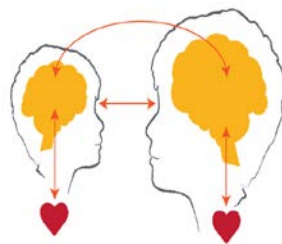


The non-offending parent's nervous system:

Family violence is an assault on the victim's sense of safety - activating the nervous system's fight, flight, freeze and/or withdraw response. An environment that is consistently frightening and unpredictable switches on this defence system in both the child and the non-offending parent. The dynamics used by the perpetrator of family violence sabotages the parent child relationship. As the non-offending parent is often preoccupied with the perpetrator's use of violence and is often engaging in strategies to keep herself and her children safe, it disrupts attunement and the capacity for intersubjectivity, impacting on the child's physiological state, development and sense of self. The right brain to right brain connection between parent and infant will often be developed around the mother's own biological sense of terror and hypervigilance. If infants and young children borrow their parent's brain during early development, then what they are borrowing is that of terror and hypervigilance.

The right hemisphere in relationship

- These primary relationships contribute to:
- stored internal working models of primary relationships recorded in the right hemisphere
- the perception of emotion in self and others, enabling empathy and humour.



Baylin and Hughes (2012) state parenting is an ancient mammalian mind–heart process, which allows a caregiver to stay engaged and regulated enough to sustain the mind-to-mind, heart-to-heart connections that are vital for a child's development. Parenting is rooted in openness and safety, not in survival-mode self-defence.

The neuropsychological foundations of the healthy parenting brain allow the carer/parent to be open and to respond appropriately to their child's needs. When a parent/child engages in moments of happiness, it encourages the parent to respond using the approach mode, activating parts of the left hemisphere, including regions of the pleasure system (the nucleus accumbens) and the brain's reward system. Oxytocin and dopamine is then released into the limbic system, keeping the parent's defence system off and the approach system turned on. In moments of a child's distress, parts of the parental brain on the right side become active, encouraging the parent to respond empathetically to the child pain/distress. The anterior cingulate cortex (ACC) and the insula (visceral brain) becomes active, increasing parental vigilance urging the parent to comfort the child.

Stress such as family violence affects the parenting brain and can lead to blocked care. If the non-offending parent is focused on survival and self-defence, the brain becomes hypervigilant and any

signs of distress, danger and/or anger, will trigger the amygdala and set off the defensive response. The threat-detection system is activated within a tenth of a second, leaving the non-offending parent in a constant state of defensiveness. This then constricts the non-offending parent's child-reading, reward-expectancy and approach systems. Forcing the non-offending parent to become distant to protect themselves, leading to block care. The non-offending parent may want to engage and enjoy their children, but are unable to activate the healthy parental systems due to block care.

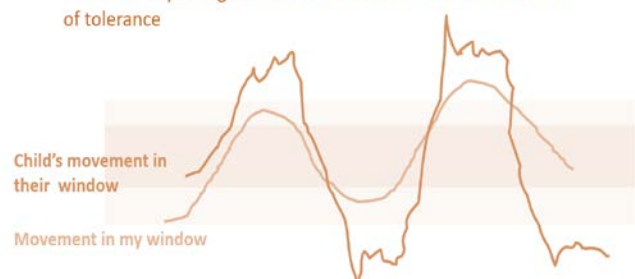
The Safe and Secure Intervention Framework applies to the non-offending parent as it does with the child.

The non-offending parent is supported to:

- Be safe - from both the perpetrator as well as establishing biological safety through building regulation skills
- Find stability – Psychosocial supports
- Build strong connections with significant others – family, friends, community and service supports
- Enable meaning making – therapeutic intervention, family violence counselling
- Promoting growth and recovery – building healthy brain and social engagement system to enable strong and attuned connection to her child.

If the non-offending parent can establish safety and can learn to regulate their own nervous system, they will then be able to regulate their child's.

