional and Behavioural Disorders*. 4 (3) 171-182
6. Walker.H.M., Kavanagh K., Stiller.B., Golly.A., Severson H. & Feil.E.(1998) 'First Step to Success, an early intervention approach for preventing school antisocial behaviour', *Journal of Emotional and Behavioural Disorders*. 6(2). 66-81

**The response of children and adults to their experience of
QUIET PLACE
Heather Piper June 2001**

Summary:

During a two day period in June 2001 nineteen children and adults, were interviewed regarding their involvement with Quiet Place. The Quiet Place initiative began three years ago and is operating within a number of schools in Liverpool, Knowsley and Croydon. All respondents were positive about the benefits of Quiet Place for those experiencing stress, sorrow and difficulty in controlling their behaviour. This small piece of research is part of a planned, longer-term process that includes both quantitative and qualitative elements and is being co-ordinated by the University of Liverpool. This research did not focus on the long-term effectiveness of Quiet Place, but rather the understanding and feelings of those who use the service. The area of enquiry was concerned with whether the interviewees 'felt' Quiet Place to be beneficial to the children who use it and to the whole school community.

Background information:

(Kathy and Penny – I thought you could add a page here that sets the scene about the development of Quiet Place – its aims and purposes etc.)

The Research Process:

One researcher (with some prior knowledge of Quiet Place) interviewed nineteen people in three schools in Liverpool. The schools included one with the original Quiet Place that had been in existence for over three years and two further schools that had both experienced Quiet Place for approximately two years. The schools were selected so that some members of staff would have a longer-term view, and would not just be commenting on a recent development.

All interviews were of a semi-structured nature, questionnaires (see later) were adhered to, and prompts were used throughout. This research was chiefly concerned with gaining qualitative feedback from children who had first hand experience of Quiet Place, from some school staff with both experience of a personal nature, as well as knowing the many children who had used the service, and from some parents who had used Quiet Place themselves and/or whose children had used it. Although this small piece of research is reported separately, it is one part of the longer-term research process that began with the onset of the first Quiet Place and is to continue for some years.

Interviewees were selected on the basis as to what was possible. As the research was conducted to a very tight schedule, some classes were out on school trips and some teacher's timetables did not allow time for interviewing. However, all those approached and with the time to spare agreed to be interviewed. The children were selected mainly by the workers of Quiet Place or by their teachers; again this was on an opportunist basis, ie. anyone who was there and available at the time. Although the sample is not random in the traditional sense, in reality it was very random indeed with the researcher in some instances just wandering into a class and asking if any child there had ever used Quiet Place. The schools had only known about the research process a couple of days beforehand and the sample reflected this, ie. it was not pre-selected on the basis of those most likely to say something positive.

Children:

(Penny and Kathy I wondered whether you may want to add in here the sample interviewed by Janet at Hope Valley for her MA. She says she interviewed 10 children in her class, all of whom gave positive feedback – I did not interview any of the same children so it would be ethical. It would mean changing the numbers throughout my write-ups, but would beef up the sample size. It would probably be best to add a sentence saying another interviewer had begun this process of interviewing in one of these same schools last year or something – just an idea.)

In total eight children were interviewed over the two day period, five girls and three boys aged between five and ten years of age. The researcher did not establish details relating to the family background of any of the children interviewed or enquired as to why they had been recommended to use Quiet Place. However, some of the children chose to explain why they needed to go to Quiet Place. Reasons included unhappiness, anger and consequent behaviour difficulties. The three schools were situated in relatively deprived areas where many of the children would be living in homes where the adults were unemployed etc. The children's interviews included a questionnaire, and also involved asking the children to draw some picture of themselves inside a circle, before, during and after they had been in Quiet Place (see later). The children completed their drawings whilst the researcher asked them some questions, and then they were asked to explain their pictures. This had the advantage not only of using different approaches for children less keen on talking to adults, but also meant that eye contact could be avoided as the children could be busy with their pictures and answering questions at the same time. This interviewing process worked well. All children appeared relaxed and were willing to participate without any sign of embarrassment. The following sections relates broadly to the questions asked during the interviewing process.

History of Use: All eight children immediately said that they enjoyed Quiet Place. Some were currently attending, some had finished attending very recently and a couple had attended more than a few months ago. The children were not embarrassed that others knew that they used Quiet Place, as one girl mentioned 'the teachers get done too'. They all had a full grasp of how many times a week they attended and for how many weeks, with whom, and why they could not attend forever, because of all the other children who could enjoy it too, 'other children need to go too don't they'. The whole process had clearly been fully explained and understood even by the youngest children. They were aware that it was a limited service even though they would all have liked to have more of it.

