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Workshop Outline

- Developmental neurobiology and attachment and the impacts of trauma from abuse, violence or neglect on development and functioning.
- Intergenerational trauma, trans-generational trauma, the science of epigenetics and it's impact on our understanding of family functioning and the parent's capacity to illicit attachment.
 Trauma informed case formulations and psychometric testing
- Evidence-based practice strategies and skills for intervention with children and young people who have experienced complex developmental trauma, and their parents
 Trauma informed, culturally appropriate approaches to staff wellbeing
- Trauma informed, culturally appropriate approaches to staff wellbeing
 Link the knowledge and interventions explored in this workshop to you and your team's current and future practice.

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Messages of Safety

- Looking after yourselves during our time together is important,
- together is important, Our own self story, experiences and feelings, distress, sadness, and disappointments can bring up or trigger responses that are overwhelming and make us feel unsafe.... When hearing the stories of others, thinking and talking about children who have experienced significant abuse, neglect and persecution can sometimes have a triggering effect also....

r emotional safety is paramount, so se take care during the workshop





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"I am because we are"

"A person's core self – the self that is shaped by early attachment patterns – is defined by who the parental object both perceive him to be and deny him to be" *Bromberg 2001, page 57*

African proverb



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"Culture is central to identify, culture defines who we are, how we think, how we communicate, what we value, what is important to us. Our traditional view that Aboriginal children are the ender the set of the set of the set of the set really, included set of the set of the set really important that they take up that role, and that Elders play a critical role in the identify formation of our children.

(Muriel Bamblett 2014)

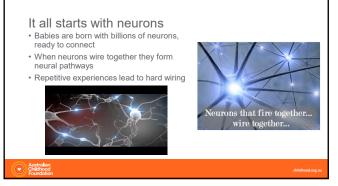
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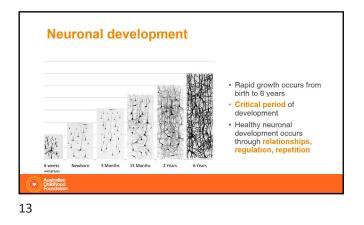
Our Worldview Cur worldview provides us with an ordere sense of reality. It enables us to mak sense of what we do and what we observ in the world and provides us with a sense of certainty and, to some degree at leas predictability. Our world view gives u security because it enables us to interpre what happens in the world in terms of mental framework that makes sense to us

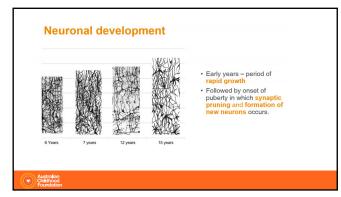






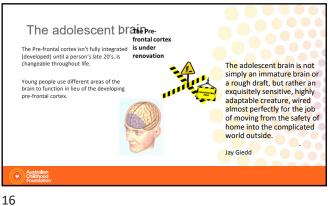


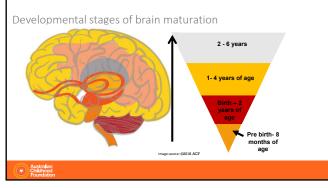






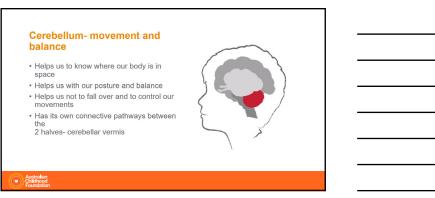














Limbic lobe- emotional gateway

- The part of the brain that helps us attach an emotion to an experience or memory
- This part of the brain is particularly involved with the emotions of fear and anger
- Also heavily involved in attachment processes

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This area develops mainly after birth

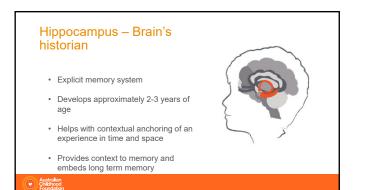


Brainstem - basic life functions

- Basic life functions
- First part of our brain to develop
- This is the most developed brain part at birth
- Responsible for our heart beat, breathing, sucking, temperature control, blood pressure

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Amygdala – smoke alarm

- Detects threat
 Incoming sensory information (especially smell) is processed for an emotional and survival responseProcesses social clues, including
- faces
- Learns by association
 Involved in implicit memory
- ProcessesHypersensitive and overactive
- amygdala is at core of anxiety based disorders