- When people are in relationship one's ability to regulate them self in relation to their window of tolerance will effect the other's ability to regulate them self in relation to their window of tolerance



This summary takes into consideration the dynamics of family violence – that the risk to the non-offending parent increases when they leave the perpetrator, that the non-offending parent is often enmeshed in the relationship will often reconnect or maintain connection to the perpetrator until they feel fully able to leave the relationship. It also acknowledges that other factors are often in play – the mother's socio-economic status, mental health, substance use, own trauma history etc.

How trauma hijacks learning

A memo from a four year old

This blog entry was authored by Jeanette Miller, Senior Consultant in the Parenting and Early Years Program, at the Australian Childhood Foundation, from the perspective of a four year old child who has experienced trauma.

'When I was a baby and I got upset, I was totally dependent on bigger, stronger, wiser and kind adults to regulate my stress. But the adults in my life were none of those things and I could not depend on them to understand or meet my needs. Without someone to reliably buffer my stress, I grew to feel unloveable, hopeless and helpless. Because my cries for help were often not answered, I gave up asking for help and now I find it hard to trust people and feel like I have to do everything myself.'

'The toxic levels of stress hormones that remained in my system for long periods of time affected some parts of my brain. Many cells were destroyed in my developing Hippocampus, making it hard for me to make sense of experience and to remember what you taught me last week and yesterday. Those stress hormones also damaged my Corpus Callosum so my left and right brain hemispheres are not well integrated. This means I find language-based activities really tricky and being more right-brain oriented, I'm a visual learner. I'm also particularly tuned in to your non-verbal communication...though I often mis-read facial cues because the big people in my early life never made an effort to 'get' what I was trying to say emotionally. I'm always on the lookout for angry faces and often see anger when it's not really there. Maybe that's why not many of the other kids want to play with me.'

'When I don't feel safe, my ears are tuned in to low-frequency 'predator sounds' like the rumble of traffic or planes outside, or the air-conditioning unit in the room, and I can't hear what you're saying to me. Please use your storytelling, melodic voice when you talk to me'



'Sometimes a particular smell, sensation, texture, light...or even a facial expression, movement or tone of voice that you use, acts like a trigger to instantly return my body to the traumatised state it was in at the time I was neglected or abused. I have no understanding of when or why or how that happens...it just happens automatically...I can't help it. Please don't take my reactions personally, but try to understand and to observe patterns to make sense of this.'

'When I don't know what's going to happen next, I feel unsafe and my body will quickly get ready to fight or run away. Please make every part of my day predictable with familiar people, places and routines. Stay connected with me through every change of place or activity.'

'When I'm scanning the environment for danger, I can't focus my attention on learning tasks. Please help me to feel safe so that I can connect, play and learn.'

- See more at: <http://childhoodtrauma.org.au/2016/september/how-trauma-hijacks-learning#sthash.mnk3XDrt.dpuf>

PACE – Dan Hughes

<http://ddpnetwork.org/about-ddp/meant-pace/>

P

- Creates an atmosphere of lightness, openness and interest
- Antidote to shame, anger and fear; “stress buster”
- Involves smiling, laughter and humour
- Telling funny stories
- Being able to laugh at yourself and not take yourself too seriously
- Being together, enjoying each other’s company, having fun!!! Generates pleasure and delight; desire to spend more time together.
- Caution! Don’t use sarcasm or laugh at the young person

Playful

A

- Being able to see the child underneath the behaviours
- Unconditional acceptance for the child (but not their behaviours)
- Creates a sense of safety and security for the child
- Non-judgementally accepting the young person’s views, feelings, thoughts, motives, perceptions, regardless if they are true or not
- Avoid negative judgements – e.g. don’t say “*you just took that money because you have no respect*”; instead you can say “*I am cross that you took that money*”