All children had attended Quiet Place for a six-week period, usually three times a week. One or two had dropped in for the odd session since and a couple had been through two sets of six-week programmes. The activities they described being involved in, changed a little according to their age. The five year olds mainly talked about bouncing on a trampoline and playing in the castle, although interestingly in their pictures they included themselves having a foot massage. The researcher did not get a sense that this was talked about less by little children because they were awkward about it, but rather that being little they were more used to adult women looking after them and so it required less comment. The older children talked about stories 'to calm myself down', aromatherapy, foot massages, playing on the computer and learning how to control their heart beat etc and all of the children enjoyed every aspect of their time in Quiet Place. The children could all name other children who used the service and most of them talked about their time in Quiet Place with someone else; this could be the teacher, a parent, and also a best friend. One ten-year-old boy said 'I just talk about it with my teacher, because I want it to be private between myself, my teacher and Quiet Place'. One child said 'I tell my mum I've been, but I don't tell her what I've been doing. I like that to be private'. The children were also aware that the service was available to their teachers, and as one child said 'it's for everyone, we can all use it'.

Self: The children found it difficult to identify what they liked best or what was their least favourite activity. When asked what was best about Quiet Place, one ten-year-old girl said 'just going in there, it feels nice as soon as you walk in'. Another seven-year-old girl added in answer to the same question 'the very nice people'. A couple of children said 'just being relaxed'. One five-year-old boy said he enjoyed blowing the whistles the most, and being able to play different notes. A nine-year-old boy said he enjoyed doing his book of happy and sad feelings, saying 'it made me feel relaxed and understood'. Some children just said 'I like everything'. It was even harder to find anything the children did not like and most just said 'nothing, I like it all'. One five year old said 'I didn't like it when the ceiling fell down!' obviously referring to a specific incident. Another ten-year-old boy said he had been nervous the very first time he had attended, but that feeling went very quickly. All children said that it made them feel 'calm' and 'happée' being in Quiet Place. One seven-year-old-girl drew pictures of herself crying before she went to Quiet Place and a picture of herself smiling afterwards. Paradoxically, one six-year-old boy drew a picture of himself sad afterwards because it was all over. When asked how long this feeling lasted the replies ranged for a few hours, (worryingly in this case the young girl added 'until I go home') to 'absolutely ages', which was then described in terms of weeks when probing. The children who attended due to problems in controlling their anger claimed it helped a lot, but that they needed a bit extra, because they found it so hard by themselves. One impressive ten-year-old boy in this category had the language to explain his feelings regarding his own anger very well. Whether this is a result of Quiet Place input, teaching staff or family etc or a combination of everything would be difficult to ascertain, but nevertheless it was unusual. He drew pictures of himself apologising to other children for earlier behaviour after his time in Quiet Place, and a picture of them saying 'it's accepted'.

Future: The children would all like further contact with Quiet Place. The reasons for this varied, from ‘because it’s so nice’ to ‘because it makes me calm’ and ‘because I need it’ and this last point usually related to feeling anxious or violent. The children generally could not think of any ways that Quiet Place could improve. This is understandable because it is always hard to imagine something unknown, but the children genuinely thought of it as perfect as it is, so ‘more of the same’ was the most frequent comment made, but one seven-year-old suggested playing ‘dressing up’.

Staff: During the two-day period nine members of staff were interviewed from the three participating schools. This staff group comprised of four teachers (including one head teacher), four welfare assistants and one teacher support assistant.

History: All those interviewed had been employed in their schools on a long-term basis, in some cases twenty-five years or more. Thus all staff members had knowledge of their school situation before and after Quiet Place. All those interviewed had personal experience of using Quiet Place themselves as well as seeing the many children who had been referred there. Apart from a couple of staff who had seen videos about the original Quiet Place, most knowledge focussed on their own experience in their own school. The staff were able to discuss how they or other staff members were a little sceptical at the beginning, but now they were completely delighted with the service offered. Any original negative views were either of an ‘it’s not for me all this touchy feely stuff’ variety, or were more economic in origin, so ‘why have money spent on this, when we could have more teachers or equipment’. Changing from being sceptical to advocating Quiet Place for all, came as a result of observing children and having tried it and seen it for themselves. In each school it was reported that a hundred or so children (and more in the original Quiet Place), had benefited from the service. One school had recently had the service reduced due to a lack of external funding and this had created some difficulties.

Before and after Quiet Place: The staff without exception were wholly positive about the experience. However, there were some noticeable differences between the three different school's comments. One school regarded Quiet Place as part of its whole. The Quiet Place staff had been into the classes before children had to take their SATs exams and calmed the children down with relaxation techniques. Also children in the EBD unit had been taught to massage each other's hands in class, this was now just routine. The staff (and children) all related to Quiet Place as central to their existence. Comments were made such as 'it has affected our whole atmosphere, the way we work, its an added strand, its been an input to the whole school community'. The other schools although positive, tended to make comments about helping the individual rather than the whole. So comments included 'the best thing about it is that we can offer a child help immediately, we don't have to make a referral and wait six weeks or so or until the situation breaks down and we have to exclude the child, we feel much less helpless than we used to'. Also 'we can help those children who go to the wall ie. those who just take their problems inwards'. Mainly comments were made about how it calmed children down and how they benefited from the one to one attention from a friendly and concerned adult, 'it's somewhere totally relaxing, just peace and tranquillity'. A few staff mentioned how being in Quiet Place was probably the only time that some of the children received individual attention from a nice adult. Many mentioned how this one-to-one approach helped the children's self esteem and confidence and they became much better at dealing with the other adults in their lives, such as the teachers, as well as other children. The only negative comments reported over the two day period was that one member of staff could remember one child who had been upset by the process (details of this were not offered, other than this child had considerable problems to deal with at home), and one parent had claimed that the process was giving her child flashbacks of a negative type. On exploration it emerged that this parent was probably nervous of what her child may be saying to a member of Quiet Place about things happening in the home. These were the only remembered negative experiences that could be recalled from hundreds of examples. All the schools were able to allow their staff to benefit from Quiet Place on a personal basis to a greater or lesser extent. Having this personally positive experience themselves meant that they were able to understand the benefits for the children more fully.