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Cerebral cortex- complex thinking

- · The largest part of the brain
- Associated with higher brain function such as thought and action · Examples of functions:
 - Reasoning

 - Logic
 Judgement
 - Voluntary movement

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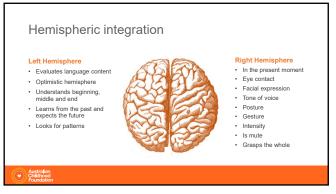
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The prefrontal cortexexecutive function Responsible for executive functions, such as judgement, reasoning, and self awareness Final part of the brain to reach maturity in one's late 20s -30s Under reconstruction in adolescents from the age of approximately 12 years

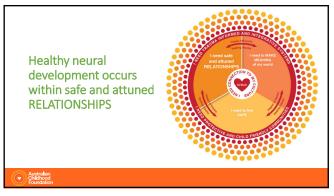
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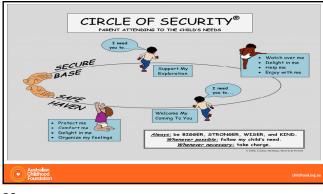




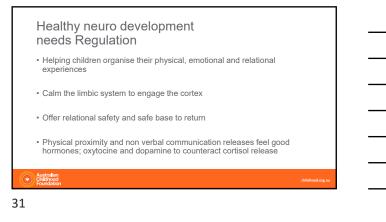


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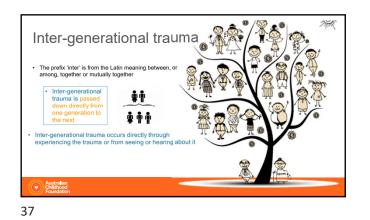




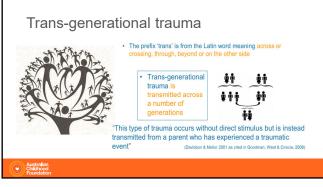
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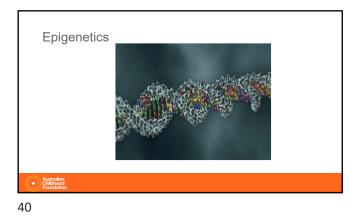
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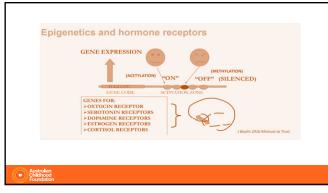






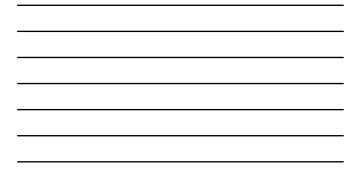






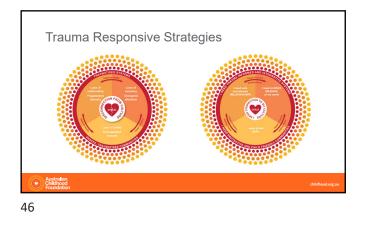


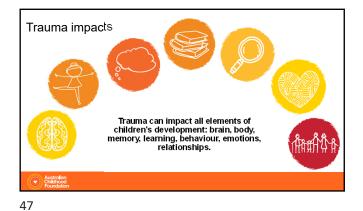


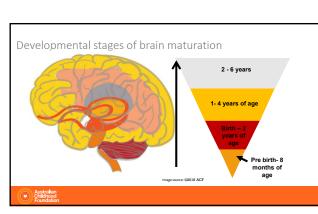






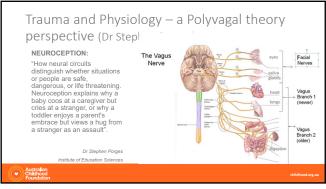




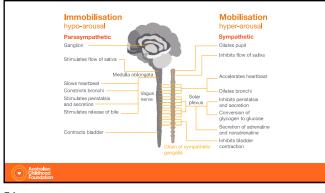








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Hyper- arousal

- A child adopting a hyperarousal response may display defiance, easily misinterpreted as wilful opposition.
- These children may be resistant or even aggressive. They are locked in a persistent "fight or flight" state.
- They often display hypervigilance, anxiety, panic, or increased heart rate.