Accepting

C

- Wanting to get to know and understand the young person
- Interest in understanding what is going on for the young person here and now; show acceptance and empathy - e.g. “how does that seem to you; tell me about that; what do you think about that” etc.
- Attitude of not knowing rather than assuming
- Opens doors for exploration and discovery, the real “stuff”
- Can make guesses about what the young person is thinking or feeling (e.g. “I wonder if...”); saying out loud as if just to yourself, not expecting an answer

Curious

E

- Allows the young person to feel understood; i.e. “you get me”
- Shows the young person that adults are kind, strong and able to help
- Capacity to “sit” with the feeling, no matter how difficult, and “hold” the young person through it
- Communicates “you are not alone, I am here with you and for you; we will get through this together”
- Not problem solving or reassurance

Empathic

Trauma and the brain

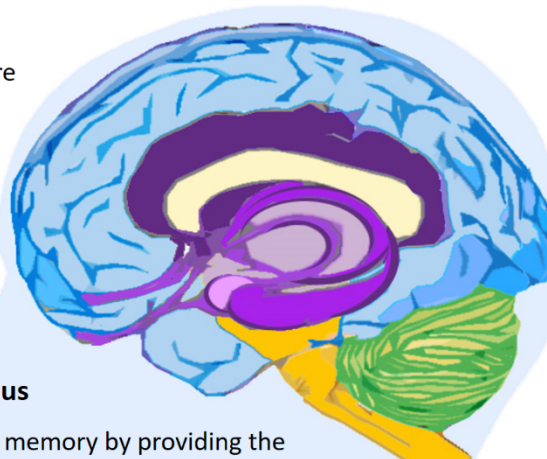
- Trauma reduces the capacity of children's brains to shape the way they react to the environment, i.e. in adaptable and flexible ways to different situations and contexts.
- It results in children reacting instinctively, and at times inappropriately, without understanding why.
- These children have few or no effective internal maps to guide their actions, and have difficulty making meaning of their experiences.
- They do not understand or engage with consequences for their behaviour.
- Trauma based behaviour, in general, serves important adaptive and survival functions, and often makes sense in the context in which it first emerged.
- Can usually be identified as patterns or repetitive routines that play themselves out in the relationships and environments that children are engaged in.
- Is influenced by change, unpredictability, increasing levels of stress, rhythms and sensory stimulation within the environment, and negative self identities.
- Often reflects ruptures in children's relationships.
- Their brains are so over-activated that they struggle to take in information and learn new things.
- memory systems (eg. working memory) remain stressed, and as a result, their capacity to remember even the easiest of instructions is compromised.
- They find it difficult to separate the past from the present, often reacting to sensory triggers and other unconscious reminders of past experiences that were fearful and unsafe.

Amygdala

Survival response centre within the limbic lobe that becomes enlarged and more sensitive the more it is activated through responding to threats

Hippocampus

Consolidates memory by providing the context/ sequential data for episodic memories. Goes offline if trauma overwhelms and disrupts cortex.



Corpus Callosum

Bridge between the 2 hemispheres. Chronic stress can damage and thin down this bundle of neurons

Trauma and the body

- When under perceived threat, children's bodies are mobilised towards survival and become oriented to fight, flight and freeze responses.
- Chronic exposure to family violence causes the brain-body system to become stuck in a hypervigilant state, constantly scanning the environment for threat.
- Children lose the capacity for adaptive and flexible responses to change, and their brain-body system is easily stressed by even small changes in their environment.
- Any change, good or bad, is experienced as a threat that can quickly trigger a significant stress response which overwhelms the child.
- Children's bodies become frozen in time. Their muscles and bodies continue to react in ways that they have learnt to, in order to survive the violence and the associated distress and fear.
- Children's developmental trajectories are altered, with their development slowing or not moving beyond the stage they had reached when the family violence began



