

Making **SPACE** for Learning

Trauma Informed Practice in Schools

Discussion Paper 23

Working with other professionals to support students



Introduction

This discussion paper is one in a series designed to stimulate discussion and sharing of experience, amongst staff in educational settings working with children who may have experienced complex relational trauma. The discussion paper will examine some effective strategies that are needed to work with other professionals to support children. The information is intended to be applied flexibly and in ways that respond to the unique characteristics of your school and community.

It is of no surprise that many studies have confirmed for children who have experienced abuse related trauma and have entered the care system perform much poorer compared to their peers. Their educational outcomes are worse and incidences of emotional, psychological, behavioural and other health problems are much higher (Taren & Hazell 2006). To respond to this, these children and young people need an approach that seeks a shared responsibility.



Supporting children and young people who have experienced trauma.

By virtue of their experience of trauma, children can enter a complex service system that can have any number of professionals involved from both government and non-government services. These professionals can include child protection workers, foster care support workers, residential care workers, police, legal advocates, psychologists, psychiatrists, social workers, family therapists, school counsellors, teachers, paediatricians, mental health practitioners and others. The involvement of these professionals with the child will be different depending on their role and period of involvement. For example, a child protection worker will focus on the care and protection of the child, while the police may only be concerned with the collection of evidence for the prosecution of an offender.

The number of professionals that can be involved gives some insight as to how the care system can assist children in their healing from abuse related trauma. This is a positive in that the collaboration of these services, offers more support and more voices to advocate for the child's needs. On the other hand, unless these different services work together in a coordinated fashion, they may be useless or worse still - get in each other's way. These children commonly have multiple and sometimes competing plans, such as Families SA case plan, health plan, Individual Education/Learning Plan, cultural plan, behaviour management plan (names different depending on jurisdiction) and children can become overwhelmed with professional demands (Australian Childhood Foundation 2013).

Despite each professional's level of involvement, it is essential for the child that they experience a network of people who are caring and attentive to their needs. Well-known child psychiatrist and leading expert in childhood trauma, Bruce Perry (2003) advocates that healing comes from a network of people who provide healthy and secure connections. Considering this, it is essential that these connections provide the child with clear and consistent communication, then the child will experience maximum effect of the services and more importantly with the relationships which facilitate them.

There is recognition that the role of healing can be far too big for just one person, so recovery from trauma requires the creation of a relational network of people who are committed and invested in the child. The teacher-student relationship is very important in this healing. Children spend approximately five to seven hours a day with a teacher for almost ten months in the year meaning that their relationship is vital. The intervention or strategies developed by other professionals may be central to supporting the child's participation in other areas such as the classroom and these often need to be followed through consistently in all aspects of the child's life.

Achieving collaboration amongst professionals can be achieved through a multitude of ways. Here are some effective practice suggestions:



1. Be proactive

It is common for educators to become frustrated with lack of contact with other professionals involved particularly with child protection staff. The role of child protection can differ immensely for each child depending on the nature of the abuse. In their initial involvement, they have limited time to investigate the alleged abuse and make decisions about the protection of the child. Demands placed on those caseworkers responsible for this are many and include ongoing supervision of present cases while acquiring new cases each day. Caseworkers are constantly responding to urgent matters, writing court reports, appearing in court, visiting with children and families, and a host of other tasks. This results often in removal of any hope of communication with school personnel. To compete with this, educators need to be proactive in their involvement and be motivated to work together. As a profession, educators must self-proclaim their roles in the lives of these vulnerable children and remind all other professionals that they, too, need to have an active role in the support of the child. Educators ought to suggest alternative forms of communication (e.g. emails, communication logs) and agree to meet at times and alternative locations that are feasible for everyone's attendance. Some critics fear that collaboration can mean just a lot of talking that takes educators away from their tasks. But the involvement of educators in supporting the child holistically will make for quality education and increased support for both the child and educator.



2. Establish a Care Team

One of the most effective ways to ensure communication and consistency across the services is a model of service provision where a range of different professionals come together to help and support a child and their family or carers. This is the creation of a care team. The model requires professionals to work in close collaboration, regardless of which service or agency they work in. It allows for information to be effectively shared amongst all members of the care team. An effective care team is characterised by everyone whom is working with the child to be informed about trauma and its impact on children. Additionally, everyone needs to have a shared understanding of the child's experiences, a commitment to partnership and work collaboratively to interpret the child's

needs. As a result, children and their family are less likely to be receive conflicting messages or become overwhelmed by the professionals who are there to help and support them. Before meeting with a care team, educators may want to consider making notes of things you want to discuss as many people forget what they want to say when they're nervous. A list will help you remember.



3. Clarify Roles & Responsibilities

Take time initially to clarify roles and responsibility of all professionals involved. Each professional should have a clear role and sense of contribution. The role of educators is clearly more than just planning and executing lesson plans, it is a key relationship that requires recognition. Clarifying roles and responsibilities can help reduce 'turf' issues by pre-planning and highlighting the positive outcomes of collaboration.