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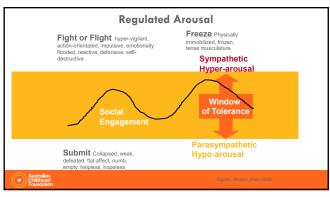
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Hypo-arousal

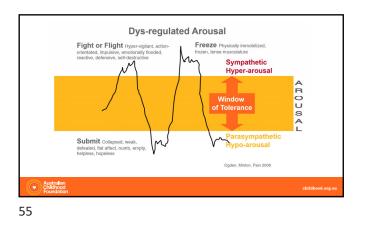
- The dissociative response involves avoidance or psychological flight, withdrawing from the outside world and focusing on the inner.
 The intensity of dissociation varies with the intensity of the trauma. Children may be detached, numb, and have a low heart rate. In extreme cases, they may withdraw into a fantasy world.
 Dissociative child is often compliant (even robotic), displays rhythmic self-soothing such as rocking, or may faint if feeling extreme distress.
- Dissociation is more common in young children, females, and during traumatic events characterized by pain or inability to escape.

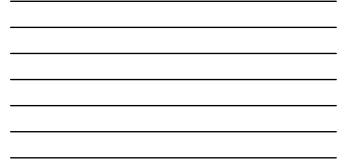
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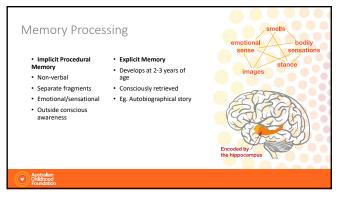




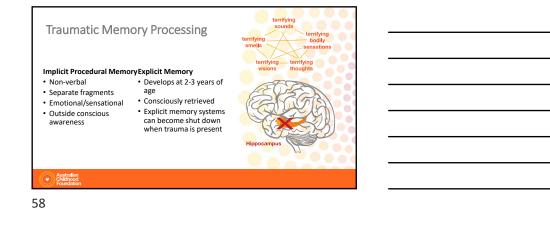
Why is regulation so important?

- · Facilitates cortical functioning
- Enables integration of sensory data
- Promotes awareness of Neuroception
- $\ensuremath{\,\bullet\,}$ Holds attention to the here and now, rather than pulling it to the past
- Reinforces co-regulation as foundational and necessary

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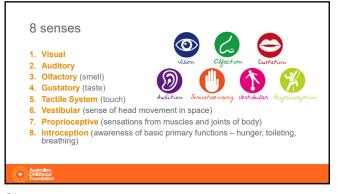












· Polraumanconsistent presentations to one or more sensory inputs (thalamus) Coordination or gross motor difficulties (cerebellum)

- Discuss • Weight or growth concerns, appetite issues, teething delays, sleep issues (hypothalamus)
- Executive function difficulties; impulse control, problem solving, paying attention (prefrontal cortex)
 Difficulty naming and regulating emotions (corpus callosum, L-R integration)

What do you often see as 'reason for referral' in your health settings? How does a trauma-lens help you understand these presentations?



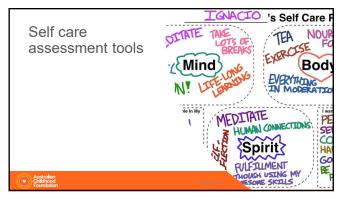








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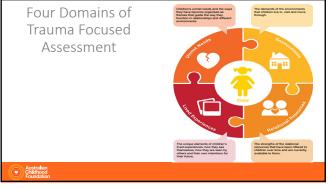


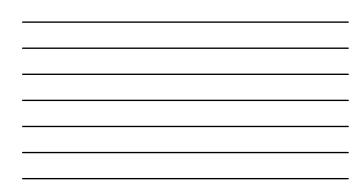




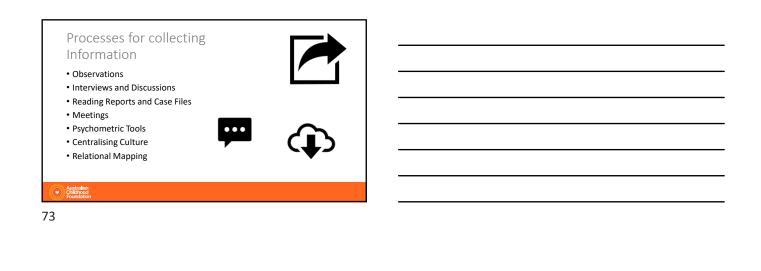
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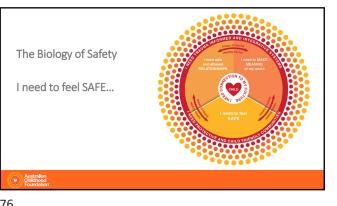






