

# Trauma informed practice

## **Neurobiology of trauma & relationships**

This is the fundamental aspect of trauma informed practice. It provides us with knowledge of how brains develop and what healthy brains need. All actions need to focus on being repetitive, rhythmical, routine and - most importantly - relationship based.

All brains are unique and each child/young person has unique and individual needs

## **Healing relationships**

Relationship is central to trauma informed practice. Every relational exchange is an opportunity to understand the child and also to help them repair and recover from their traumatic experiences. Never underestimate the power of the connection you have with the young person.

## **Family and culture connections**

Culture is a part of who we are long before we understand what culture is

Look for ways to incorporate the child's culture into the everyday

This links back to being repeated and relational, rather than one-off experiences

Ensure the child's family connections are maintained and privileged, including siblings and extended family

Importance of life story work

## **Child centred**

Recognises critical time-frames in childhood and adolescence, including assisting children and young people as early as possible. Takes into account the developmental needs of children and young people in all interventions, providing children and young people with appropriate opportunities to participate in all aspects of child protection interventions which affect them. Promotes a collaborative approach to the care and protection of children, including the strengthening of networks that are critical to their well being.

# Trauma informed practice

## **Therapeutic assessment & plan for the child**

Compiles the child's psychosocial history, providing detailed information about the child's trauma. Covers the child's development across several domains, including health, education, identity, behaviour, emotional and social presentation etc.

Analyses the impact of the trauma experiences on the child and their development and functioning. Clearly articulates the child's therapeutic needs and their therapeutic care plan.

Case management should incorporate a therapeutic focus

## **Staff training**

Trauma training such as this one. Additional or specific training – e.g. sexualised behaviours, adolescence, life story work .

## **Care team and collaboration**

Commitment to the child and holding them at the centre

Agreed roles and responsibilities

Clear communication, relationship building, honesty and trust among the team members

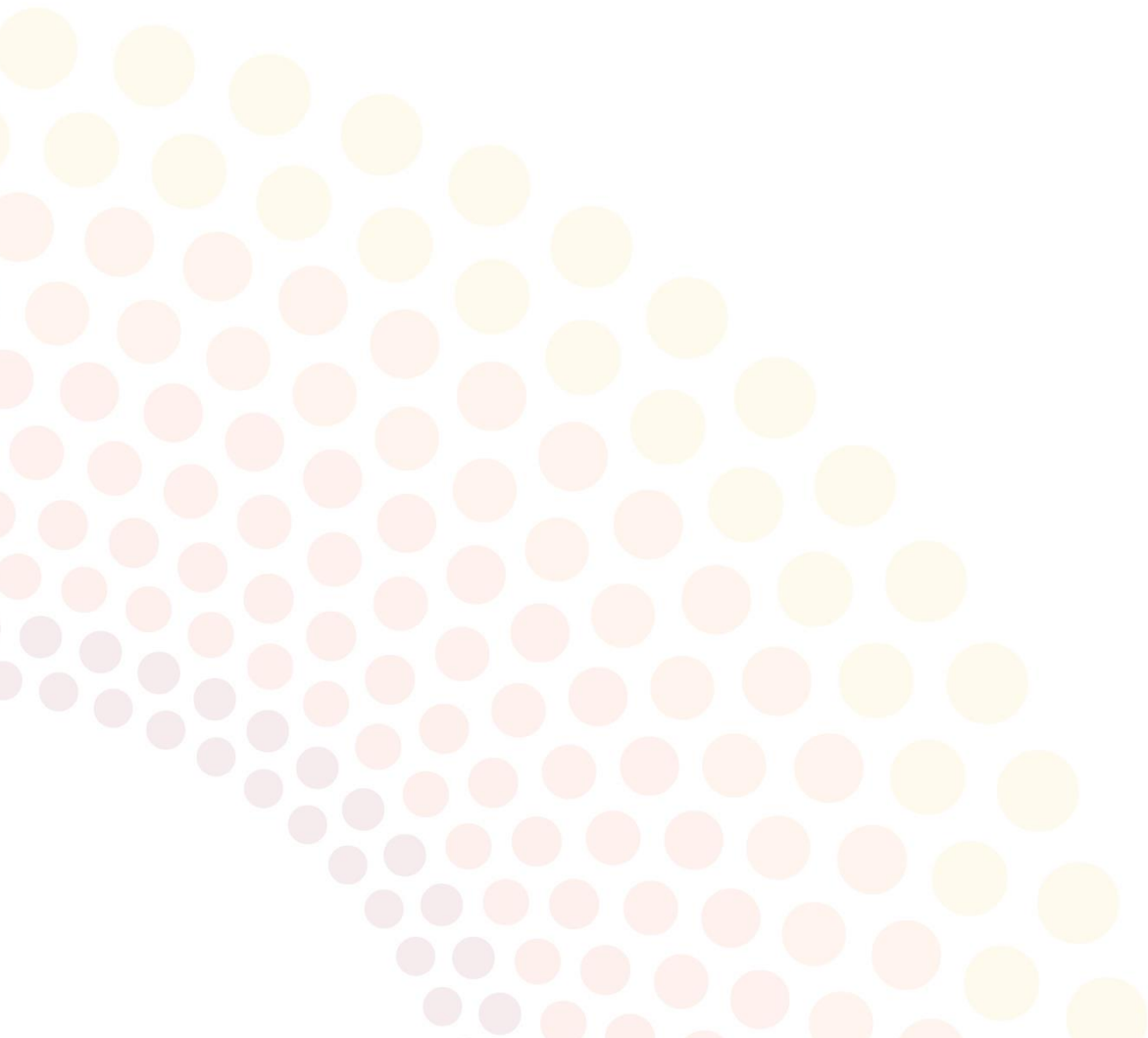
Planning and review

Supporting each other





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