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Book Review

Working with Relational Trauma in Children's Residential Care: A Guide to Using Dyadic Developmental Practice

By Kim S. Golding, George Thompson, & Edwina Grant

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Reviewed by: Matthew Scotland
Support Practitioner, Children and Families Services, Crossreach, Matthew.Scotland@crossreach.org.uk

Working With Relational Trauma in Children's Residential Care is intended by its three authors as a training resource and guidebook that provokes thought and provides guidance for practitioners. The book's thorough treatment of trauma-informed child care complements our foundational Crossreach texts (Practice Model, TCI, and Beacon House), focusing specifically on dyadic developmental practice in residential settings. The opening chapters explain key DDP principles, applying familiar terms such as attachment theory, intersubjectivity, the window of tolerance, PACE, and storytelling. The book explains theory in an accessible manner, with its application to practice brought to life by an array of case studies, illustrations, and reflective exercises. The book's reflective and illustrative format prompted me to write a reflective review using its images as discussion points while considering my first year in residential child care.

Connection before correction

In chapter five, 'Co-Creating the Meaning of Love' (pp.109-128), Dan Hughes' axiom 'no correction without connection' is used in the image below (p.118) to demonstrate that connection comes not only before correction, but during and after as well. This is further illustrated in the composite case study of Aadesh (pp.119-123), a ten-year-old boy with significant developmental delay. DDP approaches Aadesh's pain-based behaviour (being unsafe in the car) as a learning opportunity, rather than triggering the adult 'into punishment mode'

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(p.124). By mutually reinforcing connection and correction, Aadesh progresses from shame to guilt (about endangering others), marking a crucial step forward on his developmental journey. This reflects my experience of residential child care as requiring soft, PACEful virtues on one side and firm boundaries on the other, described as a 'balance of boundaries and empathy' (p.126).

Figure 1 'Figure 5.2: Connection and Correction (Discipline)' in Golding et al. (2018, p.118).

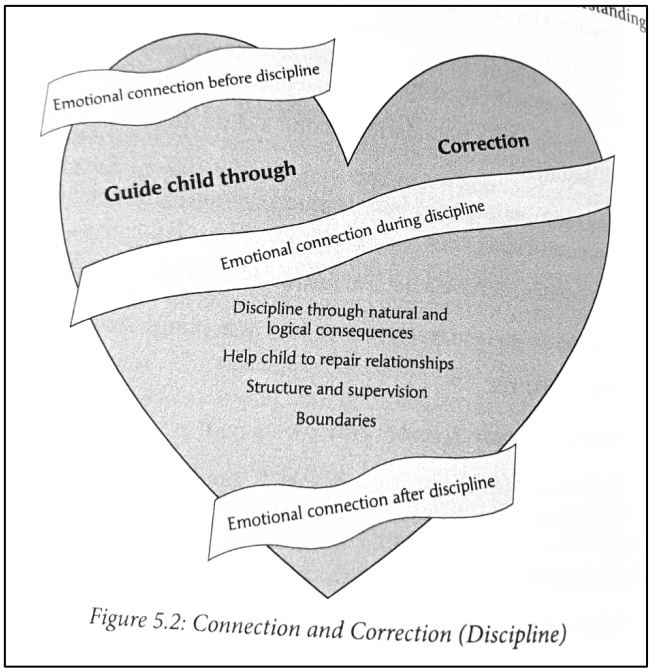

Figure 5.2: Connection and Correction (Discipline)

The two pillars

In the illustration below, 'The Pillars of Residential Care' (p.139), these soft and firm aspects are represented as twin supports, titled 'relationship' and 'structure'. The idea is that having one without the other is not feasible, and even a subtle elevation of one over the other would destabilise the whole system. Adults in residential care are described as cultivators of 'relational experience alongside structure' (p.139). While the book idealises the two pillars as co-equals, the reality is that, in practice, they can be viewed as a mismatch. Practitioners caught in the either/or of a dialectic, rather than the both/and of the dyad, may worry that being too PACEful compromises structure, or that being too structured stifles PACEful relationships. These tensions can escalate over the delicate matter of consequences, described in the book as 'a big deal in residential care! Indeed, they are one of the major causes of team disagreements' (p.116).