4. Be confident about confidentiality

Educators can feel confused about what information they can share with other professionals as well as with foster or birth families. The answers to these questions vary from state to state. It is highly suggested that you find the answers to your questions about confidentiality as the worst response is to not provide information that is needed to support a child. In response to this issue SA Government implemented *Information Sharing Guidelines for Promoting Safety and Wellbeing* (ISG). These guidelines have assisted to remove confusion and anxiety for staff about how information can and should be shared across government and non-government agencies (Ombudsman SA 2008). The guideline can be found at:

Suggested Reading: <http://www.ombudsman.sa.gov.au/isg/>

On the other hand, there will be elements to the child's case which cannot be shared with the school usually pertaining to information directly about the parents or other siblings. Educators and school staff may be asked to only attend part of a meeting so that other issues can be discussed. Be mindful of this and respect all professionals boundaries of confidentiality.



5. Establish trust and respect

Effective teamwork is characterized by mutual trust and respect for one another's expertise. It is inevitable professionals will experience frustrations with one another from time to time. The myriad of views about what is best for children can make it impossible to please everyone all the time. It is important that educators assert their opinions and insights, but do so in a way that elicits trust. To do this, it is important to listen to the input of all professionals, and speak about other professionals in positive terms. However, most importantly, educators should show a willingness to adopt new practices when requested and feasible.



6. Involve the child

Children are equal partners in the team process and need to have a genuine role in decision-making about matters that affect them, not a tokenistic contribution. Their participation in a meeting is a process that should include preparation, explanation, consultation, discussion and negotiation, rather than a once off attendance. Determining who should do this with the child is something that requires consideration and discussion within a care team. Remember that a child's views can still be heard whether they do not attend the meeting, attend only part of the meeting, attend via a different medium (such as phone or video), have someone or something else (like a picture, letter or photo) to present their views.



7. Engage Parents and/or Carers

Over recent years, there has been increased involvement of the primary carer and their role with healing for children. It is necessary to develop an understanding of the challenges that parents or carers have faced and take time to develop honest, respectful, and supportive relationships with them that allow you to share information about the child's progress.



8. Expand awareness

Educators often do not receive information about supporting children who have experienced abuse related trauma in their pre-service training. Some educators may feel challenged by the complex needs of these students and overwhelmed by the number of professionals who are involved. One option to combat this is to explore training and conferences that build awareness about these issues and provide the necessary training to assist you to understand the needs of children who have experienced abuse related trauma. Your school or care team may want to consider attending SMART training or participating in the SMART online training where everyone can gain a shared understanding and common language.

Suggested Training: <http://www.childhood.org.au/training/smart-online-training>



9. Be aware of splitting

In addition to the complexity of the number of professionals involved with children who have experienced abuse related trauma, children bring with them powerful emotions which are unconsciously transmitted to the network surrounding them (Conway 2009). Splitting creates instability in relationships because children may divide people into separate, often hostile, groups. Opportunities are needed to discuss and reflect on these issues to avoid professionals falling into this unhelpful approach. Children who have experienced abuse related trauma will need support to navigate and rely on relationships.

The reality of teaching in today's world is that schools must be prepared to educate children from a range of backgrounds, however, it should not be expected that one teacher or one service will have all the skills to adequately address all of the needs of the most complex students. Everyone who works with traumatised children have a role to play in best supporting them to achieve success not only in the classroom but in their wider world. No longer do we need or should want to work in isolation of each other. To best achieve what children require, professionals need to be open and

flexible to a different way of working. This may mean that educators will need to go beyond what they are currently doing but the benefits far outweigh any issues that need to be considered.

The following questions ask you to reflect on some of the issues raised and share your thoughts and knowledge with colleagues across the education system and other work environments.



Questions for reflection or discussion

1. How would you implement PRACTICE as a care team? What role can the educator play in this?
Predictability?
Responsiveness?
Attuned?
Connectedness?
Translating?
Involving?
Calming?
Engaging?
2. Is there a Care Team already established for the child or does one need to be created?
Who do you need to network or liaise with?
3. What things can you do to improve relationships or communication with your colleagues, other professionals and/or the child's family? Specifically think about how you communicate a child's needs and progress to others.
4. What strength & values do you bring to a team supporting a child?
5. What professional qualities are important when participating in a care team?
6. What assistance is required to help you participate in a care team? Think about what support you might need? Are there things you need to do? Are there things that you need from others?



References

Australian Childhood Foundation (ACF) 2013 *Team Around The Child*. PowerPoint presentation. Melbourne

Conway, Paula. 2006. *Falling Between Minds: The Effects of Unbearable Experiences on Multi-Agency Communication in the Care System*. Adoption & Fostering Volume 33 Number 1

Ombudsman SA. 2008. Information Sharing Guidelines for Promoting the Safety and Wellbeing of Children, Young People and their Families. Viewed 11th December 2013.

<http://www.ombudsman.sa.gov.au/isg/>

Perry, Bruce. 2003. Effects of Traumatic Events on Children. The Child Trauma Academy

Taren, Michael and Hazell, Phillip 2006. 'Mental Health of Children in Foster and Kinship Care in, Australia,' Journal of Paediatrics and Child Health 42