Future: All the schools wanted to retain Quiet Place and those with a more limited service wished to be able to extend it to be available most of the time. The majority of suggestions relating to any changes in the future amounted to just more of the same. Some specific suggestions included 'it would be nice if after the six week programme the follow up was a bit more systematic. Some children cope for a few weeks but then need more input.' This was usually explained in terms of the very difficult home conditions that some of the children had to live in, and they needed more ongoing help in order to cope. One teacher mentioned that they found filling in the assessment forms on the various children, rather an onerous task as their jobs already included so much paperwork. She said she did it in such a hurried way that she questioned its usefulness. She also wondered whether when parents had made a referral, they would probably be the best one to complete the follow up assessment forms. In terms of offering advice to schools currently without a Quiet Place but thinking about it, comments included 'you'd be mad if you don't take it up', 'just try it and see' and 'come and see the changes in the children'. One thoughtful comment included 'make sure you take the staff group along with you, it works much better if everyone wants it'.

Parents:

(Penny and Kathy – again I wondered if you may want to add in Janet’s MA sample here. She told me that only a few parents responded to her questionnaire but they were all positive. Again they are different parents to the ones I interviewed - so it wouldn’t be a problem research wise.)

Only two parents were interviewed and in both cases they had children who had used Quiet Place and they had used it themselves. Their knowledge tended to be more limited than that of the children and staff, and was mainly focussed on their own experience.

History: They each had more than one child so their involvement had been over a few years as more than one child in each family had used Quiet Place. One parent had a friend who used it but the other did not know of any parents other than herself.

Self and Child: The parents (two mothers) discussed their various children’s difficulties such as fighting in class, being worried about their father who was ill, being bullied etc. They both claimed that the input calmed their children down and made them able to cope better. They also thought that the effect lasted for quite a while but in one case the mother felt her child needed more input now. One of the mothers said ‘I noticed a change in him immediately. He talked about going but not about what he did’. This comment was echoed by a couple of the children. In terms of their own experience they had both enjoyed various forms of relaxation. ‘It helps you forget everything – those few minutes seem like a whole day, I feel I can cope better.’

Future: In terms of suggesting any changes, the parents had the same difficulty as the children in imagining something they had not experienced. However, they discussed their own worries before they had first hand knowledge of Quiet Place. ‘I thought it was just for people with troubles and not just something for everyone’. There was also a specific problem of having a younger child cared for in one case. The school crèche helped if there was a space, but this was not always possible. They felt that somehow the process needed to be explained better to parents not currently taking advantage of Quiet Place, so they could understand it. Both of these women felt that they would happily talk to other parents and help in this process if that was considered an appropriate way forwards. Like the children, they were not at all embarrassed about their own involvement with Quiet Place once they had experienced it first hand.

Conclusion:

As was stated previously this piece of research did not specifically focus on the effectiveness of Quiet Place, as there are longer-term research strategies in place to address this issue. This research was more interested in qualitative feedback from those most closely involved in the process, especially the children themselves. All those interviewed regarded Quiet Place as a positive addition in their lives and in some cases the life of the whole school community. The positive comments were overwhelming and comprehensive. They included Quiet Place itself, being a lovely calming place that immediately makes you feel happy. The various Quiet Place workers were all described as lovely people without exception. The effects on the individual were also described in positive ways, always in the short term and sometimes in the longer term.

In the school where Quiet Place had been wholly integrated as a key feature of the school, the total effect was very impressive. The school was calm, happy and welcoming. It was hard to imagine a visitor from another school not wanting to share this experience. To conclude in the words of a seven-year-old girl describing the pictures of herself to the researcher, about her time spent in Quiet Place ‘can you see now how my smile is getting bigger and bigger’?

It is a project of Cheiron -Quiet Place Ltd. a group of like minded individuals whose broad aims are the development of **Emotional Literacy** and **Well-Being** . It is a business whose objectives include :

- the creation of models of excellence, not only in its working practices but also in any premises/projects it establishes and/or supports.
- supporting holistic approaches to therapy using effective, innovative and creative techniques appropriate to the needs of clients.
- working in a manner that catalyses and supports positive social change for all its stake-holders.
- seeking effective strategies to support children and families under stress
- working to produce an increase in self-esteem, self-control and more acceptable social behaviour in target groups of children and young people at the same time to develop positive and consistent parenting skills amongst their parents using similar methodologies