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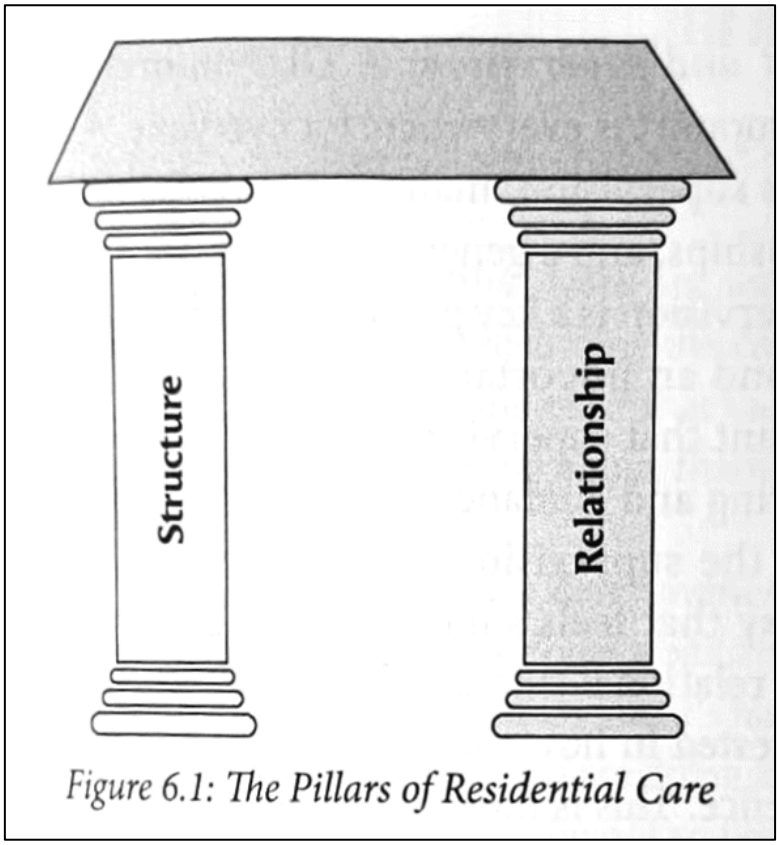
Figure 2: 'Figure 6.1: The Pillars of Residential Care' in Golding et al. (2018, p.139).



Chapter 6, 'The Pot Noodle Story' (pp.129-152), offers a light-hearted inroad into understanding team disagreements. A care manager complains about a team-meeting dominated by a 45-minute argument over how many Pot Noodles a child should consume. This in-depth discussion about an everyday snack demonstrates the uniqueness of a residential 'family' and its perpetual quest for balance, with consistency and unity commonly viewed as its key makers and markers. As a staff interviewee attests, 'the most important thing when you're working in a team is everybody's working in unison with each other' (p.135). While caregivers seek collective unity, the Pot Noodle Story suggests recognising that unity is frustrated by group diversity. How can a complex multiplicity of persons come together under one roof sharing a singular vision? And how can we cater for each child's unique personality within a single system of care?

Theoretically, team members could be arranged on a spectrum of positions between soft and firm extremes. At one end, a child could be permitted as many Pot Noodles as they please, while at the other end the snack could be banned altogether as a serious health risk. Edwina, a co-author of the book, places herself on the softer side, and interprets this as a reaction to her own childhood experience of firm parenting that 'tended to be over-boundaried with high expectations' (p.127). This section of the book observes a residential refining process in which overly soft practice firms up and overly firm practice softens.

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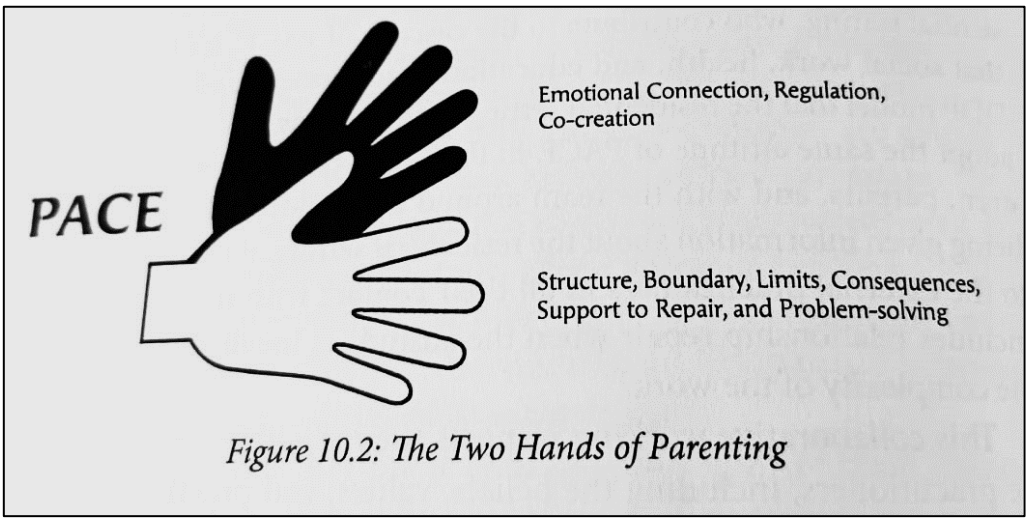
The two hands of parenting