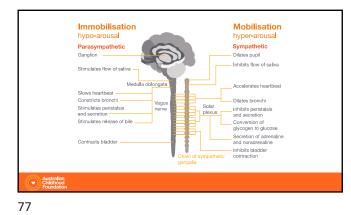








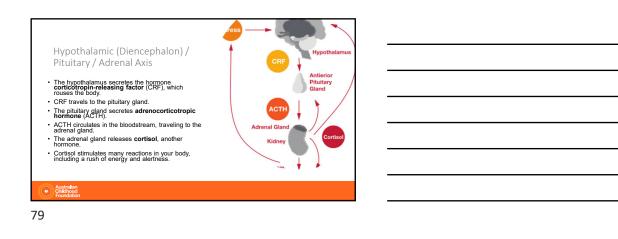


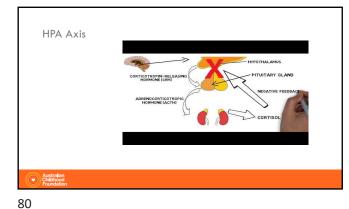


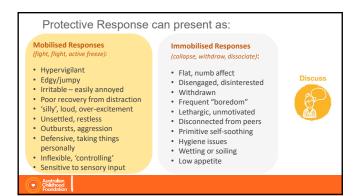
















 Working with protective responses

 • Rhytm

 • Containing

 • Grounding

 • JennetBilsation

 • Orientation to Senses

 • Orientation to Senses

 • Dratediage the Spine

 • Drosody

 • Breathing







Containing techniques

Grounding techniques

Working with children who show mobilised responses- fight/flight



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Working with children who show IMMOBILISED responses - Freeze

What it might look like

- Arousal is high, but movement is inhibited
 May look confused or distracted
- Scanning the room, dilated pupils, wide eyes Supportive responses
- Be curious with the child about the freeze state-are there any places that are less frozen than others?
 Gently facilitate movement eg. Wiggling one finger
 Play with metaphors like thawing ice
 Encourage breathing
 Engage senses



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Working with children who show MOBILISED responses - Fight

nat it might look like • angry, aggressive, table • confrontational, controlling, shouting • ming others, pushing others away, jumentative

Supportive responses Help me stabilise my hyper-aroused nervous

sys

Rhythm, containing and grounding
Match my energy before helping me calm down Hanging, swinging, climbing, marching









- Point to something green/plastic/soft..... Encourage the child to look up and out rather than down- hang an interesting object at height in the space
 Name out loud, objects in the room
- Open a window
- Move outside if you're inside and inside if you're outside • Take shoes off and feel feet on the floor





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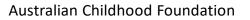
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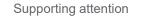
- When the spine is aligned there is no collapse
- Move like you have a long tail
- Tick tock like a clock until you find your centre
- Zip yourself up
- Walk with a toy balanced on your head
- · Grow yourself from a seed to a tree

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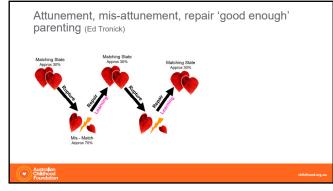
- Check the environment reduce overstimulation
 Check yourself your body language, tone of voice, facial expressions
 Know the child and their triggers

- Use relationship to help the child regulate co-regulation Provide sensory tools that the child can ground with
- Try music, song, rhythm, to calm the brain stem and reduce bottom up hijacking by the survival brain

















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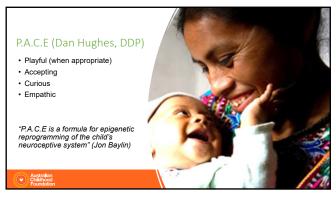


Relationship based strategies

- Encouraging safe, enriching, positive relationships with others and the broader community (for children and families)
- Be empathetic of trauma history, triggers, needs, desires
- Encourage parents to repair when there has been rupture- time in
 Understanding that all behavior has a meaning
- Interventions which enhance parental reflective functioning



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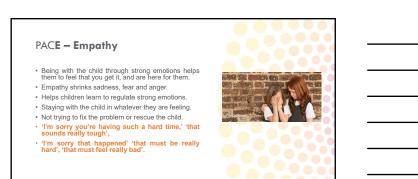


- Seeking to know more about and understand the child.
- Vonder' and 'what do you think' questions, and guessing and checking rather than asking 'why'.
 Seeking to understand from a 'not knowing' stance and being open to the child's understanding.
- "I wonder if you might be feeling sad because mum couldn't come visit today? Do you think that might be what's going on?"