Trauma and emotion

- Children's experience of inconsistent, frequently misattuned, unpredictable and sometimes dangerous responses to their emotions and behaviour, disrupts their capacity to organise their internal emotional world and develop emotional literacy.
- They become disconnected from their feelings, cannot name or describe these feelings, and do not understand that there is a continuum of emotions.
- Children cannot trust their external world to acknowledge, value, or verbalise their feelings, so they learn not to trust their own feelings.
- Because children experiencing family violence have no sense about what to expect next, their arousal systems are always elevated and their emotional worlds are in constant flux.
- Feelings can be experienced as big and overwhelming, leaving them confused, fearful and without support.
- Anger is often used to mask or express sadness, distress, uneasiness, confusion and frustration.

Trauma and behaviour

Trauma based behaviour can be categorised in a range of ways:

- Stress Oriented Behaviour (fight, flight and flop responses)
- Comfort Seeking (patterns and routines of behaviour aimed at self soothing)
- Self Protection (behaviour becomes self protective in the face of abusive relationships, and adults who have stopped being sources of comfort)
- Trauma based behaviour, in general, serves important adaptive and survival functions, and often makes sense in the context in which it first emerged.
- Can usually be identified as patterns or repetitive routines that play themselves out in the relationships and environments that children are engaged in.
- Is influenced by change, unpredictability, increasing levels of stress, rhythms and sensory stimulation within the environment, and negative self identities.
- Often reflects ruptures in children's relationships.



Safe & Secure Intervention Framework

OUTCOMES

SAFETY

STABILITY

DEVELOPMENT

DOMAINS

Protect

Strengthen
Connections

Enable
Meaning
Making

Promote
Growth &
Recovery

FOUNDATIONS

ADDRESS DYNAMICS OF FAMILY VIOLENCE

SUPPORT NETWORK ENGAGEMENT & COLLABORATION

ENSURE CULTURAL INTEGRATION

The feeling baskets

Put three baskets in three different spots in the room and distribute post-it notes among participants.

Ask participants to write down their six core emotions on separate post-it notes and categorise them using the three baskets:

according to the extent that their feelings were acknowledged by their primary caregivers.

The Green basket:

For feelings that were accepted / held by own parents



The Sandalwood basket:

For feelings that were partially accepted held



The Red basket:

For feelings that were not accepted / not held by own parents



Top Ten Tips

- ❖ Psychoeducation about neurobiology, trauma and relational theories forms an important part of how we support parents to think about the impact of family violence on themselves and their children, and how to meet their children's needs.
- ❖ Our nervous systems assess safety based on non-verbal sensorimotor-based cues (i.e. movements of the face and body, tones of voice, vocalisations, head and arm movements, etc.)
- ❖ Family violence is an assault on the victim's sense of safety. Activating the nervous system's fight, flight, freeze and/or withdraw response. An environment that is consistently frightening and unpredictable switches on this defence system in both the child and the non-offending parent.
- ❖ Stress such as family violence affects the parenting brain and can lead to blocked care. If the non-offending parent is focused on survival and self-defence, the brain becomes hypervigilant and any signs of distress, danger and/or anger, will trigger the amygdala and set off the defensive response.
- ❖ How a parent has come to make sense of their early life experiences, is the most robust predictor of how their children will become attached to them.
- ❖ The experiences of children and their mothers are complex. Some become closer to each other, while for other mothers and children their experiences of family violence fragment their connection, and further separates children from accessing the relational resources they need.
- ❖ Children experiencing family violence have no sense about what to expect next, their arousal systems are always elevated and their emotional worlds are in constant flux.
- ❖ Trauma based behaviour, in general, serves important adaptive and survival functions, and often makes sense in the context in which it first emerged.
- ❖ Children's developmental trajectories are altered, with their development slowing or not moving beyond the stage they had reached when the family violence began.
- ❖ ACF's Safe and Secure framework seeks to build a shared platform of understanding from which consistent ways of responding can be developed, regardless of when and in what capacity a professional engages with children, young people, parent or family following family violence.