While the two pillars portrayed perfect balance, it could be argued that the image was too abstract and unmoving to capture the flux of real-time developments on the ground. Dan Hughes' The Two Hands of Parenting (p.238) offers an ambidextrous solution to managing soft and firm virtues in complex environments.

Figure 3: 'Figure 10.2: The Two Hands of Parenting' in Golding et al. (2018, p.238).



The book features PACE as a mainstay of the DDP model, with its two-handed application brought to life in the case study of Andy (pp.212-213). When a stand-off develops between a young person, Andy, and staff members over access to gaming controllers, an on-call manager arrives and de-escalates the situation. Rather than revisiting Andy's behaviour, the manager prioritises connection by validating the child's feelings, 'this must be really difficult for you, Andy' (p.213). Having established connection, the manager guides Andy towards the intended location in a co-operative manner. In this way, 'hand one connected first with the young person's experience underlying their dysregulation. Hand two provided the boundary, structure, and consequence' (p.213).

The two hands illustration is subtitled, 'the cascade of PACE needs some containment' (p.238). PACE is metaphorised in soft terminology as an outpouring of water flowing 'down and through every tier of the organization. All can swim together in the tiered pools of PACE' (p.226). The water theme continues throughout the chapter, offering insightful dyadic scenarios such as a child learning to swim, where repetitions of holding and releasing in the pool models the bilateral patterns of care (p.227). 'Two hands are needed for the child to learn to trust in adult care, then to trust in adult authority, and, ultimately to trust in self as they mature into confident, independent, and autonomous adults' (p.239).

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The duality of theory and practice

The pairing of soft and firm virtues in the two pillars and the two hands highlights a further duality, that of theory and practice. This involves perceived tensions between the ideal milieu portrayed in textbooks and the day-to-day experience of practitioners. Staff reflecting on training 'noted how much sense the theory made to them in the room but how challenged they were to put some of what they were learning into practice' (p.221). In the either/or of a dialectic, theory makes sense in the training room but not always in the home. Scholarly ideals are easily overshadowed by the realities of practice, the orderly calm of the two pillars was all-too quickly disquieted by a Pot Noodle, and the interviewee's desire for collective unity implies that this remains unfulfilled. To imagine the milieu free of tensions would be as unrealistic as imagining a life or a world without challenges or inconsistencies.

Working with Relational Trauma in Children's Residential Care takes the pragmatic approach that 'tension in the team is both inevitable and necessary. From tension can arise creativity and change' (p.147). We cannot expect reality to mirror the ideal. By its very nature, an ideal transcends the real; if it were attainable then it would cease to be an ideal. Therefore, tensions between theory and practice are as inevitable as they are in human relationships. As role models, our handling of tensions and attitude towards disappointment can model resilience over dysregulation when people or circumstances fall short of our expectations. Our children are ever watchful, they 'notice how everyone relates to everyone else' (p.148). Our attitude is crucial given the profound disappointment they may feel at not having their ideal home. Many arrive with 'jagged stories of shame and terror' (p.103), which, using the metaphors in this book, could be described as piles of rubble instead of pillars, and clenched fists instead of PACEful hands.

By addressing the dualities of child care and embracing their tensions, the authors invite a broader application of dyadic principles to our whole system of care as well as human relationships. In a dyadic manner we can unify theory and practice along with soft and firm virtues. Conceptual pairings could progress dyadically, like strong human relationships maturing through tensions. This review followed my own train of thought while reading *Working with Relational Trauma in Children's Residential Care*, whilst others who spend time in the book will find their own avenues for reflection. For those seeking immediate practical value, a comprehensive index section provides a wealth of subjects for the busy practitioner to pick up and read for quick insights and ideas.

About the reviewer

Matthew Scotland studied at Glasgow University, initially focusing on psychology and sociology before his interests shifted to philosophy and theology, where he earned his degree. He now works as a practitioner in residential childcare with

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Crossreach, the social care arm of the Church of Scotland. Matthew has found his background in philosophy and theology resonates in interesting ways with the theory and practice of residential child care.

The review author was reviewing their own copy of this book.

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