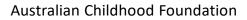


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- Research shows that we cannot influence children in a positive way until we create a connection with them.
 Connection creates a sense of safety and openness.
 Punishment, lecturing, nagging, scolding, blaming or shaming create fight, flight, or freeze.
- Validation of intense emotions mirroring, serve and return, naming emotions
- · Body language, facial expression, tone of voice
- Correction is about finding a solution with the child rather than imposing a punishment



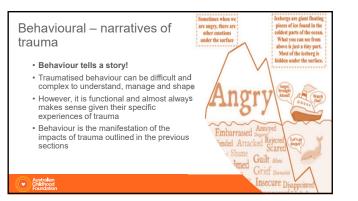


Holding the child at the centre...











Helping Parents Make Meaning of Behaviour

- When parents feel understood, they become open to trying to understand others
 Always consider the underlying function of parents' behaviours and reactions
- behaviours and reactions
 Help parents to wonder about their child's inner world
 Develop openness and curiosity about behaviour
 If we can understand what drives a behaviour, we can work out how to respond to it
- If we can meet the need that is driving a behaviour, the behaviour can start to reduce Some clues: is the behaviour a fight/light/freeze/withdraw response? Is it related to hiunge/firedness? Is it a bid for connection or space?

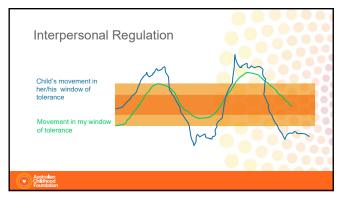


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DAILY

ROUTINES

Strategies for healing

Behaviour can be shaped by the child's environment:

- Consistency, responsiveness and predictability build safety in the environment
- Validation of their feelings, experiences and achievements, by the significant people in their lives.
- The experience of being heard and understood, helps the child develop a template that says, **"My needs are important.**"

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Trauma informed and integrative systems

- Systems are designed and function, at all levels, with the child and young person in mind and an understanding of the core needs of children who experience trauma
- Trauma informed organisations polices and procedures that reflect understanding and are responsive to children, young people and the impacts of trauma from intake and assessment through to closure
 Underpinned by neurobiological and environmental safety
- · All relationships are therapeutic
- Child is central to all decisions and has a prominent voice in the process
- Collaborative practice is a key component of the work
 Worker well being is supported wellbeing, workloads, training,
 supervision and reflective practice are key components of practice

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Where you can go for support

- Raising Children Network: <u>http://raisingchildren.net.au/</u>
 1800 Respect: <u>https://www.1800respect.org.au/</u> 1800 737 732
 Domestic Violence Resource Centre Victoria: <u>http://www.dvrcv.org.au/1800-respect</u> 1800 737 732
 Kids Helpline: <u>https://kdshelpline.org.au/</u> 1800 551 800
 For adolescents: <u>http://wogodbadug/yccom/</u>
 The Line (Youth violence): <u>https://www.theline.org.au/</u>
 Safe Steps (Crisis support): <u>https://www.safesteps.org.au/</u> 1800 151 188
 Carer Cafewar.www.caregrefeawa.gov.au 2100 422 737

- Sate Steps (Lrsis support) <u>into://www.satesteps.org.au</u> 1600 U15 188
 Carer Gateway, <u>www.caregreateway.gov.au</u> 1000 422 737
 Mensiline: <u>https://mensiline.org.au/</u>
 InTouch Multicultural Centre Against Family Violence1800 755 988, <u>www.infouch.asn.au</u>
 Relationships Australia (Victoria), 1300 364 277, <u>www.relationshipsvictoria.com.au</u>
 Centres Against Sexual Assault (CASA)9635 3610 (Counselling and support line), <u>www.threwormes.org.au/</u> SexualAssault

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